



OREGON HEALTH AUTHORITY (OHA), HIGHER EDUCATION COORDINATING COMMISSION (HECC)

Guidance for the Conduct of In-Person Instructional, Residential, and Research Activities at Oregon Colleges and Universities

June 12, 2020

OHA Standards

APPLICABILITY

These standards apply to public universities listed in Oregon Revised Statute (ORS) 352.002, community colleges operated under ORS chapter 341, and degree-granting private colleges and universities that operate in Oregon (referred to hereafter as “colleges and universities”).

KEY PRINCIPLES

Reducing potential exposures

The mainstays of reducing exposures to the coronavirus and other respiratory pathogens are:

1. Physical distancing – minimizing close contact (<6 feet) with other people
2. Hand hygiene – frequent washing with soap and water or using hand sanitizer
3. Cohorts – conducting all activities in small groups that remain together over time with minimal mixing of groups
4. Protective equipment – use of face coverings, barriers, etc.
5. Environmental cleaning and disinfection – especially of high-touch surfaces
6. Isolation of those who are sick and quarantine of those who have been exposed
7. With the above considerations foremost, outdoor activities are safer than indoor activities.

Each college and university will have the flexibility to determine how and when students return, but must meet, at a minimum, the public health requirements contained in this document.

College and university determinations about the resumption of on-site operations must be informed by local circumstances and regional readiness, in consultation with their Local Public Health Authority.

Colleges and universities shall provide the greatest level of choice and flexibility to equitably support student access and success in their education while minimizing risks to students and staff.

STANDARDS

General requirements

Colleges and universities shall:

- Follow Oregon Health Authority’s (OHA) General Guidance for Employers on COVID-19.

- Encourage students, staff, faculty, and other community members to follow OHA’s Public Guidance and Centers for Disease Control and Prevention (CDC) public guidance on COVID-19.
- Implement measures to limit the spread of COVID-19 within buildings and the campus setting, such as appropriate cleaning and disinfecting procedures; screening, monitoring, and testing for illness among symptomatic students, staff, and faculty; and use of face coverings, as more fully described in this document.
- Permit remote instruction/telework or make other reasonable accommodations for students and employees who are at higher risk for severe illness from COVID-19 including those with any of the following characteristics:
 - People 65 years and older
 - People with chronic lung disease (other than mild asthma)
 - People who have serious heart conditions
 - People who are immunocompromised
 - People with obesity (body mass index [BMI] of 30 or higher);
 - People with diabetes;
 - People with chronic kidney disease undergoing dialysis;
 - People with liver disease; and
 - Any other medical conditions identified by OHA, CDC or a licensed health care provider.
- Recommend the use of face coverings for all students, staff, and faculty, in accordance with local public health, OHA, and CDC guidelines.
- Require the use of face coverings in settings where six feet of physical distance between people is difficult to maintain.
- For college- or university-operated retail establishments, restaurants, transportation, recreational sports, swimming pools, childcare, camps, events or other functions that are not addressed in this standards document, follow the relevant OHA guidance for the respective sector.
- Work with their local public health authority (LPHA) to ensure they are able to effectively respond to and control outbreaks through sharing of information when appropriate.

Entry and self-screening

Colleges and universities shall:

- Allow campus spaces and buildings to be open only for official college or university business. Campus spaces and buildings should not be open to the general public. Colleges and universities may allow campus use for authorized community programs that lack alternative venues, if programs can adhere to the requirements in this or other applicable guidance.
- Encourage students, staff, and faculty to perform appropriate hand hygiene upon their arrival to campus every day: washing with soap and water for 20 seconds or using an alcohol-based hand sanitizer with 60-95% alcohol.
- Require students, staff, and faculty to conduct a self-check for COVID-19 symptoms before coming to a campus. Instruct students, faculty, and staff to stay at their residence if they have COVID-19 symptoms. COVID-19 symptoms are as follows:
 - Primary symptoms of concern: cough, fever or chills, shortness of breath, or difficulty breathing
 - Note that muscle pain, headache, sore throat, new loss of taste or smell, diarrhea, nausea, vomiting, nasal congestion, and runny nose are also symptoms often associated with COVID-19, but are non-specific. More information about COVID-19 symptoms is available from CDC [here](#).

