COVID-19 Administrators of Colleges and Universities Guidance

BACKGROUND

The Oklahoma State Department of Health (OSDH) has developed this resource to provide information about the novel coronavirus (COVID-19) and to guide the management of students and staff who have returned to Oklahoma from recent travel to areas with known sustained community transmission of respiratory illness due to the novel coronavirus. This guidance also applies to individuals identified during a public health investigation to have a known exposure to a laboratory confirmed case of COVID-19. The Centers for Disease Control and Prevention implements level 2 or level 3 travel advisories for countries that are experiencing sustained community transmission. For a current list of countries where travel alerts are in place due to COVID-19, please visit the CDC novel coronavirus information for travel website at https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html or the CDC traveler’s health website at https://www.cdc.gov/travel.

At this time, novel coronavirus is NOT currently spreading in the community in Oklahoma and the immediate health risk for the general public from COVID-19 is considered low. However, OSDH recognizes university and college students, faculty, and staff in Oklahoma are concerned about the current outbreak of novel coronavirus. Public health officials are working with other state departments of health and the CDC to learn as much as possible about COVID-19 so that we can better understand how it spreads and better characterize its associated illness. Public health is also working hard to develop guidance and education materials in the face of evolving information. The OSDH will update this guidance for colleges and universities as the COVID-19 situation evolves requiring modification to recommendations.

This guidance was adapted from the Centers for Disease Control and Prevention Interim Guidance for Administrators of US Institutions of Higher Education to Plan, Prepare, and Respond to Coronavirus Disease 2019 (COVID-19).

WHAT IS NOVEL CORONAVIRUS?

Coronaviruses are a large family of viruses. Many of them infect animals, but some coronaviruses from animals can evolve (change) into a new human coronavirus that can spread from person-to-person. This is what happened with the current novel coronavirus known as COVID-19. Coronavirus disease in people typically causes mild to moderate illness, like the common cold. Some coronaviruses, like the severe acute respiratory syndrome (SARS) coronavirus or the Middle East respiratory syndrome (MERS) coronavirus, can cause serious symptoms of illness like pneumonia.
What are common symptoms of COVID-19?

Information to date suggests this virus is causing symptoms consistent with a respiratory illness such as cough, fever, and shortness of breath. If a person has traveled from a country experiencing sustained community transmission of COVID-19 and develops any of these symptoms within 14 days of their return, they should seek medical care right away. Please call the healthcare provider and tell them that you have or may have COVID-19. This will help the healthcare provider’s office take steps to keep other people from being infected or exposed.

How is novel coronavirus spread?

Like other respiratory illnesses, such as influenza, human coronaviruses most commonly spread to others from an infected person who has symptoms through:

• Droplets produced when an infected person coughs or sneezes
• Close personal contact, such as caring for an infected person
• Touching an object or surface with the virus on it, then touching your mouth, nose, or eyes before washing your hands

Novel coronavirus is new, and we are learning more each day about how it spreads and how long it takes for people to become sick, which is 2-14 days based on current research. As information becomes available, we will keep you informed.

How is COVID-19 treated?

There is no specific treatment for illness caused by the novel coronavirus. Medical management is based on the patient’s condition. Complications or secondary infections caused by the novel coronavirus may require extensive medical treatment but the majority of cases will not require hospitalization or additional medical follow-up. There is currently no vaccine to prevent novel coronavirus.

What preventive measures help reduce the spread of respiratory viruses, like COVID-19?

OSDH recommends that colleges and universities increase education on respiratory hygiene. As with other respiratory illnesses, there are steps that everyone can take daily to reduce the risk of getting sick or infecting others with circulating viruses.

• Stay home when you are sick.
• Wash your hands often with soap and water for at least 20 seconds, especially after going to the bathroom; before eating; and after blowing your nose, coughing, or sneezing. Help young children do the same.
• If soap and water are not readily available, use an alcohol-based hand sanitizer with at least 60% alcohol. Always wash hands with soap and water if hands are visibly dirty.
• Avoid touching your eyes, nose, and mouth with unwashed hands.
• Limit close contact, like kissing and sharing cups or utensils, with people who are sick.
• Clean and disinfect frequently touched objects and surfaces using a regular household cleaning spray or wipe.

• Cover your cough or sneeze with a tissue, then throw the tissue in the trash. If you do not have a tissue, use your sleeve (not your hands).

