Information on COVID-19
For Student Housing at Higher Education Institutions
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What is COVID-19 (novel coronavirus)?
Novel coronavirus (COVID-19) is a new virus strain spreading here in King County and throughout the world. Most COVID-19 illnesses are mild with fever and cough. Health experts are concerned because this new virus can cause severe illness and pneumonia in some people – especially people over age 60, people with underlying health conditions or weakened immune systems, and pregnant people.

How Does COVID-19 Spread?
COVID-19 spreads when an infected person coughs or sneezes. Respiratory droplets can land in the mouths or noses of people who are nearby or may be inhaled into their lungs. It spreads most easily when people are within 6 feet of each other.

COVID-19 also spreads when a person touches a surface or object that has the virus on it and then touches their mouth, nose, or eyes. A recent study showed that coronavirus survives for different amounts of time on different, uncleaned surfaces, ranging from a few hours to several days.

Student Housing Needs
While Higher Education Institutions (IHEs) are converting in-person classroom instruction to remote and online instruction, many students will remain in student housing locally. Students may not be able to travel back home (abroad or domestically) due to travel restrictions, may not have permanent homes to return to, or may be concerned about returning to homes where families members at high risk of severe illness may reside.

What Should Student Housing Managers and IHEs Do?
Students at High Risk
Most people infected with the novel coronavirus experience mild- to moderate-symptoms or may remain asymptomatic. Some people are at higher risk of severe illness. In addition to being over 60 years of age, other high-risk conditions exist and may be present in the student population in housing. These could include:

- Chronic lung disease or moderate to severe asthma
- Heart disease with complications
• Compromised immune system, including from undergoing cancer treatment, poorly controlled HIV or AIDS, prolonged use of corticosteroids and other immune-weakening medications, or other immune deficiencies

• Severe obesity (Body Mass Index \( \geq 40 \))

• Certain underlying medical conditions, particularly if not well controlled, such as diabetes, renal failure, or liver disease

• People who are pregnant should be monitored since they are known to be at risk with severe viral illness, however, to date, data on COVID-19 has not shown increased risk

IHEs may want to establish a health privacy-protected mechanism for students in congregate housing to self-identify if they are in a high-risk category. IHEs should consider providing students in high-risk categories alternative housing that would allow them to reduce contact with others, such as housing with a private bedroom and bathroom.

**De-densify Housing**
Consider ways to reduce the density of student housing and increase the ability of students to avoid close contact or shared spaces with one another. For example, as some students leave campus housing to return home, IHEs may be able to move students who remain on campus into housing with single bedrooms and reduce the number of people who share a common bathroom and/or kitchen.

**Recommended scenarios:**

**Best:** Each student has an individual unit with private bathroom.

**Acceptable:** 2-4 students live in apartment-style units with individual bedrooms and shared bathrooms. Consider de-densifying units of four students to fewer such as units of two.

**Dormitory-style housing:** Students share bedrooms and the bathrooms serve a large number of students. IHEs should take measures to de-densify this type of housing and find ways to limit the number of students using the same bathroom. For example, students can move into singles.

**Student Self-Monitoring and Self-Reporting for COVID-19**

• For students who remain in campus housing, establish a mechanism, such as a dedicated email address, for students to self-report if they are experiencing symptoms of COVID-19 or are awaiting or have received a COVID-19 test result. Symptoms include fever of \( 100.4^\circ \text{F} \) or above, cough (not chronic), and shortness of breath.
• Students should self-monitor for symptoms including fever; consider providing students with thermometers, if available, to measure their temperature. Students should not share thermometers unless they are no-contact forehead thermometers.

• Provide students experiencing symptoms, or with potential or confirmed cases of COVID-19, with resources to support their daily needs and their health. Refer to the section below on what to do if you have a confirmed case.

**Encourage Residents and Staff to Practice Social Distancing**

Social distancing is the most important thing we can do to fight the pandemic.

• Close, or use measures to discourage use or gathering in, non-essential common spaces such as fitness rooms or community areas. Suggested measures include prominent signage, markers indicating six-foot distances, removing chairs, and providing disinfecting wipes to use on common surfaces.

• Students should not enter another student’s building, hall, housing unit, or bedroom.

• Encourage students to use their phones and online video conferencing to stay in touch within the residential community.

• Students can take walks, runs, bike rides or engage in other outdoor activities while maintaining a six-foot distance from one another.

**Manage Visitors**

• Limit or prohibit visitors.

• Encourage residents to connect with family and friends by phone and/or online and to postpone non-essential visits.

• If possible, limit visitor access to a single point of entry in your building that staff can easily monitor.

• Post signs at entrances instructing essential visitors to refrain from entering if they are sick or if they have had close contact with a person who may or does have COVID-19. Close contact includes being within 6 feet of a confirmed case for about 10 minutes, or if someone with COVID-19 coughed on you, kissed you, shared utensils with you, or you had contact with their body secretions.