- Emergency signs and symptoms that require immediate medical attention:
 - Trouble breathing
 - Persistent pain or pressure in the chest
 - New confusion or inability to awaken
 - Bluish lips or face
 - Other severe symptoms
- Faculty, staff, or students who have a chronic or baseline cough that has worsened or is not well-controlled with medication should stay at their place of residence. Those who have other symptoms that are chronic or baseline symptoms should not be restricted.

Isolation Measures

Colleges and universities shall take steps to ensure that if a student, staff, or faculty member develops or reports primary COVID-19 symptoms while on campus:

- The person should immediately return to their place of residence, or isolate in a designated isolation area, until they can safely return to their residence or be transported to a health care facility. Students whose place of residence is within a campus residence hall shall be isolated in a designated isolation area, with staff support and symptom monitoring by a health professional wearing appropriate personal protective equipment (PPE).
- The person should seek medical care and COVID-19 testing from their regular health care provider or through the local public health authority. They should follow instructions from their local public health authority regarding isolation.
 - If the person has a positive COVID-19 viral (PCR) test, they should remain at their place of residence for at least 10 days after illness onset and 72 hours after fever is gone, without use of fever reducing medicine, and other symptoms are improving.
 - If the person has a negative viral test (and if they have multiple tests, all tests are negative), they should remain at their place of residence until 72 hours after fever is gone, without use of fever reducing medicine, and other symptoms are improving.
 - If the person does not undergo COVID-19 testing, the person should remain at their place of residence until 72 hours after fever is gone, without use of fever reducing medicine, and other symptoms are improving.
- Any faculty, staff, or student known to have been exposed (e.g., by a household member) to COVID-19 within the preceding 14 days should stay in their place of residence and follow instructions from local public health authority.

Health-related communication

Colleges and universities shall:

- Advise faculty and staff that working while ill is not permitted.
- Ensure that faculty and staff remain current on health trainings. They should anticipate need for additional faculty and staff training related to increased precautions and updated protocols. Administrators could collaborate with health professionals to provide evidence-based education.
- Advise students, faculty, and staff not residing on campus to stay at their place of residence if they or anyone in their household have recently had an illness with COVID-19 symptoms. See “Entry and self-screening”, above.

- Advise and encourage all people on campus to wash their hands frequently. Alcohol-based hand sanitizing products may be used as an alternative to handwashing, except before eating, preparing or serving food, and after using the restroom.
- Provide ongoing training to custodial staff on cleaning protocols and COVID-19 safety requirements.
- Develop a letter or communication to faculty and staff to be shared at the start of on-campus education and at periodic intervals explaining infection control measures that are being implemented to prevent spread of disease. Alternatively, share protocols themselves.
- In partnership with local public health authorities, develop protocols for communicating with students, faculty, and staff who have come into close/sustained contact with a person with COVID-19.
- In partnership with local public health authorities, develop protocols for communicating immediately with students, faculty, staff, and the community when new case(s) of COVID-19 are diagnosed in students, faculty, or staff, including a description of how the institution is responding.
- Provide all trainings, protocols, informational letters and other communications in languages and formats accessible to their campus community.

Hand hygiene and respiratory etiquette

Colleges and universities shall:

- Use signage and other communications to remind students, faculty, and staff about the utmost importance of hand hygiene and respiratory etiquette.
 - Hand hygiene means washing with soap and water for 20 seconds or using an alcohol-based hand sanitizer with 60-95% alcohol.
 - Respiratory etiquette means covering coughs and sneezes with an elbow, or a tissue, especially when not wearing a mask. Tissues should be disposed of and hands washed or sanitized immediately.
- Provide hand hygiene stations with alcohol-based hand sanitizer in high use areas such as entrances to buildings and classrooms and other areas, as feasible. Strongly encourage students to use hand sanitizer on entry and exit to each room.

Faculty and staff

Colleges and universities shall:

- Ensure that campus health care providers have the personal protective equipment that they need to see students safely. As appropriate, provide face masks, shields, N95 masks, gloves, and protective clothing for health and other personnel who might interact with ill staff or students. Local public health can help if colleges and universities are unable to obtain PPE through usual channels.
- If feasible, arrange for fit testing for N95 masks and PPE training for health care and other personnel who might interact with ill faculty, staff or students.
- Review and revise where necessary sick-leave and absentee policies to minimize any incentives to work while ill.

