Clarifications on Public Health Guidance

Related to the Guidance for the Conduct of In-Person Instructional, Residential, and Research Activities at Oregon Colleges and Universities, issued June 12, 2020

The Higher Education Coordinating Commission is developing responses to questions related to the new public health guidance for colleges and universities. The following questions have been addressed.

Q&A

Question: Why didn’t HECC/OHA recommend testing of all students even non-symptomatic students prior to moving into residence halls?

The following response is from Tom Jeanne, MD, deputy state epidemiologist:

*Testing people without COVID-19 symptoms is generally not useful because the sensitivity of viral testing in asymptomatic people is very low. In fact, a recent review in the Annals of Internal Medicine found that, in people who actually had the coronavirus that causes COVID-19, viral testing had a 100% false negative rate on the day after exposure, and at best a 67% false negative rate on the day prior to symptom onset. Therefore, a negative result does not meaningfully increase confidence that a person is not infected. And just as importantly, a negative result does not mean that a person has any period of protection when they are not or cannot be infected. Testing of asymptomatic people would result in many more false negatives than true positives, and we have serious concerns about the interpretation of a negative result which may provide unfounded reassurance to individuals and institutions.*

Regarding moving in to a residence hall, any student or staff member who is ill with COVID-19 symptoms should seek testing and be self-isolating if positive, according to guidance from their local public health authority. Any asymptomatic student or staff member who has had close contact with a person who had COVID-19 should be on a 14-day self-quarantine. In neither case should the student or staff member move in to a residence hall until they complete their isolation/quarantine.

Question: Why might the concern over false negatives outweigh the gains of identifying those who are infected?

The following response is from Tom Jeanne, MD, deputy state epidemiologist:

“This is a complicated issue with a lot of nuance, indeed. We currently have adequate testing capacity but certainly not enough to recommend testing of asymptomatic people in general, and particularly those who are lower risk. We need to be mindful of our testing resources, especially with cases on the rise in Oregon. Only in higher risk settings (e.g. nursing homes) are we...
recommending testing of asymptomatic residents and staff, and even then testing is primarily done when there is a known outbreak going on.

“The number of true cases identified by screening asymptomatic people who haven’t had known contact with a person with COVID-19 is expected to be very low, and in fact there may be some false positives as well, even with a very specific test like PCR tends to be. So considering all the factors, we don’t recommend asymptomatic testing for screening, including for return to work or school.

“Our current guidance rests on our understanding of the literature on testing asymptomatic people and what the results show. It’s not proven to be a reliable indicator of not being infected. As such, we’d rather focus on actions the higher education community can take to keep students, staff, and the community safe while the virus continues to circulate. The proven methods are physical distancing, hand hygiene, face coverings, disinfecting, and isolating/quarantining cases and their contacts. Of course as the situation changes, we’ll keep our guidance updated.”

**Question: EO 20-28 states that “Each college and university must designate an employee or officer to implement, and enforce, or supervise the implementation or enforcement, of the requirements...” What sort of position should that be?**

It is up to each higher education institution to determine which employee or officer is best positioned to implement, enforce, or supervise the implementation or enforcement of the requirements in EO 20-28.

**UPDATED 7-9-20 Question: Are we required to monitor that students and staff have performed self-checks? If so, how should those self-checks be monitored?**

Self-checks are a required component of the HECC-OHA guidelines for colleges and universities. The guidance does not explicitly require the institution to establish a centralized monitoring system for the required daily self-checks or address how they should do so if they establish this. These are institutional decisions. That said, institutions should be prepared to explain the steps they have taken to ensure compliance with this requirement. Institutions should develop a robust approach to ensuring a high participation rate, even if it doesn’t involve real-time monitoring. HECC encourages institutions to consult with other colleges/universities about the approaches they’re taking to this.

**Question: What are the discretionary guidelines for testing for illness? What kind of illness - COVID specific?**

Testing should be considered as one component of a broader strategy to limit the spread of COVID-19. This guidance is specific to symptoms associated COVID-19.

**Question: Who is the health professional being referred to in the “Isolation Measures” section?**

Which health professional provides symptom monitoring for students in residence halls is up to each institution.

**Question: Can we remove the for credit language and certificate and degree information? Community colleges do all types of workforce type instruction w/o degrees.**

Non-credit instructional activities that operate in a similar way to credit activities should follow the standards in the guidance document.
Question: In the section “Communicable Disease Management Plan”, what is considered a cluster of illness? Just COVID symptoms or standard cold/flu like symptoms?

