New Jersey Department of Health
COVID-19 Information for Colleges and Universities

April 28, 2020

Pursuant to Executive Order No. 104, issued by Governor Murphy on March 16, 2020, institutions of higher education shall cease in-person instruction beginning on Wednesday, March 18, 2020 and shall cease such in-person instruction as long as Executive Order No. 104 remains in effect.

Many university students, faculty and staff in New Jersey are concerned about the current outbreak of the 2019 Novel Coronavirus (COVID-19) and potential impact to their business communities and wish to take appropriate steps to mitigate any risks. The Centers for Disease Control and Prevention (CDC) is working hard to learn as much as possible about this COVID-19 so that we can better understand how it spreads and characterize its associated illness. The New Jersey Department of Health (NJDOH) continues to develop guidance and educational materials as this rapidly evolving situation continues to unfold.

Imported cases of COVID-19 in travelers have been detected in the United States, and cases of COVID-19 with no link to travel have now been documented. More cases are likely to be identified in the coming days in both New Jersey and the United States. On March 11, 2020, the World Health Organization (WHO) publicly designated COVID-19 as a pandemic. Widespread transmission of COVID-19 in the United States could translate into large numbers of people needing medical care at the same time, overwhelming hospital infrastructure and health care providers. Public health and healthcare systems may become overloaded with elevated rates of hospitalizations and deaths. Schools, childcare centers, workplaces and other places for mass gatherings may experience increased absenteeism. Other critical infrastructure, such as law enforcement, emergency medical services, and transportation industry may also be affected.

Due to its novel nature, there is no vaccine to protect against COVID-19 and no medications approved to treat the virus. As a result, efforts to control transmission and mitigate risk are critically important. The most important response strategy is the use of personal protective measures, including good hygiene habits and use of nonpharmaceutical interventions (NPIs). NPIs are strategies that can be used when other measures like treatment or vaccines are not available to combat an emerging illness.

What is the difference between seasonal and novel coronavirus?

Coronaviruses are a family of viruses and there are different types of coronavirus within that family, much like there are different types of influenza viruses. Coronaviruses in general are not new; they are quite common and are a frequent cause of respiratory illnesses such as the common cold. Coronaviruses tend to circulate in the fall and winter months, similar to influenza. Most people get infected with these viruses at some point in their lives.

The type of coronavirus that has recently emerged in Wuhan, China is a new type of coronavirus and is infecting people for the first time (which means that people do not have any immunity to it). This newly discovered virus is called SARS-CoV-2 and is causing a disease named COVID-19.
What are common symptoms of COVID-19?

Reported illnesses have ranged from mild symptoms to severe illness and death for confirmed COVID-19 cases. Symptoms may appear 2-14 days after exposure to the virus.

People with these symptoms or combinations of symptoms may have COVID-19:

• Cough
• Shortness of breath or difficulty breathing

Or at least two of these symptoms:

• Fever
• Chills
• Repeated shaking with chills
• Muscle pain
• Headache
• Sore throat
• New loss of taste or smell

How is 2019-nCoV spread?

The virus that causes COVID-19 is spreading very easily and sustainably between people. Information from the ongoing COVID-19 pandemic suggest that this virus is spreading more efficiently than influenza, but not as efficiently as measles, which is highly contagious. COVID-19 is thought to spread mainly through close contact (within about 6 feet for a prolonged period) from person-to-person in respiratory droplets from someone who is infected.

People who are infected often have symptoms of illness. Some people without symptoms may be able to spread virus. A significant portion of individuals with coronavirus lack symptoms (“asymptomatic”) and that even those who eventually develop symptoms (“pre-symptomatic”) can transmit the virus to others before showing symptoms. This means that the virus can spread between people interacting in close proximity—for example, speaking, coughing, or sneezing—even if those people are not exhibiting symptoms. It may be possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or possibly their eyes. This is not thought to be the main way the virus spreads, but there is still more to be learned about this virus.

What measures can be taken to prevent COVID-19?

