

Recommendations for Responding to Coronavirus Disease 2019 (COVID-19) at Residential Schools, Colleges and Universities August 27, 2020

Background

This guidance is intended to assist residential schools, colleges and universities in responding to outbreaks of COVID-19. This guidance supplements but does not replace recommendations included in New Hampshire's (NH) [Universal Guidelines](#), NH Department of Education's [New Hampshire Grades K-12 Back-to-School Guidance](#), [NH DHHS Educational Institutions Frequently Asked Questions](#) or [NH Department of Education's Post-Secondary Education Taskforce Report](#).

All institutions should adhere to current CDC [Guidance for Colleges, Universities, and Higher Learning](#) or [CDC Guidance for Schools and Childcare Programs](#), including universal source control measures; communal dining and group activity restrictions and screening of students and staff.

Please notify the NH Division of Public Health Services (DPHS) (603-271-4496 or 603-271-5300 after hours) if there is a suspected or confirmed case of COVID-19 identified at your institution. All suspected and confirmed cases should be reported to the NH DPHS and not directly to other state or local health departments.

Immediate Actions

Isolation, Quarantine, and Student Movement

- [Isolate](#) students with suspected or confirmed COVID-19 in a single room with a private bathroom, if possible.
- [Quarantine](#) all students and staff determined to have been in close contact with the person with suspected or confirmed COVID-19. Close contact is defined as being within 6 feet for a total of 10 cumulative minutes or more, beginning 48 hours prior to illness onset or date of specimen collection associated with the positive COVID-19 test, whichever is earlier.
 - Note: The quarantine period is defined as 14 days from the contact's last potential exposure to the person with suspected or confirmed COVID-19. A negative COVID-19 test result during the 14 day quarantine period does NOT change the duration of quarantine.
- Ensure all health center personnel treating persons with suspected or confirmed COVID-19 use [all recommended COVID-19 personal protective equipment \(PPE\)](#) and infection control measures.
- Close classrooms that had a confirmed case of COVID-19 for environmental cleaning.
- Recommend that all quarantined students and staff identified as close contacts undergo viral RNA (PCR) or viral antigen testing for COVID-19.
 - Viral antigen testing should be used only for persons with symptoms compatible with COVID-19, and testing should occur within 5 days of symptom onset.
 - Persons with a positive PCR or positive antigen test should isolate from others until meeting criteria for discontinuation of isolation.

- Provide distance teaching and learning options for students and staff with suspected or confirmed COVID-19 for the duration of their [isolation](#).
- Provide distance teaching and learning options students and staff who are close contacts to confirmed COVID-19 cases for the duration of their [quarantine](#).
- Create a procedure to allow isolated or quarantined individuals to continue to use their meal plan, laundry, medications and other essential day-to-day activities.

Additional Actions

Hand Hygiene, Social Distancing and Environmental Decontamination

- Encourage or require universal use of cloth face coverings or facemasks in all common areas including classrooms and when transiting between buildings or classrooms.
- Enforce social distancing of at least 6 feet apart in campus areas including but not limited to offices, classrooms, laboratories, studios, hallways, restrooms, dining areas, lounges, gym, library, and outdoor spaces.
 - Limit in-person appointments with student service offices (e.g., financial aid, registrar, etc.) to scheduled appointments only (e.g., eliminate 'walk-in' services). Encourage alternative methods of communication such as email, chat software, and telephone calls.
 - Ensure Class room seating:
 - Maximizes physical distance to maintain at least a 6 foot distance whenever possible.
 - Students are NOT be spaced closer than 3 feet to each other when seated in a classroom.
 - If it is necessary to space students within 3-6 feet of others in the classroom setting, schools should look to other mitigation strategies to minimize risk of COVID-19 transmission (e.g., cloth face covering use while seated and conducting classes).
 - If it is not possible to allow for 6 feet of distance, seating should allow for as much distance as possible, with the understanding that persons within 6 feet for a total of 10 cumulative minutes are considered close contacts for the purpose of contact tracing.
- Reinforce basic infection control practices by promoting frequent hand hygiene (e.g., through signage in buildings and on campus) and environmental cleaning of appropriate surfaces.
 - Make alcohol-based hand sanitizer readily available throughout the campus, including in hallways, classrooms, cafeteria and snack shops, lobbies, recreation centers, and other common areas.
- Maximize ventilation indoors by opening windows when possible.
- Close classrooms that had a confirmed case for environmental cleaning.
- Perform frequent cleaning of common areas, classrooms, and other high-touch surfaces.
 - Refer to [List N](#) for disinfectants that are effective against COVID-19.