These standards apply to symptoms associated with COVID-19.

NEW 7-9-20 Question: The guidance for instructional activities includes the requirement to “Modify the physical layout of classrooms to permit students to maintain at least six feet of distance between one another and the instructor(s).” Does that include entering and exiting the room?

The requirement for six-foot distancing within classrooms does not speak directly to entering or exiting. However, HECC strongly encourages institutions to develop classroom entry/exit protocols that minimize hallway or stairway clustering, and maintain six-foot distancing.

NEW 7-9-20 Question: Are students arriving in the US from abroad strictly required to follow the CDC’s recommended 14-day self-isolation period for international arrivals, or can other mitigation measures substitute for at least a portion of that time period?

After discussions that included the HECC, OHA senior health advisors, and State Health Officer Dean Sidelinger, OHA concluded the following:

“Covid-19 has disrupted educational systems nationally and the world over. Certain behaviors may increase the likelihood of disease transmission. Long haul flights (including domestic), in and of themselves, pose a moderate risk of transmission. Of greater concern, and subsequently higher risk, is the increased exposure during transit at airports. We strongly encourage colleges and universities to instruct their students to practice COVID-19 protective behaviors as they return to campus. Some of these include good hand hygiene, physical distancing, and wearing face covering, ensuring that students have a robust process for self-monitoring/reporting COVID-19 symptoms. They should limit their exposure to others during their 14 days after travel. If these mitigating factors can be implemented, a 14 day quarantine for international students would not be recommended.”

UPDATED 12-10-20. Question: Are higher education institutions subject to the State’s current restrictions on gatherings and indoor social get-togethers?

Yes, the cumulative effect of OHA’s current sector-specific requirements is that most if not all college/university activities are subject to group gathering size limitations, and these limitations vary based on the County Risk Level for the county in which the activity takes place.

Executive Order 20-28 combined with the OHA/HECC standards require that all higher education activities not involving research or instruction related to a certificate/degree must adhere to any requirements that apply to their corresponding business sector. Many activities that occur at higher education institutions (i.e. retail, dining, fitness/recreation, museums, etc.) are subject to sector-specific restrictions described under the Governor’s orders.

The current social gatherings restrictions are applicable to all members of the college/university community, whether they live on or off-campus.

In addition, updated guidance on class size for instructional activities is described effective in the OHA/HECC Standards, and became effective December 2, 2020. In-person, indoor classroom instruction shall not exceed 50 persons, or greater than 25 persons in counties that are at Extreme Risk. Outdoor classroom instruction shall not exceed 50 persons in counties that are at Extreme
Risk, 75 in counties that are at High Risk, 15 in counties that are at Moderate Risk, and 300 in counties that are at Lower Risk.

**UPDATED 12-10-20** We have moved some activities to outdoor tents. For OHA purposes, does that make it an “indoor” or “outdoor” event?

OHA has defined “Outdoor” to mean any open-air space including any space which may have a temporary or fixed cover (e.g., awning or roof) and at least seventy-five percent of the square footage of its sides open for airflow. Outside events remain subject to physical distancing requirements.

**NEW 7-28-20** Does the HECC/OHA guidance under “Entry and Self-screening” limiting the use of college/university spaces and buildings by the general public apply to all external parties?

The HECC/OHA guidance includes the requirement that 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.” This public health requirement is designed to maximize the ability of institutions to restrict public access to their facilities and is especially significant for the state’s public community colleges and universities. However, these provisions are not intended to prohibit colleges/universities from allowing authorized external parties from accessing their campus, as long as those parties can adhere to requirements in the HECC/OHA or other applicable health guidance.

**NEW 10-15-20** If a college/university has a multi-use facility, what set of public health requirements is that facility subject to?

Higher education multi-function facilities should follow the applicable sector-specific guidance for each type of service within the facility. As an example, a facility that has separate spaces for instruction and retail business in the same structure would be subject to the HECC/OHA classroom-related guidance for the instructional space and would be subject to State of Oregon retail guidance for the retail space.

**NEW 3-12-21** How should a college/university determine occupancy limits for cafeterias and dining halls?

Under Executive Order 20-28, college/university food services are subject to OHA guidance for Eating and Drinking Establishments. Capacity limits are described within the Sector Risk Level Guidance Chart and depend on the county risk level. Customers who are ordering and/or picking up food do not count towards the capacity limit, as long as they do not dine in the cafeteria/hall and follow all applicable distancing, face covering, and other requirements.