

# COVID-19 Prevention and Control Strategies for Institutions of Higher Education (IHE)

JUNE 4, 2020

MAHEC ECHO 2

FOCUS ON PREVENTION

# IHE ECHO Series

1. May 28 – COVID Overview
2. June 4 – Prevention Strategies on Campus
3. June 11 – Case and outbreak management

# Why Re-Opening?

“One of the best things about college is being close to others your age. There were no special memories where I was distant from others.”

*ADAM BASSI, RISING SOPHOMORE, UNIVERSITY OF MASSACHUSETTS LOWELL*

“When this quarantine started in March, my family’s housing situation was very unstable. We are still housing insecure. I can’t afford to stay home and not be working. If my school is able to host students in the fall semester I want to be there, at least to take some of the burden off my family.”

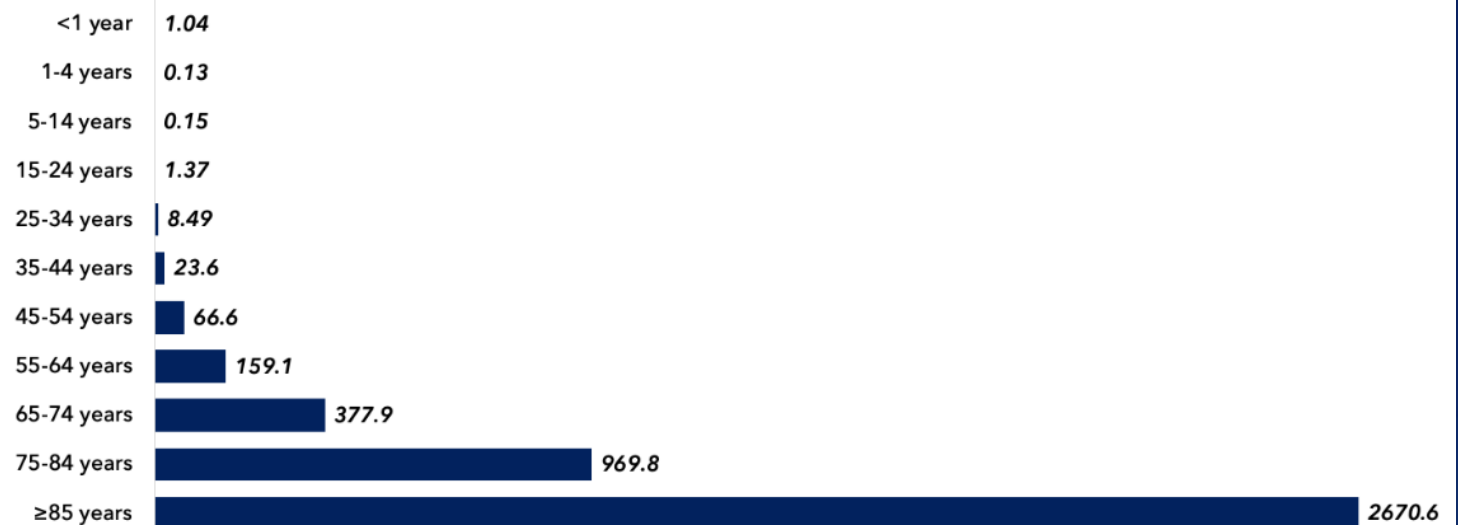
*ELLE SATTERTHWAITE, RISING SOPHOMORE, BUCKNELL UNIVERSITY*

“There is growing evidence that complete economic lockdowns cause more harm than good, and that it is possible to prudently reopen the economy today. Reopening is especially important to lower-income Americans, whose economic prospects have been most durably and significantly harmed by shelter-in-place orders.”

# People at Higher Risk

- ▶ Death from COVID-19 disproportionately affects the elderly
- ▶ People < 25 have a significantly lower risk of dying from COVID-19 vs. the flu (influenza)
- ▶ Young children (ages 1-4 years) are 27 times more likely to die of flu than of COVID-19
- ▶ People with chronic diseases at increased risk of hospitalization and death

U.S. Deaths Associated With COVID-19 Per Million People (By Age, as of May 13, 2020)



The risk of death from COVID-19 is far higher in the elderly than in younger Americans. According to data from the Centers for Disease Control and Prevention, those older than 65 are 26 times as likely to die of COVID-19 than those aged 25 to 54. Note that not all COVID-19 deaths reported elsewhere are counted by CDC, and that not all CDC-counted deaths were caused by COVID-19; some of these individuals died from other causes, but tested positive for SARS-CoV-2 antibodies. If we assume that there will be 150,000 total deaths from COVID-19 in the U.S., the odds of an individual under 25 dying from COVID-19 are around 1.5 per million, or 1 in 669,000. (Graphics: A. Roy / FREOPP)