General facilities

Colleges and universities shall:

- Clean and disinfect facilities frequently, generally at least daily when there is activity, to prevent transmission of the virus from surfaces. CDC provides guidance on disinfecting public spaces. See CDC's "Reopening Guidance for Cleaning and Disinfecting Public Spaces, Workplaces, Businesses, Schools, and Homes": <https://www.cdc.gov/coronavirus/2019-ncov/community/reopen-guidance.html>
- Consider modification or enhancement of building ventilation where feasible. Air circulation and filtration are important factors in reducing airborne viruses. Guidance on ventilation and filtration is provided by CDC (<https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html>) and American Society of Heating, Refrigerating, and Air-Conditioning Engineers (ASHRAE) (<https://www.ashrae.org/news/ashraejournal/guidance-for-building-operations-during-the-covid-19-pandemic>).
- Open windows where feasible to reduce recirculation of air and transmission of airborne pathogens.

Instructional Activities

For all *general* instruction offered for courses that lead to a certificate or degree, colleges and universities shall:

- Establish a minimum of 35 square feet per person when determining room capacity, calculated based only on usable classroom space. In-person classroom instruction shall not exceed 50 persons, or greater than 25 persons in counties that are at Baseline or in Phase I.
- Modify the physical layout of classrooms to permit students to maintain at least six feet of distance between one another and the instructor(s). This may include changes to traffic flow, desk or chair arrangements, or maximum capacity.
- Utilize markings and/or signage to indicate physical distancing requirements within instructional settings.
- For settings with higher risk of spread, such as laboratories, computer labs, music/performance classes, studios, and locker rooms, implement enhanced measures such as greater physical distancing, physical barriers (e.g. clear plastic), increased fresh air ventilation, moving outdoors, and enhanced cleaning measures as feasible.
- Physical barriers are acceptable instead of, or in addition to, six feet or more of spacing between people. Please see OHA [General Guidance for Employers on COVID-19](#).

For all *career and technical education* instruction offered for credit, in addition to the requirements above, colleges and universities shall:

- Where feasible, modify physical layouts of classrooms, labs, and other instructional settings to permit students to maintain at least six feet of distance between each other and the instructor(s).
- Where instruction requires instructors and students to work less than six feet from each other, require physical barriers or face coverings, and follow all applicable CDC/OHA guidelines and industry safety standards.

For all instruction and assessment in fields leading to certificates and degrees in the *health professions*, colleges and universities shall:

- For laboratory instruction or demonstration of clinical skills without physical contact:
 - Modify the physical layout of classrooms to permit students to maintain at least six feet of distance between each other and the instructor(s);
 - Ensure monitoring and enforcement of physical distancing requirements at all times; and
 - Perform enhanced cleaning before and after each session.

- For standardized patient simulations or laboratory instruction in close quarters or practicing clinical skills with physical contact:
 - Provide mandatory instruction on infection control practices and the appropriate use of personal protective equipment (PPE);
 - Require use of appropriate PPE for all personnel that come within six feet of each other; and
 - Perform enhanced cleaning before and after each session.
- For preceptorships, observerships, and direct patient care:
 - Provide mandatory instruction on infection control practices and the appropriate use of personal protective equipment (PPE);
 - Strictly adhere to the clinical facility's infection control protocols;
 - Confirm that the clinical facilities have the appropriate personal protective equipment (PPE) for their students who are involved in direct patient care within those facilities;
 - Conduct regular symptom monitoring of students;
 - Follow the facility's occupational health protocols if exposed and/or symptoms develop, including immediate exclusion from all patient care, testing for SARS-CoV-2, and mandatory reporting to university or college student health unit;
 - Perform cleaning and disinfecting per the facility's protocols.

Research Activities

Colleges and universities shall ensure the following for research activity:

- Research offices, labs, core facilities, and field locations shall be modified to ensure appropriate physical distancing, consistent with state and local public health guidelines, and with reduced capacity as/if necessary.
- Human subjects research shall be permitted only if six-foot physical distancing can be maintained or can be completed with minimal physical contact while wearing appropriate PPE and/or use of a physical barrier, and with additional limits to protect vulnerable populations.