**Prepare: Recommendations for colleges and universities that do not have a confirmed case of COVID-19 in their community**

As the global outbreak evolves, colleges and universities should prepare for the possibility of community-level outbreaks. Administration should take the following steps now to help stop or slow the spread of respiratory infectious diseases, including COVID-19:

• **Review, update, and implement emergency operations plans (EOPs).** This should be done in collaboration with local health departments, the university system, and other relevant partners.
  - Insure the plan is updated to include strategies to reduce the spread of a wide variety of infectious diseases. Effective strategies build on everyday policies and practices.
  - Ensure the plan emphasizes preventive actions for students and staff. Emphasize actions individuals can take including, staying home when sick, appropriately covering coughs and sneezes, cleaning frequently touched surfaces, and washing hands often.
  - Ensure handwashing strategies include washing with soap and water for at least 20 seconds or using a hand sanitizer that contains at least 60% alcohol if soap and water are not available.
  - Reference key resources while reviewing, updating, and implementing the EOP.
  - Develop information-sharing systems with partners.
    ◆ Institutional information systems should be used for day-to-day reporting on information such as absenteeism or changes in student health center traffic to detect and respond to an outbreak.
    ◆ Local health officials should be a key partner in information sharing.
  - **Monitor and plan for absenteeism.**
    ◆ Review attendance and sick leave policies. Students, staff, and faculty should not attend class or work when sick. Allow them to stay home to care for sick household members. Make accommodations (e.g., extended due dates, electronic submission of assignments), as possible, for individuals who may be temporarily unable to attend class due to restrictions placed on them related to possible exposure to the virus that causes COVID-19.
    ◆ Identify critical job functions and positions, and plan for alternative coverage by cross-training staff and faculty.
    ◆ Review the usual absenteeism patterns at your institution and on your campus among
students, staff, and faculty. Consider identifying and implementing processes for faculty and leadership to report noticeable changes in absenteeism, even if subjective, to a designated administrator.

◆ Alert local health officials about large increases in student, staff, and faculty absenteeism or substantial increases in student health center visits due to respiratory illnesses (like the common cold or the “flu,” which have symptoms similar to symptoms of COVID-19).

◆ Determine what level of absenteeism will disrupt continuity of teaching, learning, and research.

- **Establish procedures for students, staff, and faculty who are sick (with any illness) on campus.**
  
  ◆ Establish procedures to ensure students, staff, and faculty who become sick (with any illness) on campus or arrive on campus sick are sent to their place of residence as soon as possible.
  
  ◆ Keep sick individuals separate from well individuals until they can leave.
  
  ◆ Sick residents of on-campus housing in communities with no identified COVID-19 and who are not believed to have been exposed to COVID-19 should avoid contact with well individuals while sick.

- **Ensure college and university health clinics prepare for COVID-19.**
  

- **Perform routine environmental cleaning.**
  
  ◆ Routinely clean frequently touched surfaces (e.g., doorknobs, light switches, countertops) with the cleaners typically used. Use all cleaning products according to the directions on the label.
  
  ◆ Provide disposable wipes so that commonly used surfaces (e.g., keyboards, desks, remote controls) can be wiped down by students, staff, and faculty before each use.

- **Create plans to communicate accurate and timely information to the higher education community.**
  
  ◆ Include strategies for sharing information with staff, students, and faculty without increasing fear and stigma: [https://www.cdc.gov/coronavirus/2019-ncov/about/related-stigma.html](https://www.cdc.gov/coronavirus/2019-ncov/about/related-stigma.html). Keeping the community informed with accurate information can counter the spread of misinformation and reduce the potential for fear and stigma.
  
  ◆ Include strategies to communicate steps taken to prepare and how additional information will be shared.
  
  ◆ Include strategies to communicate changes to usual campus schedules or functions.
Respond: Recommendations for colleges and universities with confirmed cases of COVID-19 in the community

If local health officials report that there are cases of COVID-19 in the community, colleges and universities will need to take additional steps in response to prevent further spread of the disease. Public health officials will notify the President/Chancellor and director of medical services immediately upon confirmation of novel coronavirus in a college or university-associated case. Public health staff will work with university officials to identify who was in contact with the case and to begin the process to track and monitor contacts. The OSDH Office of Communications will also coordinate with university public information staff to develop messaging for mass communications.

• Determine if, when, and for how long to suspend classes and postpone or cancel events and activities.

  □ Temporarily suspending classes is a strategy to stop or slow the further spread of COVID-19 in communities. When classes are suspended, colleges and universities may stay open for staff or faculty (unless ill) while students temporarily stop attending in-person classes. Keeping the facilities open a) allows faculty to develop and deliver lessons and materials electronically, thus maintaining continuity of teaching and learning; and b) allows other staff members to continue to provide services and help with additional response efforts.

  □ Administrators should work in close collaboration with local health officials and the university system to make class suspension, event, and activity cancellation decisions.