# Prevention

- ▶ No vaccine currently available
- ▶ Various treatments under study – nothing proven yet
- ▶ **Limiting person-to-person contact is best known way to prevent spread of COVID**
- ▶ Spread is related to exposure proximity and duration
- ▶ Prevention measures limit chance of exposure through:
  - ▶ Reduced chance of transmission by physical barriers – masks and facial coverings
  - ▶ Reduced proximity to potential virus – 6 feet apart
  - ▶ Reduced duration of exposure – Limited close contact with someone with symptoms
  - ▶ Reduced direct contact transmission – washing/sanitizing hands and cleaning/disinfecting surfaces

# Prepare the physical environment

- ▶ Cleaning and disinfection
- ▶ Physical barriers
- ▶ Reduce access to high touch areas
  - ▶ Turn off water fountains (except for bottle fills) -- encourage students to use own water bottle
- ▶ Arrange environment to promote physical distancing
  - ▶ Use creative markings as reminders
- ▶ Create distance between students using shared transportation as much as possible
  - ▶ Use every other seat on a bus
  - ▶ Discourage standing face to face
- ▶ Use outdoor space when feasible

# Environmental Controls/Monitoring

- ▶ Physically distance– Spacing students 6 feet apart
- ▶ Temporally distance - Stagger times to limit student congregating
- ▶ Hygiene – hand washing, respiratory precautions
  - ▶ Access to sinks, hand sanitizer
- ▶ Tissues for coughs/sneezes
- ▶ Face coverings
- ▶ Symptom checking
- ▶ Temperature checking

# Use of Cloth Face Coverings to Help Slow the Spread of COVID-19

## Face Covering Do's and Don'ts:

### DO:



- ✓ Make sure you can breathe through it
- ✓ Wear it whenever going out in public
- ✓ Make sure it covers your nose and mouth
- ✓ Wash after using

### DON'T:

- ✗ Use if under two years old
- ✗ Use surgical masks or other PPE intended for healthcare workers



[cdc.gov/coronavirus](https://www.cdc.gov/coronavirus)

<https://www.cdc.gov/coronavirus/2019-ncov/downloads/DIY-cloth-face-covering-instructions.pdf>

<https://www.cdc.gov/coronavirus/2019-ncov/images/face-covering-checklist.jpg>



# Case #1

- ▶ Why is self-monitoring for symptoms important?
- ▶ What concerns may arise from wearing a face covering?
- ▶ How can you support students, faculty and staff in living with the “new normal?”

# Masks and Face Coverings

- ▶ Masks useful in preventing asymptomatic transmission
- ▶ Research suggests use of face masks by the general public decreases community transmission
- ▶ Community-wide benefits are greatest when face masks are used in conjunction with other practices (such as social-distancing), and when adoption is nearly universal and compliance is high



<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7186508/>

# Residential Living

- ▶ Routine symptom and temperature checking
- ▶ Single room option – For all or some? For high-risk?
- ▶ Head-to-Toe sleeping in double occupancy
- ▶ Closed circuit groups
  - ▶ No social distancing needed within group
  - ▶ Strict adherence to prevention measures outside group
  - ▶ Supervision by group member – perhaps younger faculty
  - ▶ If one group member gets COVID, all will require quarantine

# Case #2

- ▶ How could you implement regular symptom and temperature screening?
- ▶ Who is most at risk in your college community if prevention strategies are not followed?
- ▶ What are some strategies to engage students in the outcome?

# Culture on Campus

- ▶ “We’re also thinking a lot about the importance of shifting the culture. When we reopen, it’s no longer a time of unlimited freedoms. It will be a time of mutual accountability and collective responsibility for the well-being of one another.”

-- Mary Dana Hinton, President, Hollins University

- ▶ “Making the campus safe has to be about people coming together and coming through for each other.”

-- David Wall Rice, Professor of Psychology and Associate Provost at Morehouse College

“When we wear a face covering, wait six feet apart, and wash our hands often, we are showing we care for our loved ones and neighbors,”

-- Dr. Mandy Cohen, Secretary, NC DHHS

# Create a Pledge



## ★ WHAT YOU CAN DO ★

You can help create a safer, healthier environment for everyone by following a few guidelines and best practices. When you join Count On Me NC, here's what you're pledging to do:

- ✓ **Wear** a cloth face covering like a mask or scarf.
- ✓ **Wait** your turn by maintaining six feet of physical distance from others.
- ✓ **Wash** your hands often with soap and water for at least 20 seconds or use hand sanitizer.
- ✓ Use contactless delivery or takeout options if you have been recently exposed to, or have symptoms of, COVID-19.
- ✓ Be patient and kind to staff and other guests as we all try to adjust to a new normal.

# Educate and Communicate

Atul Gawande, MD

1. Sanitary hygiene (washing your hands frequently)
2. Social distancing
3. Wear masks/face coverings
4. Report symptoms promptly, including the most minor symptoms

The moral of the story is: You don't have to be perfect with social distancing, but you have to be pretty good. I think, realistically, it's hard to expect a population of 18-to-22-year-olds to be perfect.

-- Richard Levin, an economist and a former president of Yale University

We're all in this together...  
Six feet apart!

