

SAFE ON CAMPUS: CONSIDERATIONS AND CHECKLISTS TO GUIDE MASSACHUSETTS COLLEGES AND UNIVERSITIES IN PLANNING FOR A SAFE SEMESTER ON CAMPUS¹

PURPOSE STATEMENT. The purpose of this document is to provide a comprehensive overview of certain considerations and checklists that colleges and universities may want to use as guidance in developing their own individual plan to safely reopen their campus for the fall semester and, should the public health data require, for developing contingencies for scaling back campus operations. Institutions may also use this document as a basis for further conversations with their local health departments.

This document builds upon the reopening plans that have been developed by other states, including Connecticut, New York, and Michigan. It is not intended to be prescriptive or establish a standard of care. Rather, because of the incredible diversity of the colleges and universities in Massachusetts, a specific provision identified in this document may work for one institution but may not be applicable or feasible for another institution.

On July 24, 2020, the Commonwealth issued the [Higher Education Control Plan](#) for Phase 3 of Governor Baker's Reopening Plan. The Control Plan is aligned with the considerations and checklists included below. Please note that an institutions' Control Plan does not need to be submitted for approval, but it is recommended that the Plan be posted on the institution's website and must be immediately available for review in the case of an inspection or outbreak.

1. CONSIDERATIONS FOR A PHASED REPOPULATION OF YOUR CAMPUS

As colleges and universities plan for the resumption of in-person classes and residential life, it will be imperative to provide a **multilayered strategy** that best protects the health of students, faculty and staff as well as surrounding communities. The overarching goal is to reduce the risk of infection on campus, which may involve a wide range of strategies, including mask wearing, social distancing, hand hygiene, cleaning, self-reporting of symptoms, testing, contact tracing, quarantine and isolation. Periodic surveillance testing, designed to identify individuals who are infected but who are not yet exhibiting symptoms, can be an effective preventative element of such a multilayered approach. Ultimately, colleges and universities will need to fully engage students, faculty and staff in all aspects of these multilayered strategies to achieve community-wide commitment and cooperation – as a shared responsibility – that will be essential to minimize the risk of infection on campus.

¹ *This document is for the sole purpose of providing suggestions for consideration. No legal, medical or professional advice or opinions are given herein or may be relied upon. Each institution is encouraged to consult with their own legal, medical and professional advisors prior to implementing a restart plan.*

1.0 General Considerations:

- Establish protocols for testing for COVID-19, including a determination as to whether testing will be done on campus or through an agreement with a third-party or a community healthcare partner. For additional guidance on testing, please review the *Report of the Massachusetts Higher Education Testing Group*
- Develop a coordinated communication plan to inform students, faculty, staff, and parents when a positive case has been discovered on campus.
- Prepare educational videos regarding handwashing, protocols for face coverings and social distancing, and other public health measures will be made available to students, faculty, and staff.
- Purchase an appropriate amount of PPE, cleaning supplies, and handwashing products.
- Determine whether you will be requiring students, faculty and staff to bring their own face coverings to campus.
- Develop protocols for students, faculty and staff coming to campus from other locations, and for the same groups of people leaving and re-entering for semester breaks
- Determine whether your institution has adequate resources to support increased mental health demands, including bereavement counseling and increased counseling needs due to anxiety from COVID-19.
- Develop protocols for delivery of emotional and mental health services including both individual and group counseling.
- Determine whether potential changes to the academic calendar, travel restrictions, and other institutional responses to COVID-19 will affect the student health insurance program.
- Identify event facilities that offer flexibility for use as additional classroom or dining space.
- Consider condensing the fall semester with no long breaks in order to limit transmission of infection from returning students. For example, students leaving for Thanksgiving break and returning after travel might need to enter frequent health surveillance protocol or quarantine upon return to campus. Reducing the number of move-in periods per semester would limit the amount of time students are traveling away from campus and returning.