• Post signs instructing visitors to limit their movement in the building and avoid common areas.

• Screen visitors for COVID-19 symptoms.

**Health Screening for Staff**

• Screen staff in person or by phone for symptoms of the virus at the start of every day. **Anyone with a fever, cough, and/or shortness of breath and people at high risk of severe illness should not come to work.**
• Contact Public Health’s novel coronavirus call center with questions about symptoms and risk factors: 206-477-3977 (8 AM – 7 PM). The call center is available for all King County residents.

Frequent Cleaning and Disinfection
• Facility staff should clean and disinfect all surfaces in common areas frequently each day, including doorknobs, elevator buttons, light switches, railings, faucets and handles in common bathrooms, and other surfaces that many people might touch. Follow the CDC guidance on How to Clean & Disinfect.
• Ensure adequate supplies for both staff and students to support cleaning and disinfection practices and ensure disinfectants are on the EPA list for use against the novel coronavirus.
• Ensure access to EPA-approved disinfecting wipes in common areas so that commonly used surfaces (e.g., faucets, handles, laundry and dishwasher controls, keyboards, countertops) can be wiped down before each use.
• Make sure garbage cans for used tissues and paper towels are readily available.
• Post prominent signage in common bathrooms and kitchens encouraging frequent and proper cleaning and disinfecting.
• Consider ways in which commonly touched surfaces can be avoided while maintaining safety and security, such as through propping open doors to common areas, bathrooms, etc.

Work Safely in Residential Units
Limit maintenance work in units as much as feasible. Staff who need to enter a resident’s unit should follow basic hygiene principles including:

• Wash hands or use sanitizer (with at least 60% alcohol content) before entering. Wear clean gloves if possible.
• Keep at least 6 feet of distance from residents.
• Disinfect all work surfaces before leaving the unit.

Meals
• If students are responsible for preparing their own meals, they should be encouraged to keep a good supply of non-perishable food items on hand and limit trips to purchase groceries as much as possible. Students with shared kitchens should arrange for each person to have their own set of eating utensils, drinking glasses, and dishes. Each person should wash their own dishes, or place them in the dishwasher themselves.
• Meals from IHE dining facilities should be grab-n-go, take-out, or delivery, using disposable utensils, napkins, and containers.
• Regardless of where students eat, students should maintain at minimum a six-foot distance from one another.
What Should Students in IHE Housing Do?

Practice Social Distancing

- Stay at home in your residential unit and avoid all non-essential contact with others. In particular, avoid contact with people who are sick, and stay home and away from others when you are sick.
- Limit trips for groceries, gas, and other essentials.
- If it’s essential to leave your residence, always stay at least 6 feet away from others.
- Support and respect decisions about limited use or temporary closure of common areas in your building.
- Support and respect decisions about limited or no use of common areas in your building. Consider creative ways to connect with others from a distance. Use phone calls, conference calls, and online video conferencing for work, meetings, and to stay in touch with friends and family.

Practice Good Respiratory Hygiene

- Wash hands often with soap and water for at least 20 seconds. If hand washing facilities are not available, use hand sanitizer with at least 60% alcohol content.
- Avoid touching your eyes, nose, or mouth with unwashed hands
- Cover your mouth/nose with a tissue or sleeve when coughing or sneezing, then throw out the used tissue.
- Avoid sharing personal items like drinking glasses, eating utensils, and towels with other people.

Frequently Clean High-Touch Surfaces in Your Household

- Frequently disinfect and clean high touch surfaces including phones, keyboards, kitchen countertops, toilets, faucets and doorknobs. Standard cleaning products are effective against COVID-19.

Make a Plan

- Plan how you will meet your essential needs if you become sick.
- Plan how you might help others in your building if they become sick or need to quarantine. For example, you might offer to leave food and other items outside a neighbor’s door or check on them with a daily phone call.
- Keep a supply of non-perishable food, household items, cleaning supplies and medications on hand so that you can minimize your trips to the grocery store, pharmacy, and other locations.
- Take good care of yourself: Manage stress, eat healthy, exercise and get outside, get enough sleep. Connect with family and friends virtually and ask for help when you need it. All of these simple measures will help you to stay healthy.
What Should IHEs Do If a COVID-19 Case Is Identified among Residents?

Protect Health Information
The identity of a suspected or confirmed case is protected health information and may not be disclosed by staff.

Alert Public Health
IHEs should use this form to report concerns about a case, cluster, or outbreak in student housing. The Public Health- Seattle & King County COVID-19 Investigation Team will review all submitted forms and follow-up as needed.

IHEs may also contact your regional Higher Education Institutions COVID-19 Response contact at Public Health (carrie.cihak@kingcounty.gov) for assistance in interpreting this guidance.

