Guidance for COVID-19 Cases and Outbreaks in Higher Education

2/26/2021

Updates to this guidance include language addressing shared transportation found on page 8.

This guidance is to help colleges and universities plan for and respond to COVID-19 cases and outbreaks on their campus. It can help colleges and universities prevent and control the spread of COVID-19 and collect data that will help track respiratory illness and COVID-19 in students, faculty, and staff.

The guidance is based on Centers for Disease Control and Prevention (CDC) guidelines, general guidance for COVID-19 from the Minnesota Department of Health (MDH), and Guidance for Mitigating COVID-19 at Higher Education Institutions (www.health.state.mn.us/diseases/coronavirus/schools/guideihe.pdf).

It was created by the Minnesota Department of Health in partnership with Minnesota’s institutes of higher education. It should be used with: Guidance for Mitigating COVID-19 at Higher Education Institutions (www.health.state.mn.us/diseases/coronavirus/schools/guideihe.pdf) and Recommendations for Different Levels of COVID-19 Transmission Among Higher Education Institutions (www.health.state.mn.us/diseases/coronavirus/schools/iherecs.pdf).

Additional resource

- COVID-19 Decision Tree for People in Schools, Youth, and Child Care Programs (www.health.state.mn.us/diseases/coronavirus/schools/exguide.pdf)

Steps to take when someone on campus tests positive for COVID-19

- MDH will normally contact the college or university first when someone with an affiliation to the college or university tests positive for COVID-19 and is reported to MDH.
- Occasionally, a college or university will hear first that someone has tested positive. When this happens, contact MDH or local public health to see if they already have received a report about the positive test.
Once you are notified about someone with a positive test, determine the start of the infectious period. The start date of the infectious period is:

- Two days before the start of symptoms, if symptoms are present.
- Two days before the date that the test sample was collected, if no symptoms are present.
- Using the date that the infectious period started, identify if the person had close contact with others on campus or in campus-related activities. Then tell the close contacts to stay home for 14 days from their last close contact with the infected person (quarantine). In some circumstances, a shortened quarantine period may be possible. For more information, see the Staying at home (quarantine) section below.

- Having close contact is defined as being within 6 feet of an infectious person for a total of 15 minutes or more during a single day, or having direct physical contact with someone. See CDC: When to Quarantine (www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine.html).

- It does not matter whether the person who is infectious, the contact, or both were wearing face coverings. If they were within 6 feet of each other for 15 minutes or more in a single day, it is considered close contact.

- It can take two to 14 days to show symptoms. Close contacts limit the possible spread of COVID-19 when they stay home for 14 days (quarantine) from their last contact with the infected person.

People who are identified as close contacts, but who have tested positive for COVID-19 within the last 90 days and have already recovered do not need to quarantine. However, it is best to get a lab report of their previous positive test result to confirm this, if possible.

- Highest risk contacts are those who have very close contact, such as those who live in the same home, eat lunch together, do activities together, or carpool.

Anyone identified as a close contact of someone infectious with COVID-19 should:

- Start quarantine by counting from the last day they had close contact with the infected person. They should call their health care provider if they develop symptoms.

- Even if they have no symptoms, close contacts should get tested five to seven days after their exposure, ideally at day 7.

- For transportation to a clinic, either provide or encourage people to use a private vehicle, if possible. They should also wear a face covering while in transit.

- See the following guidance for more information on potential transportation options and ways to minimize the spread of COVID-19:
  


- Examples of classroom settings and close contact assessments:
▪ If all students and staff in a classroom stay at least 6 feet away from each other before, during, and after class, then there are no close contacts, no exposures, and no one needs to quarantine.

▪ If any students and/or faculty does not maintain at least 6 feet of distance from a person infected with COVID-19 for 15 minutes or more, then MDH considers them close contacts and the close contact needs to quarantine from the day of their last close contact.

▪ Example of athletic settings and close contact assessments:
  ▪ If athletes are doing individual training and stay at least 6 feet away from others, there is no exposure.
  ▪ If athletes are practicing or playing and having repeated, close contact (particularly true in sports like football and basketball), then MDH would likely consider there to be close contacts. In these situations, work with MDH staff and the coach to determine which students and staff were close contacts of the infected person(s).

▪ Identify common activities and trends among people who have tested positive for COVID-19, including dates their illnesses started; activities; classes; location of work stations; shifts; transportation to work; social networks; and household or family connections.
  ▪ This will support efforts to understand what is going on when multiple infections happen inside and/or outside the college or university.

