



Preparing for and Responding to COVID-19 in Institutes of Higher Education

Background

Institutes of higher education (IHEs), like other congregate community gathering and living environments, are at increased risk for transmission and outbreaks of COVID-19 due to the large number of people who interact in close quarters on campus. Students and staff should implement and observe policies and measures to prevent and mitigate the risk of COVID-19 transmission on campus. The following recommendations for IHEs from the Maryland Department of Health (MDH) supplement the Centers for Disease Control and Prevention's (CDC's) COVID-19 guidance for [Colleges, Universities, and Higher Learning](#).

COVID-19 Description

[COVID-19 symptoms](#) include fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, or diarrhea. Some individuals with COVID-19 might not report these symptoms; some might report no symptoms at all. From limited published reports, signs and symptoms among children with COVID-19 might be milder than adults, with most pediatric patients presenting with fever, cough, congestion, and rhinorrhea.

Definitions

Suspect COVID-19 case: an individual with clinical illness as described above

Confirmed COVID-19 case: an individual with a positive SARS-CoV-2 PCR or, for the purposes of this guidance, a positive SARS-CoV-2 antigen test, regardless of signs and symptoms

COVID-19 outbreak:

- In a cohort (e.g., team, dorm): five* or more lab-confirmed COVID-19 cases who are epidemiologically-linked (e.g., dorm, sports team, sorority/fraternity), who have symptom onset dates within a 14-day period
- Campus-wide:
 - Three or more cohort outbreaks within 14 days; OR
 - 10% or more of all COVID-19 tests administered on campus in a 14-day period (e.g., at the health center or during a mass testing event) are positive AND positivity rate is higher than that of the surrounding community (minimum 10 positive tests)

*A smaller number of cases might be considered an outbreak in certain situations.

Isolation: used to separate people infected with SARS-CoV-2, the virus that causes COVID-19, from people who are not infected.

Quarantine: used to keep someone who might have been exposed to COVID-19 away from others.

Preventive Measures Against COVID-19

The IHE should follow all applicable local orders, and [orders & directives of the MDH Secretary of Health](#) and [Maryland Governor](#).

In addition, the IHE should:

- Implement policies and measures to prevent and control COVID-19 transmission on campus. IHE should consider reducing the number of individuals on campus at any given time by using virtual learning and limiting campus activities and housing occupancy levels.
- Use signs and barriers to direct pedestrian traffic flow and enforce distancing in common areas (e.g., classrooms, libraries, dining areas).
- Identify a primary point of contact at the IHE to communicate with a primary point of contact at the local health department.
- In collaboration with the local health department, create plans for:
 - Monitoring illnesses on campus
 - Testing students and staff
 - Communicating information about testing sites and testing results
 - For contact tracing purposes, for testing events at IHE, addresses on test orders should reflect where the person physically will be at the time of diagnosis and monitoring (i.e. living on campus, living at home, etc.)
 - Communicating with the primary point of contact at the local health department
 - Creating isolation facilities
 - Adapting/reducing/canceling operations during widespread community transmission or a large outbreak on campus
- Prepare communication templates and have a communication plan to disseminate messages to the campus community.
- Encourage students and staff to practice hand hygiene, respiratory etiquette, face masking and social distancing. Students and staff must wear face coverings when indoors, except for while in their own room, and outdoors when physical distance cannot be maintained.
- Have flexible sick leave policies for staff and make accommodations for ill students to prevent potentially infected individuals from transmitting the virus to others.
- Offer boxed meals or other food options that can be served quickly and easily taken to go to prevent people from congregating in lines, and encourage individuals to take their meals elsewhere to eat. Distancing should be encouraged when individuals are getting food and in line to pay. Physical barriers (e.g., plexiglass) should be placed between dining staff and patrons when possible.
- Implement cleaning protocols for all areas on campus (with a focus on high-touch surfaces in common areas) in accordance with [CDC Guidance for Cleaning and Disinfecting schools](#).
- Dedicate residential space to house students who require isolation or quarantine (see “[On-Campus Isolation and Quarantine Recommendations](#)” for desirable characteristics).

Management of Ill Individuals on Campus

- Students and staff who are ill should immediately isolate themselves. They should be instructed not to work or attend class or other activities, and to get tested for COVID-19. If the IHE does not have a health center that can offer COVID-19 testing, students and

staff should be directed to their primary care provider, an urgent care center or emergency department, or a public testing site, as appropriate.