If it is not possible for the IHE to provide housing for a student needing to isolate or quarantine in accordance with the guidance below, the student should call the King County novel coronavirus call center, 8 am – 7 pm, at 206-477-3977. Public Health will triage calls and determine whether to assign the student to a King County isolation and quarantine facility.

Contact Tracing
When feasible, IHEs should work with students confirmed with COVID-19 to trace close contacts the student may have had with others during the two weeks prior to the onset of their symptoms. The IHE should work with the student to ensure close contacts are alerted and able to self-quarantine for 14 days. In instances where there is widespread illness, it may not be possible for IHEs to assist with contact tracing in every case.

Provide Information to Impacted Students
IHEs should provide information to students to support them in caring for themselves and limiting the potential for them to spread disease to others:

- For students with confirmed or suspected cases of COVID-19
- For students who were in close contact with someone with COVID-19
- For students who are concerned they may have COVID-19 but have no known close contact

These materials have been translated into multiple languages and IHEs should make good effort to provide these materials to students in multiple languages.

Isolation & Quarantine
Although King County is rapidly preparing isolation and quarantine facilities for people who are unable to isolate themselves, it is unlikely that the supply of such facilities will meet the need. To the extent possible, IHEs should prepare for the isolation and quarantine of their students in IHE housing who are confirmed with COVID-19 or have been exposed to a confirmed case.
• IHEs should plan for places in which students in shared housing units can be isolated or quarantined. IHEs may want to consider how to utilize on- or off-campus housing that has been vacated by students returning to their permanent homes, contracts with local hotels or motels, or arrangements with other IHEs.

• IHEs should plan for providing support services to students who are isolated or quarantined, such as meal services and ways for students to be in contact about personal needs.

• Ensure any staff remaining to support students in on-campus housing receive necessary training to protect themselves and residents from spread of COVID-19. Staff should also be trained on how to respond if a resident becomes ill. Adequate cleaning and personal hygiene supplies should be made available.

**Isolation** is used for people who are currently ill, do not need to be hospitalized, and need to stay away from others to avoid infecting them.

**Recommended scenarios:**

**Best:** IHEs should plan to house students needing isolation in a specially-designated building and in individual rooms with private bathrooms. Ideally, rooms would have doors that open to the outside, with no shared corridors, and individual, self-contained HVAC systems in each room.

**Acceptable:** If it is not possible to house students needing isolation in a separate building, IHEs should designate separate floors or wings of a building away from other residents, and house students needing isolation in individual rooms with private bathrooms.

**Alternative Arrangements if Illness is Widespread:** In the case of widespread illness, with no better options available, IHEs may allow students needing isolation to be housed in shared rooms and/or with a shared bathroom, but only with other students who are also in isolation and confirmed with COVID-19. Every effort should be made to maintain distance among students who are isolated, and isolated students should not have contact with students who are not ill.

Students should remain in isolation for at least 3 days after fever has passed without use of fever-reducing medications AND symptoms have improved, AND at least 7 days after symptom onset.

**Quarantine** is for people who are not currently showing symptoms but are at increased risk of becoming ill because they have been exposed through close contact with someone with COVID-19.

• IHEs should plan to provide individual rooms with private bathrooms for students who have had close contact with someone who is confirmed with COVID-19 to self-quarantine.

• IHEs may plan for a small group of students (2-3) who are common roommates of someone who is confirmed with COVID-19 to self-quarantine together, with a bathroom shared only
among these students, as long as they can rapidly identify anyone who develops symptoms and separate them.

- IHEs must plan to meet the daily needs (e.g., food, basic supplies) of students in quarantine so that the student is able to stay away from others. Food and other supplies can be delivered to a student’s door, and the student alerted by text.

Students should remain in quarantine for 14 days after potential exposure.

**Mental Health & Emotional Support**

This is a trying time for everyone, and especially for young people who may be far from home and the support of family. Be sure that students know where they can get help if they need it, and particularly in cases where they may be thinking of harming themselves.

**Additional Resources**

While this guide provides information on how to reduce the spread of disease in most student housing circumstances, it is not possible to anticipate or provide guidance for every circumstance. Please contact your regional Higher Education Institutions COVID-19 Response contact at Public Health (carrie.cihak@kingcounty.gov) if you want to discuss how this guidance might relate to the specific circumstances in your organization.

For the latest information and guidance on coronavirus, please see:
- Public Health – Seattle & King County (PHSKC): [www.kingcounty.gov/covid](http://www.kingcounty.gov/covid)
- Washington State Department of Health: [https://www.doh.wa.gov/Emergencies/Coronavirus](https://www.doh.wa.gov/Emergencies/Coronavirus)

*This guidance is current as of March 28, 2020.*