There is currently no vaccine to prevent COVID-19 infection. The best way to prevent infection is to avoid being exposed to this virus. As a reminder, CDC always recommends everyday preventive actions to help prevent the spread of respiratory viruses, including frequent handwashing for at least 20 seconds with soap and water or if unavailable, using hand sanitizer with at least 60% alcohol. Covering coughs and sneezes, cleaning frequently touched surfaces, and staying home while sick are other key measures to take to prevent COVID-19.
CDC recommends wearing cloth face coverings in public settings where other social distancing measures are difficult to maintain (e.g., grocery stores and pharmacies) especially in areas of significant community-based transmission.

- Cloth face coverings should not be placed on young children under age 2, anyone who has trouble breathing, or is unconscious, incapacitated or otherwise unable to remove the mask without assistance.
- The cloth face cover is meant to protect other people in case you are infected.
- Do NOT use a facemask meant for a healthcare worker.
- Continue to keep about 6 feet between yourself and others. The cloth face cover is not a substitute for social distancing.

**How is COVID-19 treated?**

Currently, there is no specific antiviral treatment recommended for the coronavirus. There is no vaccine to prevent this virus, and the CDC advises that the best way to prevent infection is to avoid being exposed to this virus.

**Who is most at risk for COVID-19?**

Children have **not** been shown to be a high-risk group for serious illness from COVID-19.

People at higher risk include people:
- Over 60 years of age
- Who live in a nursing home or long-term care facility
- Of all ages with
  - underlying health conditions including include heart disease, lung disease, or diabetes
  - weakened immune systems
  - severe obesity (body mass index of 40 or higher)
  - diabetes
  - chronic kidney disease undergoing dialysis
  - liver disease
- Who are pregnant

Caregivers of children with underlying health conditions should consult with healthcare providers about whether their children should stay home. Anyone who has questions about whether their condition puts them at risk for novel coronavirus should consult with their healthcare providers.

Public Health recommends that people at higher risk of severe illness should stay home and away from large groups of people as much as possible, including public places with lots of people and large gatherings where there will be close contact with others. This includes concert venues, conventions, sporting events, and crowded social gatherings.
How should institutes of higher education (IHE) prepare for the potential of a coronavirus outbreak in their community when there is no community spread?

With the potential for more community transmission of COVID-19, the most important thing for schools to do now is plan and prepare. Interim Guidance for Administrators of US Institutions of Higher Education to Plan, Prepare, and Respond to Coronavirus Disease 2019 (COVID-19) can be found at https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-ihe-response.html

- Review and update or develop your outbreak response/pandemic plan and share with stakeholders before an outbreak occurs.
- Prepare for the potential of school closures or dismissals or cancellation of school events.
- Monitor and plan for absenteeism.
- Prepare to offer distance learning to students.
- Ensure health services prepare for COVID-19.
- Establish procedures to ensure students, staff, and faculty who become sick (with any illness) on campus or arrive on campus sick are sent to their place of residence as soon as possible.
- Implement flexible attendance and sick leave policies.
- Establish relationships with local public health officials and identify points of contact.
- Create emergency communication plan and maintain up to date contact information for everyone in your communication chain.
- Establish leadership team, identify essential staff functions, assign tasks and responsibilities.
- Plan workshops and trainings to educate staff on prevention measures.
- Continue to monitor current information from health officials.

What preventive measures should be taken to help reduce the spread of respiratory viruses including COVID-19 and the flu?

NJDOH recommends that schools increase education on respiratory hygiene. Students, faculty and staff should all be asked to follow these steps that prevent the transmission of respiratory infections:

- Cover your coughs and sneezes with a tissue or into your sleeve, not your hands.
- Avoid touching your eyes, nose and mouth.
- Wash hands often for at least 20 seconds, especially after coughing or sneezing. Use alcohol-based hand sanitizer if soap and water are not available.
- Stay home from class and work if you’re sick.
- Avoid people who are sick.
- Clean and disinfect frequently touched surfaces and objects.