- If an individual tests positive for COVID-19, they should be isolated until they complete CDC's criteria to discontinue home isolation (see "[Management of COVID-19 Cases and Contacts on Campus](#)" for isolation instructions).
- If they test negative, they should remain in isolation at least until they are fever-free for 24 hours (without antipyretics) and have an improvement in symptoms. Ill individuals who test negative could have other illnesses, and should consider consulting a health care provider if symptoms worsen or change.
- If an ill student or staff member is not tested for COVID-19, they should isolate as if they are a confirmed case, unless there is a specific, alternative diagnosis that explains their symptoms (e.g., laboratory-confirmed influenza), or they have already tested positive for COVID-19 and completed their isolation in the last 90 days before their most recent onset of symptoms. These individuals should be isolated until they are fever-free for 24 hours (without antipyretics) and have an improvement of other symptoms.
- Individuals in isolation should be advised to cooperate with the public health contact tracing activities.

Management of COVID-19 Cases and Contacts of Cases on Campus

The IHE should collaborate with its local health department regarding contact tracing procedures, including determining the role of each institution in contact tracing and the personnel who will coordinate efforts.

When a local health department learns of a laboratory confirmed case of COVID-19 associated with an IHE, they will notify the IHE. If an IHE learns of a laboratory-confirmed case of COVID-19 prior to receiving a notification from the local health department, they should notify the local health department.

Given the variety of ways and settings in which individuals at an IHE may interact and transmit COVID-19, the IHE should consider collecting the following information from case patients to help identify epidemiologic links between cases, elicit contacts, and provide important information to the local health department:

- Role at the IHE (e.g., student, faculty, staff)
- Living situation (e.g., dorm, campus apartment, off-campus apartment/house); verify address, including where they intend to spend their isolation
- If in a shared living situation, describe specifics (e.g., shared bedroom, bathroom, and/or dining)
- Class attendance (e.g., in person, virtual); list any in-person classes
- Social activities
- Extracurricular activities
- Athletics
- Travel
- Transportation (e.g., shared rides)
- Use of campus facilities (e.g. library, gym)
- Work

In addition to local contact tracing efforts, all individuals with a laboratory confirmed case of COVID-19 will receive a call from a contact tracer from the public health department. For more information on state contact tracing, visit <https://coronavirus.maryland.gov/pages/contact-tracing>.

The IHE should consider providing written notification to all identified contacts, including the following:

- When to seek medical care
- How to monitor for symptoms
- Who to contact and how to contact them if they develop symptoms of COVID-19 while under quarantine
- The projected length of quarantine if they remain asymptomatic
- Plan for maintaining remote learning, if applicable
- Information about COVID-19 testing sites

The IHE should report to its local health department if it identifies any concerning situations (e.g., cluster of illnesses in a campus-affiliated organization) or students requiring on-campus isolation or quarantine. Similarly, the IHE might be notified by the local health department if case-patient interviews and contact tracing identify clusters of cases associated with the institution.

After the identification of a case or cluster of cases on campus, additional targeted testing (e.g., occupants of a particular floor/residence hall or members of a team/club) might be recommended by the local health department. Additionally, discontinuation of in-person activities for the affected group(s) should be considered while cleaning and contact tracing are underway.

Consider targeted communication with individuals who might have been in contact with a confirmed case but were not identified as close contacts (e.g., individuals in the residence hall who did not have known close contact with a case). Communications should reinforce recommendations about hand hygiene, respiratory etiquette, social distancing, and what to do if you are sick. Broader, campus-wide communications might be appropriate in certain scenarios.

On-Campus Isolation and Quarantine Recommendations

General

- Residential IHEs should dedicate floors, halls, or other living spaces for the isolation and quarantine of students.
- Students in isolation should be housed separately from students in quarantine, and both groups should be housed separately from the general population, preferably with their own dedicated points of entry/exit.
- All individuals with a laboratory confirmed case of COVID-19 and their contacts will also receive a call from a contact tracer from the public health department. Encourage cases and contacts to cooperate with both the IHE and state contract tracing processes. For more information on state contact tracing, visit <https://coronavirus.maryland.gov/pages/contact-tracing>.
- If adequate space cannot be dedicated on campus, local hotels and motels might be able to provide sufficient short-term housing.