1.1 Compliance Considerations: It is essential that students, faculty and staff are fully engaged in all aspects of the strategies and protocols that are implemented to minimize the risk of infection on campus. It will require community-wide commitment and cooperation to protect the health of everyone in the campus community. However, any model should assume that a certain percentage of students will not always follow the protocols. Key factors would include:

- Establish policies that are enforceable and reviewed frequently to allow for changes
- Establish consistent policies for students, faculty and staff.
- Use signage that clearly displays social distancing policies and ensures that the policies are easy to understand and follow.
- Ensure that enforcement is not heavy-handed. Rather, the focus should be on engaging students, faculty and staff so that policies are more likely to promote commitment and cooperation at both the individual level and campus-wide.
- Explain the consequences for violating community health protocols fully in the student Code of Conduct, as well as any faculty and staff handbooks.
- Consider a wide range of strategies to support compliance as a social norm on campus
- Establish travel policies that minimize the risk of students bringing the virus back to campus after travel. International travel should be very limited or prohibited.

1.2 Considerations for All Facilities:

- Use paper towels in bathrooms.
- Establish protocols for limiting the use of common areas/lounges.
- Install signage and barriers to control flow of people.
- Ensure proper ventilation in bathrooms.
- Ensure that hallways are not used at gathering places.
- Supply a sufficient amount of disinfectant wipes so that students and faculty are able to wipe desks, tables, lecterns, and microphones before and after use.

1.3 Accessibility Considerations:

- Determine whether physical accessibility (See ADA guidelines) has been taken into consideration in reconfiguring a room to allow for social distancing, including the provision of accommodations for hybrid classrooms and the retention of open spaces and walkways.
- Determine whether institution's website/learning platforms have closed captions/descriptions for all videos and images and meet ADA guidelines for effective communication.
- Determine whether course format provides equitable access to instructors, materials, office hours, and group projects for students, faculty and staff with disabilities.
- Determine whether any redesigned exam schedules or other assessments take into account any accommodation needs of students, faculty and staff.
- For international students, determine how to accommodate them if they are not able to travel to campus due to travel restrictions and/or visa issues. Determine if they will be able to engage in remote learning, and can they maintain their "residential status" while engaged in remote learning.

1.4 Checklist for dining service:

- Current guidance on social distancing of 6 ft. distance may reduce dining capacity, so consider alternative serving locations and service styles, including grab-and-go, boxed meals, or delivery. Also consider "pop up" for distribution centers close to classrooms or residence halls. For additional guidance, review the Commonwealth's Safety Standards & Checklist for Restaurants <https://www.mass.gov/info-details/safety-standards-and-checklist-restaurants>
- Consider a reservation system to better manage the volume of students and achieve social distancing. This may also involve an investment in technology to allow for the online pre-ordering of meals.
- Reconfigure dining halls for social distancing and appropriately spaced seating. Eliminate buffet lines. This should include clearly marked 6-foot distance markers on floor around dining food service stations.
- Install appropriate barriers at point of sale/checkout to protect staff, and consider using contactless payment systems to reduce person-to-person transactions.
- Discontinue the use of open bins for utensils.
- Develop protocols to ensure that tables and chairs are cleaned after each use, and that restrooms in dining halls are cleaned more frequently during peak dining hours.
- Ensure that automatic hand sanitizers are placed throughout dining area.

1.5 Checklist for repopulating faculty and staff to campus:

- Create a "return to campus" guidebook and/or training video that should be reviewed by each employee before returning to campus. This will be similar to other employee orientation programs.