  □ Colleges and universities are not expected to make decisions about suspending classes or canceling events on their own. State and local health officials can work with colleges and universities to determine if, when, and for how long to take these steps. Class suspension, event, and activity (e.g., on-campus sporting, theater, and music events) cancellations may be recommended for at least 14 days, or possibly longer if advised by local health officials. The nature of these actions (e.g., geographic scope, duration) may change as the local outbreak situation evolves.

• If a student, staff, or faculty member attended class or was active on campus prior to being confirmed as a COVID-19 case:

  □ Local health officials may recommend temporary class suspension and event or activity cancellation. Individuals may be considered active on campus if they had attended class, work, work-study, or some other type of gathering or event (e.g., student meetings, recreational activities) on campus. Local health officials’ recommendations for the scope (e.g., all campuses in a university system or only select campuses) and duration of school dismissals will be made on a case-by-case basis using the most up-to-date information about COVID-19 and the specific cases in the impacted community.

  □ University officials should work with the local health department and other relevant leadership to communicate the possible COVID-19 exposure. This communication to the faculty and student community should align with the communication plan in the emergency operations plan. In such a circumstance, it is critical to maintain confidentiality of the affected student, staff member, or faculty member.

  □ College and university administrators should seek guidance from state or local health officials to determine when students, staff, and faculty should return to campus. In addition, students, staff, and faculty who are well but are taking care of or share a home with someone with a case of COVID-19 should follow instructions from local health officials to determine when to return to campus.
• If classes are suspended, colleges and universities should consider the following steps:
  □ Temporarily cancel extracurricular group activities and large events.
    ◆ Cancel or postpone events such as club meetings, performances, social events, athletic team practices, and sporting events.
  □ Discourage students, staff, and faculty from gathering or socializing anywhere.

• Ensure continuity of education and research.
  □ Review continuity plans, including plans for the continuity of teaching, learning, and research. Implement e-learning plans and distance learning options as feasible and appropriate.
  □ Ensure continuity plans address how to temporarily postpone, limit, or adapt research-related activities (e.g., study recruitment or participation, access to labs) in a manner that protects the safety of researchers, participants, facilities, and equipment.
  □ Consider the following approaches:
    ◆ Use of existing infrastructure and services (e.g., Blackboard, Skype, Zoom) to support efficient transition of classes from in-person to distance-based formats. This may include using strategies such as faculty check-ins, recorded class meetings or lectures, and live class meetings.
    ◆ Other student support services such as online library services, print materials available online, phone- or internet-based counseling support, or study groups enabled through digital media.
  □ Consult with university regarding the following:
    ◆ How to convert face-to-face lessons into online lessons and how to train faculty to do so.
    ◆ How to triage technical issues if faced with limited IT support and staff
    ◆ How to deal with the potential lack of students’ access to computers and the Internet at home or in temporary housing.

• Ensure continuity of safe housing.
  ◆ Work in close collaboration with local health officials to make all decisions related to on-campus housing.
  ◆ If cases of COVID-19 have not been identified among residents of on-campus community housing, students may be allowed to remain in on-campus housing. In this situation, educate housing residents on the precautions they should take to help protect themselves when there is community spread of COVID-19. Residents should follow any more specific recommendations provided by local health officials.
  ◆ If cases of COVID-19 have been confirmed among residents of on-campus community housing, work with local health officials to take additional precautions.
    ▶ Individuals with COVID-19 may need to be moved to temporary housing locations. These individuals will need to be isolated and monitored for worsening symptoms according to the guidance of local health officials.
    ▶ Close contacts identified during public health investigations may also need temporary housing so that they can be quarantined and monitored for symptoms.
Consult with local health officials to determine when, how, and where to move ill residents. Information on providing home care to individuals with COVID-19 who do not require hospitalization is available on CDC’s website https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-home-care.html.

- Residents identified with COVID-19 or identified as contacts of individuals with COVID-19 should not necessarily be sent to their permanent homes off-campus.
- Sending sick residents to their permanent homes could be unfeasible, pose logistical challenges, or pose risk of transmission to others either on the way to the home or once there. Colleges and universities should work with local health officials to determine appropriate housing for the period in which they need to be isolated and monitored for symptoms or worsening symptoms.
- Remember to consider all types of affiliated housing when making response plans. Distinct housing types (e.g., residence halls, apartments, fraternity and sorority houses) and situations (e.g., housing owned and run by the college, housing on campus but not run by the college) may require tailored approaches.
- Ensure any staff remaining to support students in on-campus housing receive necessary training to protect themselves and residents from spread of COVID-19. Staff should also be trained on how to respond if a resident becomes ill.