Residential Activities

Colleges and universities that provide residential services shall:

- Take into consideration [CDC guidance for shared or congregate housing](#);
- Not allow more than two students to share a residential dorm room unless alternative housing arrangements are impossible; ensure at least 64 square feet of room space per resident;
- Reduce overall residential density to ensure that colleges/universities maintain sufficient space for the isolation of sick or potentially infected individuals, as necessary;
- Treat roommates/suitemates as family units for cohort isolation and quarantine protocols;
- Configure common spaces to maximize physical distancing;
- Provide enhanced cleaning; and
- Establish plans for the containment and isolation of on-campus cases, including consideration of PPE, food delivery, and bathroom needs.

Communicable Disease Management Plan

All colleges and universities shall have a written communicable disease management plan. The plan must include protocols to notify the local public health authority (LPHA) of any confirmed COVID-19 cases among students, faculty or staff; process and record-keeping to assist the LPHA as needed with contact tracing; a

protocol to isolate or quarantine any ill or exposed persons; plans for systematic disinfection of classrooms, offices, bathrooms and activity areas; coordinating with local public authority on contingency planning for response to a person diagnosed with COVID-19 who had been in a campus facility. Plans must adhere to OHA and CDC guidance for controlling spread of COVID-19 (see Resources).

Each college and university shall:

- Report to the local public health authority any cluster of illness (two or more people with similar illness) among staff or students.
- If anyone who has been on campus is known to have been diagnosed with COVID-19, report the case to and consult with the local public health authority (LPHA) regarding cleaning and possible classroom or campus closure. See Resources for the LPHA directory.

COVID-19 HEALTH AND SAFETY OPERATIONAL PLAN

Plan Development

Required

- Every public university and community college shall develop a written operational plan that addresses how the institution is meeting the requirements of this guidance.
- Prior to September 1, 2020, in-person activities at public universities and community colleges may resume prior to the submission and approval of their institutional operational plans, as long as they meet the requirements of this guidance.
- All colleges and universities must designate an employee or officer to implement and enforce, or supervise the implementation or enforcement, of the standards and requirements provided in this guidance and established in the institution's operational plan.

Recommended

Colleges and universities are recommended to:

- Assemble a planning team to develop an institutional operational plan;
- Consult their local public health authority (LPHA) and familiarize themselves with the disease management metrics within the health region or regions in which their institution and its campuses reside; and
- Consult with students, faculty, staff and others in the community in developing an institutional operational plan.

Public Health Review

Required

Community colleges and public universities shall submit their operational plan to their local public health authority (LPHA). Their LPHA will review the plan and support their efforts towards ongoing COVID-19 mitigation efforts.

Final Plan Submission

Required

Public universities and community colleges shall:

- Not later than September 1, 2020, each public university and community college must develop, and submit to its governing board, and the governing board must approve, the operational plan.
- Ensure that their governing board, at each regular board meeting, reviews the operational plan and any amendments thereto.
- Following the approval of their governing board, submit their operational plan to the Higher Education Coordinating Commission. The operational plan shall be resubmitted to the Higher Education Coordinating Commission upon any significant amendments.

Recommended

- Colleges and universities are encouraged to post their operational plan on their institution's website

Resources

1. Oregon local public health authority (LPHA) directory; note that “CD nurse” is the number for communicable disease issues: <https://www.oregon.gov/oha/PH/DiseasesConditions/CommunicableDisease/ReportingCommunicableDisease/Documents/reportdisease.pdf>
2. CDC guidance on the use of face coverings: <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html>
3. CDC guidance: “Reopening Guidance for Cleaning and Disinfecting Public Spaces, Workplaces, Businesses, Schools, and Homes”, <https://www.cdc.gov/coronavirus/2019-ncov/community/reopen-guidance.html>
4. CDC guidance on ventilation and filtration (<https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html>)
5. American Society of Heating, Refrigerating, and Air-Conditioning Engineers (ASHRAE) guidance on ventilation: (<https://www.ashrae.org/news/ashraejournal/guidance-for-building-operations-during-the-covid-19-pandemic>)