- Establish a system for on-going communications with faculty and staff around new protocols and/or developments around COVID-19 and the response to COVID-19.
- Develop protocols for employees who identify as high-risk or who are living with individuals who are high-risk, or who are in quarantine or isolation.
- Require all employees to wear a mask at all times in the work environment with the exception of eating.
- Require frequent hand-washing and/or sanitizing with disinfectant gel.
- Ensure that easily accessible hand dispensers are conveniently located throughout the work environment.
- Install proper signage at entrances, restrooms, elevators, stairs, floor arrows/traffic flow, queuing markers on floors of elevators, dining halls, and locker rooms.
- Establish policies for maintaining 6 feet of physical distancing and the de-densification of the work environment. This may require alternating the days that certain employees are on campus, staggered shifts, restricting in-person meetings, and, where feasible, using remote on-line meeting tools.
- Consider instituting policy making each employee responsible for wiping down their own work areas, and coordinate with custodial staff to ensure the frequent wiping down of shared locations, including copiers, printers, AV equipment, doorknobs and light switches.
- Encourage faculty and staff to take food back to the office or eat outside while maintaining 6 ft distancing.
- For faculty and staff restrooms, place hand sanitizing dispenser at exterior of restroom, use paper towels in lieu of hand dryers, and limit use of restrooms to ensure social distancing.
- Limiting the number of people who can use an elevator at one time.
- Establish protocols to minimize exposure for any staff who have to interact with COVID positive students in isolation
- Determine whether you will need to modify staff (professional and paraprofessional) responsibilities, training, and protocols to promote their safety and health as well as that of the community.

1.6 Checklist for classrooms and academic planning:

- Develop a full understanding of any CDC, state, and local guidance that must be incorporated into each classroom setting.
- Develop clear communications and trainings are provided regarding in-person instructional expectations.
- Determine whether a classroom can be reconfigured to allow for social distancing.
- Determine whether the foot traffic in a building can be rerouted to maintain social distancing. Please note that such rerouting may implicate accessibility issues.
- Determine whether other spaces on campus can be utilized as larger classroom. Consider whether the institution can coordinate or contract with off-campus locations to use as classrooms or lease temporary modular classroom units for additional teaching space.
- Consider whether scheduling can be done without requiring back-to-back classes in a classroom so that cleaning can take place between classes, or consider having students wipe down shared spaces at the start and end of classes.
- Consider establishing teaching plans that include modes for a mix of in-person and online classes, including live remote attendance; course recorded live while shared with remote students; and, lectures pre-recorded and remote student interaction conducted at a different time or in virtual section.
- Develop procedures for having faculty be able to switch to online delivery at any point during the semester in the event that the institution needs to scale back operations in response to an outbreak on campus or the surrounding community.

- Determine whether faculty at risk or living with someone at risk are given (1) the option to teach a course exclusively online, or (2) an alternative assignment.
- For online classes, consider how to address any technological gaps or limitations faced by students. Also determine whether your campus has sufficient bandwidth/infrastructure to provide remote learning to students who must self-quarantine or isolate on or near campus for periods during the semester.
- Consider whether classes can be placed into categories which reflect the relative importance of the course for graduation, and then determine whether the teaching of less critical classes can be deferred until the spring semester.
- Develop an academic communication plan for the fall semester.
- Develop protocols for handling classes in the event that an instructor tests positive for COVID; must self-quarantine for a period of time after being in close contact with a COVID positive person; must take time off to deal with a COVID-related emergency during the semester.
- For clinical placements and nursing programs, determine who will provide PPE to students, who will train the student on the appropriate use of PPE, and who will be responsible for training students on COVID-specific practices at the placement site.

1.7 Checklist for fitness and athletic facilities:

- Develop policies governing all fitness facilities and athletic events, including the managing and cleaning of fitness and athletic facilities. For additional guidance, review the Commonwealth's Safety Standards & Checklist for Fitness Centers and Health Clubs: <https://www.mass.gov/info-details/safety-standards-and-checklist-fitness-centers-and-health-clubs>
- Determine whether spectators be allowed at athletic events. If so, will spectators be required to wear face coverings?
- Determine whether seating capacity at athletic facilities allows for any reductions necessary for proper social distancing
- Install proper signage on all fields and arenas advising students, faculty, staff, and spectators about applicable social distancing requirements.
- Protocols for visiting teams, including whether they will be allowed to access and use locker rooms.
- Clearly communicate your plans regarding the use of athletic facilities to ensure that they are shared and fully coordinated with other institutions in your athletic conference.
- Determine the maximum capacity for each area of your athletic facilities, including fitness centers, pools, tracks, gymnasiums and locker rooms.

1.8 Checklist for custodial services:

- Establish procedures for timely notification to custodial services of infected locations so that steps can be taken to quickly contain spread of virus resulting from contaminated surfaces.
- Track and publish time-based cleaning schedule.
- Arrange work schedules to limit the contact between custodial staff and students.
- Develop procedures for the cleaning of classroom spaces twice daily, and the cleaning of residential and administrative offices at least once daily. A roving disinfecting team can clean high touch point surfaces and areas.

2. CONSIDERATIONS FOR A PHASED REPOPULATION OF RESIDENCE HALLS AND OFF-CAMPUS HOUSING

2.0 General Considerations for Repopulating Residence Halls: Colleges and universities have a variety of residential space: traditional double-sided corridor residence halls with shared bathrooms, smaller residence halls and houses with a variety of room configurations, and on- and off-campus apartments either in wood-frame or brick houses or larger apartment complexes. The ratio of students to shared bathrooms and protocols for detecting and protecting against transmission are important factors to consider in setting out a residential strategy.

- On-campus residence halls.** Residential capacity will be less than 100% because institutions will need to set aside a percentage of beds for separate housing to isolate/quarantine any COVID-positive student and protect medically vulnerable students. Also, residence halls with very high student-to-bathroom ratios will likely need to be de-densified so that that ratio is 12 students or less per bathroom, depending on bathroom size and configuration.
- Consider assigning students to specific bathrooms to de-densify and limit the number of unique individuals using the bathroom.
- Consider using a “small group” strategy that groups students in residence halls in a way that limits interaction to a small number (6 to 12) of students. If one student in the small group is symptomatic or tests positive for COVID, then exposed students are able to self-quarantine in place in their rooms for 14 days or in separate designated housing units.
- Singles, doubles, triples and quads may be used for “small group” units. A “small group” could include a suite, apartment, house or wing of a residence hall. Bathroom facilities may be shared, but students should be assigned to specific bathroom for their small group. Depending on the configuration of residence halls, face coverings should still be required everywhere except the dorm room if groups of students could exceed more than 10.
- Consider closing or limiting access to common areas depending on cleaning protocols. Social interaction limited to small group units.
- Apartment units with shared single-use bathroom/shower and shared kitchen (usually 10 or less people per apartment) can be considered one “small group”.
- Traditional dorms with double-sided corridors can have “small groups” contained within them, including several per floor or wing or building. Travel between floors or wings will need to be limited, with social distancing observed and face coverings required in all circulation areas and shared/common rooms.
- Develop protocols to ensure appropriate social distancing within the residence halls. Determine how lounges and other common areas will be used and how access to such areas will be limited.
- Establish rules for when students will be required to wear face coverings in residence halls. Students should be required to wear face coverings in all common entryways, hallways, and common spaces.
- Develop protocols for the daily cleaning and sanitizing of residence hall.
- Identify alternative additional housing facilities in the event that the state issues guidance that reduces the occupancy limits in residence halls.
- Develop policies for providing additional training for Residence Life professional and RA’s related to public health concerns, social distancing requirements, and how to use and access PPEs.

- Determine how best to reduce the ratio of students to common spaces, toilets, showers, sinks, laundry machines, and elevators to minimize the number of students sharing these places.
- Developed protocols for emergency evacuations that allow for social distancing.
- Determine whether you will need to increase the ability to monitor building access, occupancy flow/tracing in traditional corridor style residence halls through the hiring of more student staff or technology.
- For a “singles-only” housing model, manage bathroom assignments to produce the best ratio in each residence hall. Also consider developing protocols for travel between residence hall floors, wings or buildings. Exposed students allowed to quarantine in their singles-only room.
- Establish protocols for significantly increasing cleaning of laundry areas.
- Ensure that dorm rooms have operable windows for ventilation.
- Consider hiring more RAs, especially in first-year residence halls, for role modeling, increased education and compliance.
- Develop a sensitivity/educational plan for the residential community to mitigate anxiety should someone test positive

2.1 Checklist for housing assignment process:

- Develop communication and rollout strategy, including FAQs, to manage expectations
- Review medical accommodations on file for prior medical conditions which are risks for more serious COVID illness for returning students and obtain information from new students to determine amount of rooms that will be needed for such students.
- Consider asking students who have had prior COVID positive medical history to self-identify, with proof by testing. More definitive scientific proof is needed in order to better understand whether that prior infection provides a sufficient level of immunity to reinfection.
- Consider treating small groups of students who are housed together and share a bathroom as a “community” to enhance compliance responsibility as a “social norm”.

2.2 Checklist for housing medically vulnerable students:

- Consider whether medically vulnerable students should be housed in separate buildings, temporary modular units or reside within ‘healthy’ housing contingent upon capacity for single rooms. Try to limit the number of individuals using shared bathrooms or single bathrooms when feasible.
- Single-use bathrooms are preferred, but multi-stall is allowed with protocols to limit use to only one student at a time. Provide wipes or other cleaning supplies for cleaning between uses.
- Common areas closed off or used for only limited gatherings.

2.3 Checklist for the move-in process when on-boarding students:

- Determine what health documentation or information will be collected from students before or when they arrive on campus.
- Develop a move-in process that is phased and enhances the goals of social distancing and ensures that the density and flow of people support such distancing. The pace of move-in may be dependent on testing capacity and other logistical considerations. For additional guidance on how testing can be used as part of the onboarding process and the possible frequency of such testing, please see the *Report of the Massachusetts Higher Education Testing Group*.

- Determine whether every student should be tested prior to arrival or on arrival at campus. What test is used, and the frequency of any subsequent testing will evolve as the science, sensitivity, and availability of testing rapidly changes over coming weeks. For additional guidance on how testing can be used as part of the onboarding process and the possible frequency of such testing, please review the *Report of the Massachusetts Higher Education Testing Group*.
- Develop clearly communicated protocols for how move-in will happen, including the requirement to wear face coverings, physical distancing, reducing foot traffic, limiting vehicle traffic, and limiting the number of family members that may enter the residence halls.
- Consider staggering the move-in process by floor and/or building in order to reduce the number of students moving in at the same time.
- Consider having students ship their belongings in advance of the move-in so that they can be delivered to the student's room prior to arrival, thereby reducing the number of people needed for move-in day and reducing foot traffic in and out of the building.
- Consider using the move-in process as an opportunity for training on the use of symptom self-check and/or COVID testing.

2.4 Checklist for residence hall bathrooms:

- **All bathrooms.** Minimize time in all shared bathrooms.
- Prohibit the storage of personal items in shared bathrooms.
- Encourage the closing of toilet lids, if present, before flushing.
- **Multi-stall shared bathrooms.** If toilets and showers are separated by physical barriers, all can be used.
- For sinks and open showers, 6 feet of separation should be maintained when in use.
- If there are multiple communal bathrooms available on a floor, bathrooms should be assigned by zone or other criteria, and users should only use their assigned bathroom, to limit cross contamination and assist with traffic control.
- A student that is quarantined after having close contact with a COVID positive person should use a single-user bathroom if available. Students in family units may share a bathroom during quarantine.
- Small groups of students may be treated as a "family unit" and may share a common bathroom, but should wear face coverings and maintain social distancing whenever practicable
- **Cleaning/Disinfecting Practices.** Multi-stall communal bathrooms should be fully cleaned and disinfected daily, using products that meet EPA's criteria for use against SARS-CoV-2.
- Bathrooms shared only by roommates/suitemates should be cleaned regularly by custodial staff, and students also should be responsible for wiping surfaces before and after use.
- Disinfectant wipes should be placed near sinks, shower stalls and toilets.
- **Ventilation.** Regularly check exhaust and ventilation system to ensure that the system is working properly and that the bathroom is under negative pressure. Open windows whenever possible.
- Implementation and compliance will require cooperation and collaboration between students, custodial staff, and others. Use conspicuous signage to educate students and reinforce the "social norm" of complying.
- Personal towels should be kept in dorm rooms. Consider installing towel hooks in rooms.
- Consider encouraging teeth brushing in dorm rooms, if possible.

2.5 Checklist for off-campus housing:

- Require all off-campus students to participate in health surveillance, mask wearing, social distancing, self-reporting symptoms, and use of fever/symptom monitoring apps.
- Surveillance testing for students living off-campus or commuting part-time should be considered along with other commuting faculty and staff who are medium or highest exposure risk. Further advice will be forthcoming and the logistics of sample collection, reporting and interventions may require separate protocols compared to on-campus residential students.
- Off-campus students diagnosed with COVID should be given option of recovering at home (if isolation at home is feasible) or on campus in COVID positive housing.
- Off-campus students who need to quarantine may be able to do so in their off-campus housing.

3. CONSIDERATIONS FOR MONITORING HEALTH CONDITIONS ON CAMPUS TO DETECT COVID-19 INFECTION

3.0 General Considerations for COVID-19 testing and health surveillance on campus:

- **Test, Trace & Isolate.** When a case of infection is detected, isolate the infected students based on CDC guidance, trace contacts, quarantine all roommates and suitemates that were exposed, and consider quarantining others with close contact.
- **Contact tracing.** Contract tracing should be done by DPH and/or the local board of health. Consider training staff and student workers to serve as contact tracers so that they can assist DPH and/or local board of health with contract tracing program. Also consider providing students, faculty, and staff with one of the several contact tracing apps that are expected to be available by late summer.
- Testing or sample collection sites. Three purposes:
 - Onboarding. Could be located in large areas like athletic facilities, tents, field houses for sample collection and training while distancing.
 - Surveillance of asymptomatic students, faculty and staff. May need distributed sites depending on campus configuration. Can be in mobile or trailer units with appropriate observation of self-administered tests.
 - Symptomatic students, faculty and staff. Testing can be done by student health services or pursuant to testing arrangement with local health care provider. The symptomatic testing location should be easily accessible and apart from asymptomatic surveillance testing location.
- For additional guidance on how surveillance testing can be an effective preventative element of an onboarding strategy, please review the *Report of the Massachusetts Higher Education Testing Group*.
- Results of COVID test should be reported back as soon as practicable after the test was administered to a central location responsible for triage and determining course of action (i.e. quarantine or isolation).
- Develop a policy that requires all students to agree to comply with the testing protocols before they arrive on campus. This will include the development of procedures for handling any complaints against students who do not or refuse to comply with basic layers of protection and the requirement to be tested.
- Develop protocols for handling a positive COVID test, including:

- Transportation policy to move COVID positive student to designated isolation housing
 - Contact tracing of any persons inside the campus community, and partnership with local DPH or Board of Health for external contact tracing
 - Frequent health monitoring and testing
 - Quarantine of any person who had “close contact” exposure to the COVID positive student
- Develop system for the monitoring and self-reporting of symptoms, including the use of symptom-monitoring and self-reporting apps. Partners Healthcare has developed a Web application in REDCap that enables employee self-attestation of positive or negative COVID-19 symptoms prior to coming to work and provides clearance and a “day pass” for employees with negative symptoms. Consider implementing the app on campus. See link: <https://github.com/PartnersHealthCare/REDCapCOVIDPass>
 - Develop clear protocols and locations for students to report for triage and testing.
 - Students with symptoms should be required to report to COVID testing site in/near COVID positive housing.
 - Ensure that you have adequate medical staff to provide care for students in isolation.
 - Designate separate quarantine facilities for students who need to be separated due to being exposed to COVID-19 but are presently asymptomatic. Also establish the protocols for students completing a quarantine period and moving back into main housing.
 - If one student in a “small group” is symptomatic and/or tested COVID+, then exposed students (according to CDC definition of “close contacts”) in the group would self-quarantine in their own dorm room for 2 weeks or in separate designated housing units.
 - Establish protocols for limiting the exposure for any staff who have to interact with students in isolation
 - Can/should the school establish testing/health requirements that students must regularly meet as a condition of gaining access to instructional and/or residential spaces (e.g., temperature scans upon entry to the residence hall)?