- As another alternative to on-campus housing, students may relocate to a family member's residence. The other family members occupying that residence should be made aware of the student's status (e.g., confirmed case, close contact of a case) so that they may take the [proper precautions](#). The local health department where the residence is located should be notified.
- Students in isolation or quarantine should be restricted to their room in the isolation or quarantine area. These students cannot attend class, visit other areas of the campus (e.g., fitness center, cafeteria, library, or laundry room), go to the grocery store or pharmacy, or attend any other event or gathering.
- Individuals in isolation or quarantine should be provided with any necessary supplies and services (e.g., food, cleaning supplies, laundry, thermometer, medications, information on who to contact if they become ill).
- If students in isolation or quarantine need medical care, notify the provider, emergency medical services, and anyone else assisting the student with transportation of the student's diagnosis or exposure so they can take proper precautions.
- If individuals in isolation or quarantine must leave the living quarters, they should wear a face mask, socially distance themselves from others, and go directly to/from their destination.
- Routine health checks for individuals in isolation or quarantine should be done virtually, when possible. Be aware that routine virtual health checks are also done by a contact tracer from the public health department.
- Students in isolation or quarantine should monitor for symptoms and be provided thermometers to check and log their temperature twice daily.
 - Individuals in quarantine who develop symptoms should be tested for COVID-19, even if they previously tested negative before symptom onset.
 - Symptom onset and recovery dates affect how long individuals remain in isolation, so tracking this information accurately is important.
- Staff that have to enter areas where students are being isolated or quarantined should wear personal protective equipment, limit their exposure to students, wash hands upon leaving the area, and monitor for signs and symptoms of illness.
- When a student completes isolation or quarantine and vacates the isolation/quarantine quarters, the room they occupied should be cleaned and disinfected following [CDC guidance](#) before it is re-occupied.
 - If the room was occupied by a laboratory-confirmed case of COVID-19, wait until the room has been vacated for 24 hours before cleaning or disinfecting. If 24 hours is not feasible, wait as long as possible.
 - Rooms that are left unoccupied for seven days or more only need routine cleaning, as the SARS-CoV-2 virus does not survive on surfaces longer than this time.

Isolation (for individuals who have tested positive for COVID-19)

- Ideally, students in isolation will have private rooms with private bathrooms. Shared bedrooms and/or bathrooms are acceptable for individuals in isolation if other arrangements cannot be made.
- Students in isolation should not have any outside visitors.
- Students in isolation must remain there until they meet CDC's criteria to [discontinue home isolation](#).

Quarantine for individuals who were exposed to confirmed cases but have not tested positive for COVID-19

- Students in quarantine must have private rooms, ideally with private bathrooms.
 - Individuals who were exposed to a confirmed case of COVID-19 and are in quarantine can become infectious and transmit the disease to others without showing signs or symptoms of illness. Therefore, private bedrooms and bathrooms are especially important for individuals in quarantine.
- If quarantined individuals must share a single bathroom, they should be provided with cleaning supplies and instructions for cleaning bathroom surfaces before and after each use.
- If students must share a multi-person bathroom (e.g., one large bathroom for the entire floor), consider designating a sink, stall and/or shower to each individual, when possible.
 - Students should wear face masks when they leave their room to use the bathroom.
 - Students should be provided with cleaning supplies and instructions for cleaning surfaces before and after each use.
- Students in quarantine should not share kitchen space, living rooms, or any other common areas (e.g., laundry room) with others in quarantine.
- Students in quarantine should not have any outside visitors and should avoid contact with other individuals in quarantine.
- If a student in quarantine develops signs or symptoms consistent with COVID-19, they should be tested for COVID-19.
 - If a student in quarantine tests positive for COVID-19, they should be transferred to the campus' COVID-19 isolation quarters until they complete CDC's criteria to discontinue home isolation. During transfer, the student should wear personal protective equipment and practice social distancing. The room and bathroom that they used should be thoroughly cleaned and disinfected before being used by others. See [CDC guidance](#) for cleaning instructions.
- Students in quarantine must remain there for 14 days following their last known exposure to a confirmed case, even if they test negative during that time.

Management of COVID-19 Outbreaks on Campus

- COVID-19 outbreaks, as defined above, must be reported to the local health department immediately.
- The IHE should partner with its local health departments to ensure complete and timely contact tracing of COVID-19 cases and contacts.
- Share a daily line list of all cases – including whether or not symptoms are present, type of symptoms, case status (e.g. hospitalizations or deaths) – with the local health department until the outbreak closes.
- A line list of all contacts should also be maintained and shared with the local health department daily until the outbreak closes.
- Local health departments might recommend infection and control measures in addition to those listed above on a case-by-case basis.
- The IHE should work with its local health department to develop messaging to the campus community about the outbreak.

If an outbreak is particularly large or complex, full or partial closure of on-campus activities might be appropriate.

Resources

[CDC COVID-19 Communications Resources](#)

[CDC Considerations for Institutions of Higher Education](#)