Additional preventive measures include:

- Adhere to exclusion recommendations from public health. For acute respiratory illness - fever free for 24 hours without fever reducing medication.
- Separate sick students and staff from others until they can go home.
- Provide adequate supplies, including clean and functional handwashing stations, soap, paper towels, and alcohol-based hand sanitizer.
• Encourage routine surface cleaning through education, policy, and the provision of supplies.
• Get a flu shot – it’s not too late to be protected!

Cleaning Procedures

Schools should follow standard procedures for routine cleaning and disinfecting with an EPA-registered product for use against SARS-CoV-2 [https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2]. Typically, this means daily sanitizing surfaces and objects that are touched often, such as desks, countertops, doorknobs, computer keyboards, hands-on learning items, faucet handles, phones and toys. Information on cleaning and disinfecting your facility can be found at [https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html]. Increasing the frequency of cleaning when we are seeing an increase in respiratory or other seasonal illness is always a recommended prevention and control measure.

What should an IHE do when a student/staff presents with symptoms of COVID-19?

• COVID-19 presents with signs and symptoms that may be indistinguishable from much more common respiratory viruses. If a community (or more specifically, a school) has cases of COVID-19, local health officials will help identify those individuals and will follow up on next steps.
• Students with fever, cough, or difficulty breathing should be placed away from others and asked to wear a facemask until they can be sent home. If a mask is not tolerated by the student, health office staff should use proper personal protective equipment.
• Staff members should be sent home and advised to seek medical advice.
• We do not recommend that students be required to obtain a doctor’s note in order to be excused from class – this may dissuade those who are ill from staying out of class and crowd doctors’ offices with patients who do not need to be seen.
• Notify your local health department with any questions or concern about an ill student [www.localhealth.nj.gov].

Will IHE be asked to close if there is a COVID-19 outbreak in the community and why?

• The decision to close a school rests with the body having control or direction over the school. School leaders should consult with their local health departments to determine if school closure is warranted due to COVID-19. If local health officials report that there are cases of COVID-19 in the community, the first step for IHE is to talk with health officials.
• Determine if, when, and for how long the IHE may need to suspend classes and postpone or cancel events and activities.
  o Temporarily suspending classes is a strategy to stop or slow the further spread of COVID-19 in communities. When classes are suspended, IHE may stay open for staff or faculty (unless ill) while students temporarily stop attending in-person classes.

Detailed guidance for IHE with COVID-19 in their community is outlined in the following document: [https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-ihe-response.html].
Do IHE events need to be canceled?

- The decision to cancel school events rests with the body having control or direction over the school.
- Based on local circumstances, it may be in the best interest of public health to modify, postpone, or cancel mass gatherings.
- Reducing the frequency of large gatherings and limiting the number of attendees per gathering can serve as mitigation strategies.
- Generally, if classes are suspended, IHE should consider cancelling events such as club meetings, performances, social events and sporting events.

If we have a student/staff who has been ill at school and is now being evaluated for COVID-19 with test results pending, what should we tell our school community?

In general, continue to follow your usual procedures for notification of students or faculty who are ill at school. Public health will follow up with schools who need more specific guidance.

If COVID-19 test results are negative, when can a student/staff return to work or school?

An individual with a negative result should remain home from work or school and avoid contact with others until 72 hours after their fever has resolved (without fever reducing medication) and respiratory symptoms (such as cough and shortness of breath) have significantly improved.

What if a student/staff has been in close contact with someone who has COVID-19?

Individuals have been in close contact with someone who has COVID-19 if:

- They live with or care for someone with COVID-19.
- They have been within 6 feet of someone with COVID-19 for more than 10 minutes.
- They have been in direct contact with secretions from someone with COVID-19 (being coughed on, kissing, sharing utensils, etc.).

If an individual has not been in close contact with a person with COVID-19, you are considered to be low-risk for infection. You can continue to go to work and school but should monitor your health for 14 days.