▪ Once close contacts are identified:
  ▪ Send close contacts a letter by email, telling them they need to stay home (quarantine).
  ▪ Roommates of someone who has COVID-19 are the most at risk of developing COVID-19. Tell roommates the importance of following guidelines about staying home and staying away from the infected person.
  ▪ Consider notifying the rest of the classroom or the campus, if communication and messaging with a wider group is helpful in communicating about COVID-19. This information can come from the COVID-19 response team at the college/university or the faculty member. However, it is important to keep the identify the person who has COVID-19 private.
  ▪ MDH has sample notification letters available; work with MDH to get them.
  ▪ Report to MDH the names of close contacts and any additional details about the contact, such as whether it took place through sports, in choir, or at a residence hall, etc.
  ▪ Consider providing alternative housing for people who test positive and must stay away from others, but are living in close quarters, such as in shared apartments or dorm rooms, and are not able to stay in a separate room away from others.
  ▪ If possible, connect with students who live off campus to see if they know how to access necessary resources during quarantine.
  ▪ REMINDER: Contact tracing is a shared responsibility of the college/university, MDH, and local public health departments that do contact tracing in their counties.
    ▪ Colleges/universities have the relationships and resources to identify campus contacts quickly and efficiently.
▪ Colleges/universities play a critical role in helping to identify contacts on campus and having them stay home so that others are not exposed.

▪ Even though MDH and local public health interview people who have COVID-19 and identify contacts, the college/university can follow up on its own, as needed, so that close contacts and those with COVID-19 follow guidelines for staying home.

▪ Contact tracing should be conducted in a way that protects the confidentiality and privacy of an employee or student with COVID-19, consistent with any federal, state, or local laws and institutional policies.

▪ After MDH finishes a COVID-19 investigation, the MDH higher education team will reach out to the college or university to notify the college or university about the case and to provide any updated information on close contacts.

Detection of multiple COVID-19-positive faculty, staff, or students

▪ When an increase in COVID-19 cases occurs over a 14-day period among students, faculty, or staff, state and local public health officials will work with campus staff to review sources of the infections and re-assess recommendations for campus activities.

▪ Understanding whether people with COVID-19 are linked to each other and how, ultimately influence further recommendations. Some infections may have no connection to each other. Potential questions to consider include:
  ▪ Are the three cases random and have no connection to each other?
  ▪ Are the three cases roommates, which may explain the tight cluster? Did the three cases attend a social gathering where others were exposed?
  ▪ Are the three cases all part of the same group where there was ongoing interaction and therefore exposure?

▪ When three or more students, staff, and/or faculty test positive for COVID-19 within 14 days, and the infections seem linked to a particular classroom or activity, MDH or local public health may recommend broader testing. This may happen, for instance, when three or more infections are tied to an athletic team, a social event, or a classroom where people did not stay 6 feet away from each other.

  ▪ If a floor or section of a residence hall has multiple cases, MDH/local public health may recommend quarantining the floor/section together. These students must stay on their floors/in their sections. Broader testing of these students is recommended on day one, seven, and 14. Those who test positive for COVID-19 during these 14 days should be moved to a different location until they are no longer sick.

▪ MDH/local public health will also review current campus procedures for activities and/or settings where multiple cases of COVID-19 have happened. MDH/local public health may make recommendations for ways to better prevent future transmission.
Steps for colleges and universities to take when multiple students, staff, and/or faculty test positive:

- Use information known about people on campus who are infected with COVID-19 to systematically track settings where people may be getting infected.
- Determine if multiple infections are associated with a particular activity or setting, such as dorms, classrooms, a specific sport, or a campus band or orchestra.
- Determine if contact with the disease happened in a suspected school setting or in some other social setting that those who are infected have in common, such as a party or public gym, where people did not stay 6 feet away from each other and wear face coverings.

Reach out to local public health/MDH to discuss next steps, if not already in contact. Local public health/MDH will set up a conference call to discuss:

- Broader testing.
- Isolation/quarantine capacity.
- Needs for messaging or communication to make the campus aware of COVID-19 infections.
- Needs for messaging or communication about a specific activity, especially messages about modifying behavior to stop the spread of COVID-19.


Update college/university public websites to communicate the number of people who have COVID-19 on campus and any associated changes to campus operations.

Initiate changes to campus operations to help decrease further spread of COVID-19.

Set up ongoing weekly meetings with local public health/MDH.

If increased infections persist, discuss with local public health/MDH and the higher education testing workgroup any needs related to testing capacity or related supplies.

Consider moving to a higher scenario plan for response and prevention efforts on campus. For information, see [Recommendations for Different Levels of COVID-19 Transmission Among Higher Education Institutions](www.health.state.mn.us/diseases/coronavirus/schools/iherecs.pdf).

Guidance when staff, faculty, or students with symptoms are getting tested for COVID-19

Staff, faculty, or students getting tested should stay home and try to stay away from others until they get their test results.

- When possible, people getting tested should take private vehicles to a testing site or find other ways to get to the testing place without having contact with others. Wear face coverings while in transit and stay 6 feet away from others.
  - [Interim Guidance for Facilities Providing Non-Emergency Transportation Services during COVID-19](www.health.state.mn.us/diseases/coronavirus/guidetransport.pdf)

▪ Students may stay in their dorm rooms while waiting for test results, unless their health care providers are concerned enough to diagnose COVID-19 without waiting for test results. In this case, follow instructions below for people who test positive.

- For students, faculty, or staff who test negative, consider the following:
  - People may go back to school if their symptoms get better, but they should follow the [COVID-19 Decision Tree for People in Schools, Youth, and Child Care Programs](www.health.state.mn.us/diseases/coronavirus/schools/exguide.pdf) for more guidance.
  - If symptoms persist, the person should talk to a health care provider to see if another test is needed.
  - People who are in quarantine, but symptomatic and negative, should still remain in quarantine.

- People who test positive for COVID-19 and who have symptoms must stay home and away from others in the house until all three of the following are true:
  - They feel better and symptoms have improved.
  - At least 10 days have passed since symptoms first appeared.
  - They have had no fever for the last 24 hours, without using medicine that lowers fever.

- People who test positive but have no symptoms must stay at home and away from others in the house for 10 days from the testing date.
  - MDH does not recommend that colleges and universities require COVID-19 testing before returning to school or work.

- Consider offering alternative housing for people who test positive, but who share houses, apartments, or dorm rooms and are unable to stay in a separate room away from others.

---

### Conduct testing around clusters of infections

Consider broader testing strategies jointly with MDH, local public health, and the MDH higher education testing group.

- Test people who are part of a target group, such as all residents who live on a dormitory floor or who attend a certain class.
  - Voluntary testing of groups of students, faculty, or staff who have not already tested positive may be recommended when it is shown that infection is limited to a particular activity, location, or group.

- When necessary, consider testing all or part of the college/university, sometimes along with a community testing event.
  - Testing can include students, faculty, and staff and/or the surrounding community.
▪ Work with MDH or local public health to coordinate increased testing capacity, as needed, and reach out to local health care providers.

Communications

▪ Work with your team to make a plan that outlines how, what, and when to communicate about COVID-19 cases and outbreaks.
  ▪ Decide which audiences to notify and how. Each college/university is responsible for notifying students, faculty, and staff who have had contact with someone infected with COVID-19.
  ▪ Become familiar with MDH/local public health sample notification letters, and work with MDH to get the letters.
  ▪ Understand state and federal laws and privacy rules, including the Minnesota Communicable Disease Reporting Rule (www.health.state.mn.us/diseases/reportable/rule/index.html) and the Family Education Rights and Privacy Act (FERPA) (www.cdc.gov/phlp/publications/topic/ferpa.html).
  ▪ Understand when it is and is not allowed to share a person’s name or other identifying information. Colleges and universities should talk to their legal counsel for specific advice. Review a few general principles:
    ▪ If notifying all students, faculty, and staff about COVID-19 cases on campus, do not share names or other identifying information.
    ▪ If notifying close contacts of someone who tested positive for COVID-19 or who is suspected of having it, do not share their name or other identifying information unless sharing this information is necessary, and only if you have permission from that person.
    ▪ If a campus does not have permission to share a name or other identifying information and the person with COVID-19 refuses to notify their close contacts, contact MDH.
    ▪ When reporting cases of COVID-19 to MDH or local public health, the Minnesota Communicable Disease Reporting Rule requires that the report include certain information about the individual, if known.
  ▪ Determine how often to notify students, faculty, and staff about number of people with COVID-19 and outbreaks on campus.

Resources

Case investigations and contact tracing

College and university staff can play an important role in contact tracing. Staff members who help with finding and contacting close contacts make it easier to assess the extent of exposure and identify close contacts who need to stay away from others.

Close contact

A close contact for COVID-19 is anyone who spends a total of 15 minutes in a single day within 6 feet of someone who has COVID-19, starting two days before the infected person had symptoms or was tested (if no symptoms).

Determining close contact when traveling on Shared transportation (e.g., buses or vans)

Those traveling on buses should have assigned and documented seating arrangements, remain at least 6 feet from the driver and the riders, and wear face coverings at all times.

If the above precautions are followed:

- Drivers would not be considered a close contact if they have been consistently spaced at least 6 feet away from all riders, including the ill person (with the exception of riders entering/exiting the bus).
- Close contacts will only include those who are in the same row, two rows ahead, or two rows behind the positive person for 15 minutes or more over the course of the ride (or roundtrip, if applicable).

If the above precautions are not followed, then the definition of close contacts is expanded to the entire bus if any of the following are true:

- Riders are not in their assigned seat (i.e., moving about the bus to socialize with others) for the entire ride (or roundtrip, if applicable); or
- There is no documentation or other ability to confirm seating assignments; or
- Riders were engaged in activities that involved removal of face coverings (e.g., eating and drinking).

Staying at home and away from others (isolation)

When someone with signs of the disease stays in one place away from others, they are in isolation. This is important because COVID-19 spreads from person to person. When people with COVID-19 stay away
from others, the disease cannot spread. It is important to remember that people can give the disease to each other before they show signs of being sick and even if they never feel sick. This is why MDH identifies close contacts starting two days before the infected person gets symptoms or gets tested (if symptoms are not present).

People who test positive for COVID-19 should stay at home and away from others until all three of these things are true:

- They feel better and symptoms have improved.
- At least 10 days have passed since symptoms first began.
- They have had no fever for the last 24 hours, without using medicine that lowers fever.

Resources for people with COVID-19:

- CDC: What to Do If You Are Sick (www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html)
- What to Do if You Have COVID-19 (www.health.state.mn.us/diseases/coronavirus/case.pdf)

For translations, see If You Are Sick: COVID-19 (www.health.state.mn.us/diseases/coronavirus/sick.html) in the “If you are sick or test positive for COVID-19” section.

Personal protective equipment (PPE)

Special clothing and equipment that create barriers against health and safety hazards are called personal protective equipment (PPE). Examples include goggles, face shields, gloves, and respirators. Please see links on how to wear PPE in the links below.

In general, N95 respirators should be reserved for times when aerosolized procedures are being performed. Otherwise, health care workers should follow guidance on the CDC website about what to wear during face-to-face interactions with people who have COVID-19:


Staying at home (quarantine)

“Quarantine” is when someone who may have been exposed to COVID-19 stays home, even when they do not feel sick. The person stays home because they spent time close to someone with the disease and
now may be at risk of getting sick and infecting others. People with COVID-19 can give it to others before they have symptoms and even if they never feel sick. Read more at CDC: When to Quarantine (www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine.html).

- A close contact of a person with COVID-19 should stay at home for 14 days from the last time they had close contact.
- Staying home for 14 days is not required for a close contact who tested positive for COVID-19 within the last 90 days and has already recovered.
- In some circumstances colleges or universities may allow for individuals who have been exposed to quarantine for shorter amounts of time:
  - Campuses can consider a 10-day quarantine period, even among roommates, as long as separate isolation and quarantine spaces can be maintained for those roommates. MDH also continues to recommend to test all close contacts of a case around day seven.
  - For students who are in on-campus congregate residences, it is not recommended to use the seven-day quarantine period.
    This is due to the risk of the impact of transmission in these settings. Using the 14-day or 10-day quarantine is recommended, due to the high risk of transmission.

Resources for people who are close contacts:

- What to Do if You Have Had Close Contact With a Person With COVID-19 (www.health.state.mn.us/diseases/coronavirus/contact.pdf)

Students, faculty, and staff with symptoms

People with symptoms of COVID-19 should review the following:

- Visitor and Employee Health Screening Checklist (www.health.state.mn.us/diseases/coronavirus/facilityhlthscreen.pdf)
- COVID-19 Decision Tree for People in Schools, Youth, and Child Care Programs (www.health.state.mn.us/diseases/coronavirus/schools/exguide.pdf)
Appendix A: Tracking tool for people staying home and away from others due to COVID-19 symptoms

**Instructions:** Track timelines of students, faculty, and staff who have symptoms of COVID-19, who have tested positive, or who have been in close contact with a person with a confirmed case for staying home and away from others. This information is confidential and must be kept in a secure place.

**Measures:** Fever of 100.4 degrees Fahrenheit or higher

**Symptom Key:** F = fever/chills; C = cough; S = shortness of breath; E = exhaustion/fatigue; B = body or muscle aches; H = headache; L = loss of taste or smell; T = sore throat; R = congestion/runny nose; N = nausea/vomiting; D = diarrhea.

**Symptom Monitoring Chart**

<table>
<thead>
<tr>
<th>Date and Time</th>
<th>Client Temp</th>
<th>Symptoms</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Client ID:**
_________________________

**Room Number:**
_________________________

**Date of First Symptoms:**
____ / ____ / _____

**Date of Potential Exposure:**
____ / ____ / _____

**Date of COVID-19 Test:**
____ / ____ / _____

**Date of Last Fever:**
____ / ____ / _____

**Date Released from Isolation:**
____ / ____ / _____