Transmission-Based Precautions and Personal Protective Equipment (PPE)

- Follow CDC's COVID-19 infection prevention and control [recommendations](#), which include information on recommended PPE. Recommendations for healthcare personnel at college health centers:
 - For management of persons under evaluation for COVID-19, or persons with confirmed COVID-19, healthcare personnel should wear gown, gloves, eye protection (face shield or goggle), and a surgical facemask or N95 or higher-level respirator as outlined below:
 - For specimen collection for COVID-19 testing, healthcare providers should wear surgical face masks in addition to other recommended PPE. There is no current laboratory or

epidemiologic evidence that COVID-19 is routinely spread through airborne routes of transmission.

- If available, consider using an N95 or higher-level respirator when evaluating patients with confirmed COVID-19, or for symptomatic suspect patients who may be at higher risk of aerosolizing respiratory droplets (e.g., patients with significant frequent coughing, sneezing, etc.).

General Information

- Identify a safety officer to monitor adherence to social distancing and facemask use.
- Consider temporarily eliminating access to common areas to avoid large group gatherings and congregating.
- Assign seating in classrooms to allow for easy identification of close contacts to COVID-19 positive individuals.
- Limit, halt, or postpone events that include outside visitors.
- Notify staff and students (or parents/guardians) promptly (within 12 hours) in the event that COVID-19 is identified at the school.
- Maintain a line list of all students and staff who test positive for COVID-19, including illness onset dates; symptoms; and dates and location when present for in-person activities, beginning 48 hours prior to first illness onset or date of specimen collection associated with the positive test, whichever is earlier.

Testing

Testing Students, Staff, and Close Contacts

- Per [NH DOE Post-Secondary Education guidance](#), colleges and universities need a plan for testing "to identify COVID-19 before it is introduced to the campus community" in addition to a plan for ongoing surveillance testing in order to detect any early transmission after classes resume.
- For residential schools, colleges, and universities, NH DPHS recommends 2-3 rounds of testing of the campus community (residential and commuter students and staff living on campus with students) when newly bringing students onto campus, as follows:
 - Require a negative PCR-based test for all students within the 7-days BEFORE they arrive on campus (pre-arrival testing) to prevent asymptomatic or mildly symptomatic students from bringing COVID-19 onto the campus. Any positive students should be excluded from arriving on campus until they meet CDC [criteria for discontinuation of isolation](#).
 - Test all students a second time with a PCR-based test within 3 days of arrival. During the period between arrival and return of these test results, student movement should be monitored and controlled, to the extent possible, to avoid social congregating and close contact with other students
 - Consider a third round of testing approximately 7 days after arrival, if feasible, given available resources. If pre-arrival testing is NOT conducted as recommended above, then test all students a second time 7 days after arrival with PCR-based test. Student movement should be monitored and controlled until at least two test results have returned negative.
- Conduct ongoing monitoring and surveillance using PCR-based testing of students and staff during the term. Surveillance testing can involve testing only a proportion of the student population but on a recurring basis. The frequency depends on local transmission but may be appropriate at weekly or every other week intervals.

- Test all students quarantined due to a known exposure to COVID-19, 5-7 days following their last exposure to the person with confirmed COVID-19. A negative test does not allow quarantined students to leave quarantine before the 14 days is concluded, but a positive test will allow early response such as contact tracing and placing the quarantined student in isolation.
- Require students to use their campus address when completing test requisition forms.