Students/Staff who are close contacts of someone with confirmed COVID-19 and do not have symptoms should:

- Not go to work or school and avoid public places except to get medical care for 14 days.
- Monitor their health for fever, cough and shortness of breath for 14 days after exposure.
- Contact their healthcare provider to let them know they have been exposed if they are pregnant, have medical conditions, or are 60+ years old.

Students/Staff that have been exposed to someone with confirmed COVID-19 and have symptoms should:

- Not go to work or school and avoid public places except to get medical care.
• Wear a facemask when around other people or pets.
• Separate themselves from people and pets in the home and avoid sharing household items.
• Practice good hygiene habits: cover coughs and sneezes, wash hands often, clean all “high-touch” surfaces daily.
• Monitor symptoms and seek prompt medical attention if illness worsens. Call ahead before visiting your healthcare provider.

How long should students/staff diagnosed with COVID-19 be excluded from school/work?

After an individual is diagnosed, they will be asked to isolate themselves at home until 7 days after they first developed symptoms AND 72 hours (3 days) after their fever has ended without the use of fever-reducing medications and symptoms have significantly improved (whichever period is longer).

If there is a student or staff member who recently returned from a country with widespread sustained (ongoing) transmission of COVID-19, should they be excluded from work or school?

• CDC has issued travel advisories for several countries https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html. Travelers from countries with widespread transmission of COVID-19 will experience restrictions on their movement.
• Travelers returning from countries with level 3 travel advisories will undergo various levels of quarantine and monitoring to ensure they have not contracted the virus and do not pose a public health risk.
• Travelers will be asked to self-quarantine and self-monitor as directed by public health recommendations and to seek care if ill.
• IHE should be prepared to offer alternate instruction while student is quarantined.

When can a student or staff member return to school/work after being quarantined or self-isolated?

Travelers who have been quarantined for 14 days and have remained asymptomatic may return to school unless they meet other criteria for school exclusion (see link to exclusion list below).

Is a physician letter required for the student to return to school after their monitoring period is complete?

Returning travelers under monitoring are not being monitored by their healthcare provider. If a letter is requested, the monitoring agreement the individual or guardian signs would serve as proof that the monitoring period is complete.

Should study abroad programs be cancelled?

Universities should postpone or cancel study abroad programs that could expose students and staff to potential community spread of COVID-19 and assist students in their return home. Students returning from travel to areas with community spread of COVID-19 must follow guidance they have received from health officials as indicated above. COVID-19 information for travel is updated regularly on the CDC https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html.

Students are going for spring break; can they still go?
Prior to traveling, individuals should consider the potential risks that may be involved in visiting their destination, including risk of transmission as well as the risk of quarantine upon returning. Destinations experiencing sustained community transmission should be avoided. Any person or group planning a trip outside of the United States should consult the CDC website for current travel advisories regarding any restrictions on travel. The situation is evolving. Stay up to date with CDC’s travel health notices related to this outbreak at https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html. These notices will be updated as more information becomes available.

Outbreaks involving novel viruses evolve quickly and recommendations from public health officials may change frequently as new information becomes available. These recommendations are based on the information we have at this time. Please check the following websites often for updated information.

- Centers for Disease Control and Prevention Centers for Disease Control and Prevention:
  - Coronavirus Disease 2019 (COVID-19)
  - Implementation of Mitigation Strategies for Communities with Local COVID-19 Transmission
  - Get Your School Ready for Pandemic Flu
  - Home Isolation Guide
  - CDC Community Guidance IHE Response
  - EPA-List N

- New Jersey Department of Health:
  - Novel Coronavirus COVID-19
  - School Health https://www.nj.gov/health/cd/topics/schoolhealth.shtml
  - School Exclusion List
  - Local Health Department Directory www.localhealth.nj.gov

- Office of the Secretary of Higher Education
  - https://www.state.nj.us/highereducation/index.shtml

- Readiness and Emergency Management for Schools (REMS) Technical Assistance (TA) Center
  - Readiness and Emergency Management for Schools

- World Health Organization
  - Rolling updates on coronavirus disease COVID-19