- **Ensure continuity of meal programs.**
  - Determine strategies for modifying food service offerings to the college and university community.
  - Consider ways to distribute food to students, particularly those who may remain on campus, while classes or other events and activities are dismissed.
  - If there is community spread of COVID-19, design strategies to avoid food distribution in settings where people might gather in a group or crowd. Consider options such as “grab-and-go” bagged lunches or meal delivery.
  - Consider if and how existing dining services should be scaled back or adapted. For example, the college may close some of or all its cafeterias/cafes to discourage students, staff, and faculty from gathering in group settings.
  - If on-campus housing residents are relocated to temporary alternative housing, consider how meals can be provided to these students. Work with local health officials to determine strategies for providing meals to residents with COVID-19 or who are monitored because of contact with persons with COVID-19.
  - Ensure any staff remaining on campus to support food services receive necessary training to protect themselves and those they serve from COVID-19.

- **Consider if and when to stop, scale back, or modify other support services on campus.**
  - Consider alternatives for providing students with essential medical and social services. Identify ways to ensure these services are provided while classes are dismissed or students are in temporary housing.
  - Identify other types of services provided to students, staff, and faculty (e.g., library services, cleaning services). Consider ways to adapt these to minimize risk of COVID-19 transmission while maintaining services deemed necessary.
  - Share facts about COVID-19 through trusted dissemination channels to counter the spread of misinformation and mitigate fear.
- Develop plans to support students, staff, and faculty who may feel overwhelmed by COVID-19 and associated events on campus.
  - Ensure continuity of mental health services, such as offering remote counseling. Encourage students to call 911 or the National Suicide Prevention Lifeline at 1-800-273-TALK (1-800-273-8255) if they are feeling overwhelmed with emotions such as sadness, depression, anxiety, or feel like wanting to harm themselves or others.

**Recommendations for student foreign travel for institutions of higher education**

Given the global outbreak of novel coronavirus (COVID-19) institutes of higher education should **consider** postponing or canceling upcoming student foreign exchange programs.

- Institutions should **consider** asking current program participants to return to their home country. Those overseeing student foreign exchange programs should be aware that students may face unpredictable circumstances, travel restrictions, challenges in returning home or accessing health care while abroad.
- Colleges and universities should **consider** asking students participating in study abroad programs to return to the United States.
- Plans for returning study abroad students should be designed to protect participants from stigma and discrimination.

**What do we need to know about managing travelers, including students and staff, returning from countries with sustained community transmission?**

Students and faculty returning from countries with sustained community transmission should be advised to practice social distancing, stay home, and monitor their health for development of any symptoms of acute illness during the 14 days from their last date in the country with COVID-19 community transmission.

Colleges and universities should be prepared to provide suitable housing and basic needs for students who need social distancing and cannot return home. The university will need to identify a location to house the student with minimal contact with others for up to 14 days. The student will need to have no public activities for these 14 days, including not attending classes, parties/gatherings, meetings, etc. If the student lives on campus, the university will also need to identify a way that the student is able to receive meals with minimal exposure to others. Colleges and universities should also accommodate students’ academic needs to minimize the impact on their academic success. If the student lives close to the campus they may be allowed to socially distance at home and follow the guidelines above for restricted activities. If faculty or staff are required to restrict their activities, we request that schools extend or adapt policies to provide paid leave for such employees or allow remote working, if feasible.

Students and faculty should be provided educational resources, a self-monitoring form to document their twice daily symptom and fever check, and information to notify the OSDH immediately in the event the individual develops symptoms.
Public Health monitoring of travelers from mainland China
Because of the widespread community transmission of novel coronavirus in mainland China, the White House issued a set of new directives that became effective on February 3. The orders mandate the following:

- Restrict all foreign nationals who have traveled or been in mainland China the last 14 days from entering the US.

- Require all US citizens, legal permanent residents, and their close family members returning from mainland China to enter through one of eleven designated airports in the US, where they will be screened by US Customs and Border Protection agents.
  - If travelers show signs of respiratory illness, they will be transported to a health care facility for further evaluation to determine whether they need further medical assessment and care.
  - All travelers who were in the Hubei Province at any time in the past 14 days are considered at high-risk of exposure to novel coronavirus and will be quarantined and monitored at a safe location for 14 days from their last exposure.

- All other returning travelers from mainland China outside Hubei Province are considered medium risk and can travel to their final destination. Once they arrive, local public health officials follow-up with the traveler to initiate symptom monitoring and social distancing for 14 days.

What is social distancing?
Social distancing means remaining out of public places where close contact with others may occur [e.g., dormitories, schools and other classroom settings, cafeterias, shopping centers, movie theaters, stadiums, workplaces, and local public conveyances (e.g., bus, subway, taxi, ride share)] for the duration of the potential incubation period.

For more information:


