Guidance for Mitigating COVID-19 at Higher Education Institutions

As Minnesota continues to see community transmission of COVID-19 and the need to minimize its spread, a balance must be struck in how educational opportunities are offered. Thus, when planning for the return of on-campus instruction at colleges and universities, it is important that everyone take steps to reduce transmission opportunities and minimize risk to people at high risk, while also supporting the importance of having a strong higher education sector that supports students and communities.

This document is intended to provide guidance and parameters for colleges and universities to use in their planning for possible reopening of campuses now and into the fall. This document outlines requirements and recommendations that must be followed as institutions continue to reopen.

As required by Executive Orders issued by Governor Tim Walz under the Peacetime Emergency, all businesses, including higher education institutions, must develop and implement COVID-19 Preparedness Plans that address the hazards of COVID-19 transmission at all sites. Higher Education Institutions’ COVID-19 Preparedness Plans must address the requirements listed below as well as consider the outlined recommendations listed in this document.

Required for higher education

- Develop a COVID-19 Preparedness Plan found at Stay Safe Guidance for All Businesses (staysafe.mn.gov/industry-guidance/all-businesses.jsp).
- As appropriate, follow other COVID-19 industry guidance and requirements. See Stay Safe Guidance (staysafe.mn.gov/industry-guidance/index.jsp).
- Create policies that adhere to the Governor’s Executive Order 20-81, which states that people in Minnesota will be required to wear a face covering in all public indoor spaces and businesses.
- Maintain at least 6 feet between people to the extent possible. See below for further setting-specific interpretive guidance. This includes interpretive guidance for the learning environments, dining halls, housing, and other settings where students gather.
- Develop plans that address returning to campus, testing needs, contact tracing, isolation, and quarantine as appropriate.
- Social gatherings not associated with a class or structured event/meeting must not exceed 10 indoors or 25 outdoors.
- Incorporate appropriate guidance listed below into the COVID-19 Preparedness Plan.

**Interpretive guidance for higher education**

The guidance listed below and in the following sections are recommendations from the Office of Higher Education (OHE) and the Minnesota Department of Health (MDH) on how to implement the above requirements as colleges and universities begin to open for the remaining of the summer and plan for this coming fall.

Higher education in Minnesota is diverse, including to the extent there is a residential component. Each institution will have to implement the following guidance in a way that is most applicable and feasible to its unique setting. As such, institutions should think through the following scenarios and guidance as they create their plans. As plans develop, please continue to reach out to OHE and MDH as needed.

This guidance document was developed using the Minnesota Higher Education Workgroup Proposed Strategies, and the following resources:

- [Considerations for Reopening Institutions of Higher Education in the COVID-19 Era (PDF)](president.nmsu.edu/files/2020/05/ACHA_Considerations_for_Reopening_IHEs_in_the_COVID-19_Era_May20203.pdf)
- [Coronavirus Disease 2019](https://www.health.state.mn.us/diseases/coronavirus/)
- Minnesota industry-specific guidance at [Guidance on Safely Reopening Minnesota Businesses](mn.gov/deed/newscenter/covid/safework/safe-reopening/)

**Create different scenario plans for COVID-19**

- Create scenario plans for how your institution will:
  - Return to campus this fall, including timelines and steps to bringing people back on campus to minimize congestion.
  - Monitor both illness and overall student, faculty, and staff’s cooperation with prevention measures, such as physical distancing, facial coverings, etc.
    - Adjust communications and messaging as needed to improve cooperation with prevention measures.
  - Partner with MDH and contain the spread of illness when it occurs.
  - Scale back operations if disease levels indicate a need for changes in operations, including:
    - Reducing the number or canceling events and programs.
▪ Shutting down if directed to by the state or as a result of a significant outbreak on campus, or in surrounding community.

▪ Create scenarios for campus life and classroom settings based on the following:
  ▪ Current social distancing guidance includes at least a 6-foot distance from person-center to person-center.
  ▪ If not able to maintain a 6-foot social distance, consider having seating assignments or assigning partners.
  ▪ Seating assignments will ensure easy and quick contact tracing.
  ▪ A Stay-at-Home order is implemented, similar to what happened this spring.

▪ Domains to consider when creating the above plans include: instruction delivery; instruction schedule; classrooms; libraries; study spaces; lab instruction; studio instruction; outreach; housing; housing occupancy; residential dining; retail dining and catering; rec centers; student unions; student life programming; and events.

Strategize how students come back to campus

▪ Consider a range of start times for returning students back to campus. This can range from on-time, early, or delayed. This includes strategies such as having an earlier or later start date, and/or expanding or removing breaks to mitigate the amount college students are going back and forth between communities.

▪ Consider phasing-in of students; some institutions are staggering how they return students to campus, by bringing different classes or different groups first to allow for the reduction of congestion.

▪ Make it clear that students, faculty, and staff should not return to campus if they are sick; ensure sick policies support a delayed start for them.

Implement measures for preventing COVID-19 transmission

The following measures contribute to a layered approach in disease mitigation; each layer that can be added provides extra support for preventing transmission. This is important to keep in mind as colleges and universities navigate the uniqueness of their institution.

▪ Ensure students/staff/vendors adhere to social distancing protocols.

▪ Follow face covering guidance listed below.

▪ Institute hand hygiene protocols, including “sanitize-in and sanitize-out” protocols for classrooms and other learning settings.

▪ Develop a protocol to quickly identify sick students, faculty, or staff.
  ▪ Have symptom check signs at key entry points such as when entering a classroom, libraries, or dining halls.
Example of Visitor and Employee Health Screening Checklist (PDF) (www.health.state.mn.us/diseases/coronavirus/facilityhlthscreen.pdf).

The checklist is also available in Hmong, Somali, and Spanish. See Businesses and Employers: COVID-19 (www.health.state.mn.us/diseases/coronavirus/businesses.html).

In general, being outside reduces transmission between individuals. It is strongly recommended that in settings where individuals, classes, or activities can be outside, that they do so.

**Implement policies for face coverings**

As of July 25, 2020, per the Governor’s Executive Order, people in Minnesota will be required to wear a face covering in all public indoor spaces and businesses. This Executive Order includes exemptions for people who are unable to wear or tolerate a face covering due to medical or other reasons. There are also situations in which a face covering may be temporarily removed or where face coverings are not required.

**Examples of when face coverings are required:**

- Students, faculty, and staff must wear a face covering while indoors, unless an exemption applies.
- Those teaching a class or course must wear a face covering or face shield unless physical distance of 6 feet or greater can be maintained at all times from students in their class.
- For further requirements and exemptions, see: Face Covering Requirements and Recommendations under Executive Order 20-81 (www.health.state.mn.us/diseases/coronavirus/facecover.html).

**When face coverings are strongly encouraged (but not required):**

- Even when outside, it is strongly recommended that students, staff, and faculty wear face coverings while in areas of high congestion of people or where social distancing of 6 feet or more cannot be maintained.
- Other situations where face coverings are strongly encouraged can be found at Face Covering Requirements and Recommendations under Executive Order 20-81 (www.health.state.mn.us/diseases/coronavirus/facecover.html).

**Face shields (a clear plastic barrier that covers the face) may be considered as an alternative in situations where face coverings are not practicable. Examples include:**

- Faculty teaching a class or giving a lecture, or for students taking a language class where the face needs to be seen. A face shield allows visibility of facial expressions and lip movements for speech perception.
- Staff and students in a class where face coverings may be a hazard due to the nature of the class (e.g., laboratory component of a class).
- Staff, students, or visitors who cannot tolerate a face covering due to developmental, medical, or behavioral health condition.
For staff or faculty providing direct support student services, when a face covering impedes the service being provided.

More information about face covering requirements, recommendations, and exemptions:

- Face Covering Requirements and Recommendations under Executive Order 20-81 (www.health.state.mn.us/diseases/coronavirus/facecover.html)
- Masks and face coverings (www.health.state.mn.us/diseases/coronavirus/prevention.html#masks)
- Frequently Asked Questions About the Requirement to Wear Face Coverings (www.health.state.mn.us/diseases/coronavirus/facecoverfaq.html)

Promote new norms

- Communicate with students, faculty, and staff new COVID-19 mitigation expectations. Use media, posters, and other tactics to promote health etiquette expectations and behavioral norms.
- Engage students, faculty, and staff in developing creative promotion of new norms and solutions to concerns about changing norms.
- Use visuals and barriers to support social distancing.
- Organize a task force to focus on how to implement social and cultural changes to behavior norms to support COVID-19 mitigation efforts.

Phase in campus activities

- Continue to support campus activities in a way that reduces transmission potential of COVID-19.
- Consider canceling large events or activities during the first couple of weeks.
- Replace with activities or events that can be held with smaller groups of people.
- Structure events or activities so that attendees are divided into smaller groups.
- Ensure social distancing and face covering requirements during the activity.

Reimagine the learning environment

- Develop a hybrid learning environment that allows in-person and online coursework, activities, and engagement opportunities. This also allows learning flexibility if students or faculty need to continue courses while sick or in quarantine.
- Support social distancing in classrooms, labs, and other learning settings.
  - Space seating/desks at least 6 feet apart when feasible. For lecture halls, consider taping off seats and rows to ensure 6-foot distance between seats.
    - If 6 feet can’t be maintained:
▪ Classes should have assigned seating; labs should have assigned partners in order to minimize close contacts and time to identify close contacts.
▪ In settings like labs or art studios where individuals may have to work side-by-side, cloth face coverings in addition to face shields/googles should be considered.

▪ Host classes with small enrollment in larger rooms.
▪ Provide adequate distance between individuals engaged in experiential learning opportunities (e.g., labs, vocational skill building activities).
▪ Create distance between students in college or university vehicles (e.g., skipping rows).
▪ Offer distance learning in addition to in-person classes to help reduce the number of in-person attendees.
▪ Consider moving large classes to online only, break out into smaller sessions, or rotate pods of in-person vs online (Pod A is in-person Monday/Tuesday, online Wednesday/Thursday, Pod B vice versa).
  ▪ For example, for any class of 100 students or more consider splitting the class into separate cohorts or moving the class to a different learning format.
▪ Reduce bottlenecks when students come into and leave class. Consider creating one-way guides, or directing flow in narrow hallways or in areas where congestion is high.

Reconfigure and reimagine dining halls

▪ Arrange chairs to support at least 6 feet apart to the extent possible.
  ▪ If not feasible, consider limiting number of individuals to 3-4 persons per table. Generally, students will sit with individuals to whom they would already be thought of as close contacts.
  ▪ For table settings that include a long row of tables, stagger chairs and try to maintain 6 feet between chairs as much as possible.
▪ Have ≥ 6 feet between tables.
▪ Take other steps to reduce congestion.
  ▪ Assign students specified times to come to the dining hall, making a “reservation system,” or altering course schedules to reduce potential congestion.
  ▪ Have more grab-and-go options available.
  ▪ Have fewer people in dining hall at any one time.
▪ If disposable items are not feasible or desirable, ensure that all non-disposable food service items are handled with gloves and washed with dish soap and hot water or in a dishwasher. People should wash their hands after removing gloves or after directly handling used food service items; see When and How to Wash Your Hands (www.cdc.gov/handwashing/when-how-handwashing.html).
Implement housing plans that support reduced risks of transmission

- Ensure there is enough space for heads to be at least 6 feet apart in shared dorm rooms.
- Consider reducing the number of students per room or per dorm to promote reducing number of close contacts if one person becomes sick.
- Strongly consider not having dorms at full capacity to reduce overall number of students in the building and therefore resulting congestion.
- When feasible, add physical barriers, such as plastic flexible screens or shower curtains, between bathroom sinks or other areas that cannot be at least 6 feet apart. If difficult to achieve, place signage to maintain proper physical distancing of 6 feet and limit capacity in the shared bathroom.

Evaluate other settings where students gather on campus

- Maintain at least 6 feet in public settings.
- For common areas: arrange chairs at tables to support at least 6 feet between people as much as possible, and ≥ 6 feet between common furniture.
  - Space furniture out such that gatherings are contained, that there is adequate space between groups, and that crowding is minimized.
  - Restrict number of people allowed in the common area.
  - Consider closing off an area if social distancing rules are not being followed.
- Implement ongoing evaluations and monitoring of student and staff behavior and continue to adjust approaches, communication, messaging, or education needs to help continue to guide appropriate behaviors and norms. Behaviors include cooperation with prevention measures such as physical distancing, facial coverings, etc.
- In general, MDH does not recommend closing off common areas as students will likely still gather in other areas. These gathering spots may be in smaller rooms or areas that would promote transmission potential.
- If facility showers need to be used, only allow shower and locker room use if there are partitions or else place signage to maintain proper physical distancing of 6 feet.
- For colleges or universities with students living in off-campus housing, consider reaching out to landlords of units known to be commonly rented by students to explore partnerships in preventing COVID-19.
- Reserve space or create a plan to be able to adequately isolate sick people and quarantine close contacts when planning for on-campus housing.
Create testing plans for suspect COVID-19 cases

Testing access

- Testing access is crucial to a higher education institution deciding to open back up. Without the ability to refer students, faculty, or staff to testing for COVID-19, there may be missed opportunities to quickly identify COVID-19 on your campus.

- Outline a plan for testing any individual who is symptomatic and would like to be tested, including:
  - Who should the student contact if they have symptoms?
  - Where will the student go for specimen collection?
  - What reference lab will be involved?
  - Determine when your testing capacity would be exceeded and when you would need support from the state.
    - How many students can you evaluate in one day for COVID-19?

- Colleges and universities should also have the capacity to test close contacts per recommendations and guidance by CDC and MDH.
  - Please note, should close contacts choose to get tested and they test negative, this does not release them from quarantine. They must continue to quarantine for 14 days from exposure.

Testing strategies

- Promote and set expectations now for students to get tested.

- If a student, faculty, or staff tests positive for COVID-19, the case will be reported to MDH/Local Public Health (LPH) by the testing lab or provider. MDH/LPH will do the case and contact investigation and follow-up with the college or university. See the Case and Contact Tracing Section of this document for more details.

- Campus-wide testing at the beginning of the school year is not currently recommended by CDC or MDH.
  - Rather these resources should be used to have aggressive protocols around testing symptomatic individuals at the beginning of the school year, and then using those resources to sustain health services staff, testing, and other needs throughout the rest of the year.

- If a campus sees a cluster of three or more cases in a short time span:
  - MDH or LPH will work with the campus to determine if cases are related.
  - Decisions to do wider testing will be made using the following criteria:
    - Are cases close in time together, or spread out over several weeks?
    - Are new cases traceable to previous cases?
    - Is there other case activity on campus?
    - Are students being forthcoming with close contacts?
MDH or LPH may recommend any of the following testing strategies depending on the epidemiology of the cases. These may include testing broadly on:

- A floor.
- A residence hall.
- A team, club, class, or activity.

Broader campus or community testing may be warranted if a campus continues to see an increase in cases and other control measures are not preventing further transmission.

### Implement contact tracing processes

MDH or LPH will be supporting contact tracing, and doing the majority of the case investigations. In some situations, a third party case and contact investigator will be used; however, the overall process outlined below will remain the same. Below is an outline of case and contact tracing and the expectations of the institution in partnering with MDH or LPH.

It is important to consider how an institution will maintain privacy of student, faculty, and staff as much as possible. Colleges/universities should consult with their lawyer regarding the sharing of private health information. It is important that institutions and people who work there only share protected health information with those they are legally able to share it with. Higher education should take this into consideration as they develop their notification plans. In general, colleges/universities may want to consider having a point person/point phone number that students, faculty, and staff use first when identifying themselves as a case. This will also help prevent accidental notification of classes or campus prior to an investigation.

### Case and contact investigation flow

- Once an individual tests positive for COVID-19:
  - The case (the person who tested positive) is notified by their testing facility.
  - The testing facility and/or the lab also reports to MDH.
    - Occasionally the testing facility will report to the case before the lab report reaches MDH. This is most likely to occur if the testing facility performs the test in its own facility.
  - The case is usually reported to MDH through electronic lab reporting, occasionally it is first reported by the health care provider.
  - Once the lab report is received, MDH/LPH interviews the case by phone. During the interview MDH/LPH:
    - Determines individual contacts.
    - Determines other settings of potential contacts (classroom, bar, gym, etc.).
    - Close contacts are individuals who were closer than 6 feet to the case for 15 minutes or more. If individuals are identified as being close contacts, there are two ways those contacts can be notified.
The case chooses to have MDH/LPH give them information to share with their contacts (so MDH/LPH doesn’t call the contact directly).

The case shares the contact’s information and MDH/LPH follow-up with those contacts.

- MDH/LPH reaches out to colleges/universities to notify them of the case and any contacts associated with the college/university.
  - MDH/LPH will work with the college/university to recommend what notification would be warranted. This could include a general campus message or messaging that is more specific to a certain classroom or area on campus in which exposure may have occurred. Messaging may also include information on the level of risk.
  - In some situations the college/university will help MDH/LPH further determine contacts in various settings.

- MDH/LPH also notifies other settings outside the college/university as appropriate.

- Colleges/universities will work with LPH/MDH to:
  - Provide and/or recommend isolation and quarantine as needed and appropriate.
    - Strategies may be different for residential and non-residential institutions.
  - Work with MDH/LPH to reach any cases or their contacts that MDH/LPH has not been able to reach.

- Each institution should have at least one person that can be a COVID-19 point person who can assist with the above tasks. This person should be readily available during the day, including weekends. MDH/LPH recognizes that some institutions may choose different COVID-19 liaisons for students and/or faculty and staff.

Create isolation and quarantine plans

- Have spaces set aside for sick and/or quarantined students. Examples include:
  - Dedicated floors or residence halls.
  - Reach out to area hotels in advance to discuss options for possible short notice to house students.

- Consider having in reserve isolation and/or quarantine accommodations needed for between 2.5% and 5% of the population who lives on campus.

- Provide guidance for isolation (students who have been diagnosed with COVID-19).
  - Isolation rooms should be physically separated from other residential student rooms.
  - Ideally a person in isolation will have their own bedroom and bathroom.
    - If a shared bathroom or bedroom needs to occur, ensure that students sharing a space have been tested for COVID-19 and are both positive for COVID-19.
  - Students in isolation must have access to alternative modes of course instruction.
▪ Isolated students should have access to supplies such as a thermometer, face coverings, sanitizing wipes, tissues, soap, hand sanitizer, and toiletries.

▪ Students in isolation should have their food delivered, and access to laundry services; health checks should be virtual when possible.

▪ Staff who need to interact with students should have appropriate personal protective equipment.

▪ Students in isolation should not have any visitors.

▪ Requirements for quarantine (students who have been exposed but don’t yet have symptoms).
  ▪ Ideally an individual in quarantine should have their own bedroom and bathroom.
    ▪ If people who are in quarantine need to share a bathroom, consider the following strategies:
      ▪ For a single bathroom – have the student clean and disinfect after using.
      ▪ For a common bathroom – have a designated stall and sink for the student, and have them wear face coverings whenever leaving their room to use the bathroom facilities.
  ▪ Students in quarantine should have their food delivered, have access to laundry services, and health checks should be virtual.
  ▪ Students in quarantine must have access to alternative modes of course instruction.
  ▪ Students in quarantine should have access to supplies such as a thermometer, face coverings, sanitizing wipes, tissues, soap, hand sanitizer, and toiletries.
  ▪ Staff who need to interact with students should have appropriate personal protective equipment.
  ▪ Students in quarantine should not have any visitors.

▪ Set expectations for parents that an option may be for their student (or child) to move home for the duration of isolation or quarantine.