Screening and Symptom Monitoring

- Routine symptom surveillance of students and staff for early identification of symptomatic persons who are then linked to testing for COVID-19 should include the following questions:
 - Do you have any [symptoms of COVID-19](#) or fever of 100.4 degrees Fahrenheit or higher? Symptoms of COVID-19 can include:
 - Fever, or feeling feverish;
 - Respiratory symptoms such as runny nose, nasal congestion, sore throat, cough, or shortness of breath;
 - General body symptoms such as muscle aches, chills, and severe fatigue;
 - Gastrointestinal symptoms such as nausea, vomiting, or diarrhea; and,
 - Changes in a person’s sense of taste or smell.
 - Have you had close contact with someone who is suspected or confirmed to have COVID-19 in the prior 14 days? (Note: Healthcare workers caring for COVID-19 patients while wearing appropriate personal protective equipment should answer “no” because they are not considered to have a COVID-19 exposure.)
 - Have you traveled in the prior 14 days outside of New Hampshire, Vermont, Maine, Massachusetts, Connecticut, or Rhode Island?
- Person(s) with any new or unexplained COVID-19 symptoms (even if only mild symptoms), those who report close contact with someone suspected or confirmed with COVID-19, or those reporting [travel risk factors](#) should not be allowed on campus.
- Recommend all symptomatic individuals be tested for COVID-19, and refer them to a facility that can provide testing if your school is unable to do so.
- Students, faculty, or staff identified on routine symptom monitoring with any [symptom of COVID-19](#) should be tested with a PCR-based test or the Sofia Quidel antigen test (within 5 days of symptom onset) and isolated pending test results.
- Develop and implement a flexible, non-punitive sick leave policy for staff and students.

Working in Partnership with You

The NH Division of Public Health Services, COVID-19 Congregate Setting Investigation unit will assist you in your next steps, which include:

- Notifying staff, students and parents that a COVID-19 exposure occurred at your school, including development of tailored messaging if necessary.
- DPHS staff will reach out to any person (or the parent/guardian of any person) who is diagnosed with COVID-19. Instructions will be given about isolation of the person diagnosed with COVID-19 and information will be gathered about their close contacts for the purpose of contact tracing.
- DPHS staff will reach out to any person (or the parent/guardian of any person) who is identified as a close contact to the person diagnosed with COVID-19. Close contacts will be instructed to quarantine for

14 days from the last date of exposure to the person with COVID-19, to be tested for COVID-19, and to call their pediatrician/primary care provider if health concerns arise while on quarantine.

The COVID-19 Congregate Setting Investigation Unit will request the following:

- A current list of all students and staff (called a line list) who are ill or have tested positive for COVID-19. The COVID-19 Congregate Settings Investigation Unit will provide the appropriate format, separating students and staff on the list.
- Your assistance in identifying additional close contacts with whom the person diagnosed with COVID-19 is not familiar (peers in classes, meetings, etc.). This means all persons who were within 6 feet for a total of 10 cumulative minutes or more, beginning 48 hours prior to first illness onset or date of specimen collection associated with the positive test, whichever is earlier. The COVID-19 Congregate Settings Investigation Unit will provide a format to collect this information, if needed.
- The total number of staff and students at your school, as well as the total number of staff and students in the specific classroom, dorm or other physical locations where the ill person(s) were.
- A campus map and seating assignments for all classes attended by individual diagnosed with COVID-19.
- Regular updates of students or staff with new onset of illness consistent with COVID-19 or with a positive COVID-19 test, and of any newly identified contacts. An update should be sent every day that there is a newly ill or positive individual; newly identified contact; or other development such as new symptoms, resolution of symptoms, hospitalizations, or deaths.

Please note:

- Any email communications that may contain protected health information or personally identifiable information should be completed through the use of encryption to protect privacy and confidentiality. In order to ensure encryption, DHHS will provide you with instructions via email.
- The incubation period for COVID-19 can be up to 14 days and the identification of new case within a week to 10 days of starting recommended actions does not necessarily represent a failure of the interventions to control transmission.
- Closure of outbreaks and cluster investigations will be determined by the COVID-19 Congregate Settings Investigation Unit. An outbreak is typically considered closed after 14 days have passed without new cases and 14 days have passed since the last date of exposure at the institution.