3.1 Checklist for safety protocols and PPE

- Establish a system for the distribution of PPE to on-campus employees where needed.
- Develop protocols for mask wearing and social distancing in shared social spaces and bathrooms within “small group” units, and throughout residence halls with several “small groups” located on same corridor or floor.
- Limit occupancy in bathrooms, with protocols for sign-up and cleaning times.
- Limit gatherings to members of the same “small group”. Also try to limit vertical or horizontal travel between “small group” units, while still requiring social distancing and mask wearing. Maintain.
- Develop protocols for frequent cleaning and potential sterilization of bathrooms.
- Identify a range of supplies and medications that will be useful to have on hand.
- Clear policies for guests and social events beyond “small groups”.
- Encourage students to keep electronic calendar to help with contact tracing.

3.2 Checklist for managing visitors to campus:

- Develop protocols for monitoring or limiting visitors’ access to campus facilities. This would include limiting in-person campus tours/visits by prospective applicants and families.
- Establish procedures for registering visitors to campus, and ensure that campus security officers have clear direction on how to handle visitors to campus.

3.3. Checklist for student travel restrictions:

- Consider developing protocols for students who return to campus from areas of concern, including whether to restrict their movement on campus until they have been tested and confirmed not to have been exposed to COVID.
- Determine whether the institution will encourage students to limit travel during any breaks in the academic calendar. If so, develop protocols for the campus to remain open during breaks and holidays to house and provide dining services to students who agree not to travel home.

4. CONSIDERATIONS FOR CONTAINMENT TO PREVENT THE SPREAD OF COVID ON CAMPUS IF DETECTED

4.0 Checklist for providing health care services to COVID+ students in separate residence hall:

- Space for isolating and quarantining students.** Set aside a percentage of beds for COVID positive students. If possible, set up a testing/triage area on the ground floor to handle walk-ins. The plan should describe how many beds have been designated for COVID positive students and where those beds are located on campus.
- For purpose of contact tracing, it is important to define what constitutes “close contact” with a COVID positive person. Based on current guidance, a person has had close contact with another person if they were within 6 feet of them for at least 10 minutes while they were symptomatic or within 48 hours before symptom onset.
- Liaison with local/regional hospitals and health care facilities and local board of health to establish protocols for responding to an outbreak or surge of COVID cases on campus and/or in the surrounding communities. Designate a member of the senior leadership team to be the contact person with local hospitals and health care facilities.
- Develop protocols to ensure that COVID positive students will receive frequent health care monitoring, including the use of daily telemedicine calls. Consider contracting with EMTs or health care providers to provide such services.
- Protocols for use of elevators, if applicable, in residence hall set aside for COVID positive students
- COVID positive students can share rooms and bathrooms if required
- Develop protocols to ensure that students in isolation or self-quarantine can be provided with regular food service.
- Ensure food delivery services to COVID positive students. Consider locating beds for COVID positive students as close as possible to dining hall to facilitate food service.
- Develop appropriate protocols for cleaning and sanitizing the rooms and building set aside for COVID positive students.
- Develop protocols to ensure safety of health care providers providing care for COVID positive students as well as the wider community
- Develop protocols for students completing an isolation period and moving back into main housing
- Establish a system for consistent communication with students around new protocols and/or developments around COVID-19 and the response to COVID-19.

5. CONSIDERATIONS FOR THE SCALING BACK OF CAMPUS OPERATIONS IF NECESSARY

5.0 Checklist for scaling back operations if a serious outbreak occurs on campus:

- Develop plan for scaling back campus operations or shutting down in the event of a serious outbreak on campus or if the state determines that public health data requires a shutdown.
- Develop protocols for de-densifying the campus by sending local students home. Different protocols may be necessary for students who need to travel to other states or international students who would have to travel to another country.
- Coordinate with DPH and local board of health about keeping COVID positive students and/or students in self-quarantine on campus until they have been cleared to discontinue isolation according to CDC guidelines.
- Develop plans to ensure that all current class instruction can be continued online for remote learning.