▪ CDC has guidance on how to safely care for a person who is sick. See If You Are Sick or Caring for Someone (www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/index.html).

Develop policies that promote the health and safety of students, faculty, and staff at higher risk for severe illness from COVID-19

▪ Develop a task force to address the needs of high-risk students, staff, and faculty and ensure that those who are high risk are included in surge capacity planning.

▪ 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).
• 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.

• Review applicable CDC guidance:

Response and surge capacity considerations

• Consider response and surge capacity scenarios (for example: plans for one case in one week, 10 cases in one week, 100 cases in a month).

• Consider changes to isolation and quarantine strategies.
  ▪ Will you have to have individuals isolating together?
  ▪ Will you have to have more people quarantining in the dorms?
  ▪ Will you need to increase messaging to parents to consider helping with isolation and quarantine?

• Consider changes to testing needs.
  ▪ Will you need to ask for state assistance?
  ▪ At what point would your ability to test students through your normal routes be exceeded (10 symptomatic in a week, 20 symptomatic in a week, etc.)?

• Consider changes to routine operations and create a phased plan on responding to an increase in cases.
  ▪ Work with MDH or LPH to understand where clusters are occurring.
  ▪ In consultation with MDH or LPH, implement targeted strategies to address clusters.
  ▪ If cases continue to grow, consider canceling or reducing number of gatherings or events on campus before changing class structures.
    ▪ Class structures are controlled environments and may provide a buffer to students congregating elsewhere.
  ▪ If off campus venue is source of cluster, MDH and LPH will work with source of outbreak to implement interventions.

Monitor disease trends and activity in your area

• Use the Dial Back Dashboard (mn.gov/covid19/data/response-prep/dial-back-dashboard.jsp) to stay informed on community activity.
Have expectations for students depending on the level of activity on your campus, and in some cases in your surrounding community. Examples may include:

- Ask students to not frequent bars or other settings known to have high transmission potential.
- Cancel or limit events on campus that would facilitate large groups of individuals coming together.
- Reinforce face covering requirements and recommendations.

**Ventilation on campus**

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. See [Considerations for Higher Education](www.cdc.gov/coronavirus/2019-ncov/community/colleges-universities/considerations.html).

Work with your facility’s engineers to consider the following recommendations:

- [COVID-19 Preparedness Guidance](www.ashrae.org/technical-resources/resources).

**Cleaning and disinfecting**

Follow MDH-specific guidance for Institutes of Higher Education:

- [COVID-19 Cleaning and Disinfecting Guidance for Institutes of Higher Education](www.health.state.mn.us/diseases/coronavirus/schools/cleanihe.html)
- [Frequently Asked Questions About COVID-19 for Facilities Service and Cleaning Staff](www.health.state.mn.us/diseases/coronavirus/schools/cleanfaq.html)

As long as routine cleaning and disinfecting have taken place regularly, additional cleaning and disinfecting is likely not necessary; nor in most situations is it necessary to close down a room or area for 24 hours.

**Future guidance**

This document offers broad scope guidance. MDH will update strategies and guidance as more is learned from experiences in Minnesota and as recommended by the CDC.
Higher education resources


Other resources

- MDH Coronavirus Disease 2019 (COVID-19) (www.health.state.mn.us/diseases/coronavirus/)
- For events or meetings that the university may host, see industry guidance at Stay Safe Guidance (staysafe.mn.gov/industry-guidance/index.jsp)
- MDH Guidance Library (www.health.state.mn.us/diseases/coronavirus/guidance.html)
- Food Service Worker Safety Information (PDF) (www.health.state.mn.us/diseases/coronavirus/schools/foodservice.pdf)
- Industry Guidance for Safely Reopening Restaurants & Bars (PDF) (mn.gov/deed/assets/restaurant-bar-industry-guidance-ACC_tcm1045-432897.pdf)
- COVID-19 Cleaning and Disinfecting Guidance for Institutes of Higher Education (www.health.state.mn.us/diseases/coronavirus/schools/cleanihe.html)