



Interim Guidance for Institutions of Higher Education

(UPDATED: August 16, 2021)

Institutions of Higher Education (IHE), such as Colleges, Community Colleges, and Universities, should follow the guidelines below, adapted from the Centers for Disease Control and Prevention's (CDC's) [Considerations for Institutions of Higher Education](#), to prevent the spread of COVID-19.

Guidelines for Institutions of Higher Education: Any scenario in which many people gather together poses a risk for COVID-19 transmission. All institutions of higher education where groups of people gather in an enclosed space should create and implement a plan to minimize the opportunity for COVID-19 transmission on their campuses. The guidance below will help institutions of higher education, including colleges, universities, and community colleges, reduce the spread of COVID-19 in their communities. The updated guidance below reflects lessons learned that viral spread has originated in communal living settings on and off campus, social gatherings on and off campus and with athletic teams.

This guidance covers the following topics:

- Vaccination
- Cloth Face Coverings
- Social Distancing and Minimizing Exposure
- Group Gatherings and Activities
- Shared or Congregate Housing
- Off Campus Housing and Gatherings
- Classrooms and Learning Environments
- Dining Services and Shared Restrooms
- Handling Possible, Suspected, Presumptive, or Confirmed Cases of COVID-19
- Surveillance and Screening Testing
- Cleaning and Hygiene
- Water and Ventilation Systems
- Communications and Combatting Misinformation
- Additional Resources

Vaccination

Vaccination is the leading prevention strategy to protect individuals from COVID-19. Vaccines are safe and effective, widely accessible, and given at no cost to people living in the United States. Institutions of Higher Education can play a critical role in promoting and offering vaccination to help slow the spread of COVID-19. IHE's can increase the proportion of vaccinated students, faculty, and staff by providing

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information about the COVID-19 vaccine, developing vaccine trust, and establishing policies that make vaccination as easy and convenient as possible. To promote and increase access to vaccines IHE's can:

- Require COVID-19 vaccination for students, faculty and staff who will be physically present on campus.
- Partner with vaccine providers (e.g., hospitals, local health departments, pharmacies) to provide on-campus vaccination.
- Host mass vaccination clinics in large venues such as stadiums and auditoriums
- Provide vaccination through student health services.
- Incentivize vaccination by providing scholarships or compensation to individuals that receive a vaccination through the institution.
- Promote vaccination through university organized lottery drawings in which faculty, students, and staff are automatically entered to win prizes once vaccinated.
- Provide transportation for employees, students, and staff to vaccination sites.
- Offer multiple vaccination locations and hours of operation to accommodate various work and academic schedules.
- Offer flexible excused absence options for students and staff receiving a vaccination if they are experiencing side effects.
- Enable student organizations and trusted public figures to promote vaccination in their communities and on their social media platforms using messaging consistent with information on CDC and NC DHHS websites.
- Develop educational messaging and signage for on-campus vaccination events.
- When vaccinated, have students, faculty, and staff report their vaccination status to the institution.

NCDHHS strongly recommends all IHEs direct students, faculty and staff to information [Find Your Spot, Take Your Shot](#) and encourage them to get vaccinated. For guidance on vaccinations, please refer to our [Interim Guidance for Individuals Who Have Been Vaccinated Against COVID-19](#) and [Recommendations for Protecting Each Other](#).

It is strongly recommended that ALL institutions of higher education:

- Require staff, faculty and students to report vaccination status.
- Require staff, faculty and students who are not fully vaccinated, or do not disclose vaccine status, to participate in screening/testing programs.

Cloth Face Coverings

Wearing a [face covering](#) can help reduce the spread of COVID-19, especially because people may be infected with the virus and not know it.

It is strongly recommended that ALL institutions of higher education:

- Have all students, faculty and staff, regardless of vaccination status, wear a cloth face covering when they are in a public indoor setting in [areas of high or substantial levels of transmission](#) as defined by the CDC.
- Require all students, faculty and staff who are not fully vaccinated wear a cloth face covering when they are in a public indoor setting, unless the individual states that an exception applies.

It is recommended that ALL institutions of higher education:

- Provide cloth face coverings for students, faculty and staff and ask them to properly launder using hot water and dried on highest temperature setting between uses.
- Visit the NC DHHS [COVID-19 response site](#) for more information about face coverings and access sign templates that are available in English and Spanish.
- Post signage saying everyone should wear a face covering if they are in [county of high or substantial levels of transmission](#) as defined by the [CDC](#). English: [Option 1](#) | [Option 2](#), Spanish: [Option 1](#) | [Option 2](#)

Social Distancing and Minimizing Exposure

[Social distancing](#) is a tool we currently have to decrease the spread of COVID-19. Social distancing (“physical distancing”) means keeping space between yourself and other people outside of your home. If you are not fully vaccinated, stay at least 6 feet (about 2 arms’ length) from other people; do not gather in groups; stay out of crowded places and avoid mass gatherings.

IHEs where all students, faculty, and staff are **fully** vaccinated prior to the start of the semester can return to full capacity in-person learning, without requiring physical distancing for people who are fully vaccinated in accordance with [CDC’s Interim Public Health Recommendations for Fully Vaccinated People](#).

It is recommended that institutions of higher education that do NOT require vaccination for all students, faculty and staff who will be physically present on campus:

- Minimize opportunities for close contact when occupying shared space by ensuring sufficient social distancing with at least 6 feet between people who are not fully vaccinated or for whom vaccination status is not known (e.g., adequate space exists in hallways or communal areas, classrooms are large enough or class sizes are small enough, students and staff are in large outdoor spaces).
- Provide [signage](#) and frequent reminders for students, faculty and staff who are not fully vaccinated to stay at least 6 feet apart from one another when feasible.
- Provide physical guides, such as tape on floors or sidewalks and signs on walls to ensure that individuals who are not fully vaccinated remain at least 6 feet apart in lines, while using elevators and stairways and at other times.
- Provide signage that designates specific doors for entrance and exits when feasible.
- Space seating/desks at least 6 feet apart when feasible. For lecture halls, consider taping off seats and rows to ensure six-foot distance between seats.
- Provide 6 feet distance between individuals who are not fully vaccinated engaged in experiential learning opportunities (e.g., labs, vocational skill building activities) and on transportation vehicles (e.g., skipping rows) when possible.
- Take steps to increase airflow and [ventilation](#) – e.g., open windows when possible.
- Offer distance learning in addition to in-person classes to help reduce the number of in-person attendees. Prepare, train, and support faculty to convert their in-person classes to remote.
- Close shared and communal spaces such as dining halls, game rooms, exercise rooms and lounges if possible; otherwise, stagger use and restrict the number of people who are not fully vaccinated allowed in at one time to ensure everyone can stay at least 6 feet apart.
- Provide student support services virtually, as feasible.
- Follow CDC’s guidance for [Shared or Congregate Housing](#) for communal spaces in student or faculty housing (e.g., laundry rooms, shared bathrooms and recreation areas).

Group Gatherings and Activities

Gatherings and activities, including clubs, fraternity/sorority events, and athletics are a routine part of student, staff, and faculty life at institutions of higher education. Gatherings of groups pose a risk for COVID-19 transmission and measures should be considered to limit the risk of transmission.

All students, faculty and staff, regardless of vaccination status, should wear a cloth face covering when participating in a gathering in an indoor setting in [areas of high or substantial levels of transmission](#) as defined by the CDC.

It is recommended that ALL institutions of higher education:

- Include student leadership and student groups in COVID-19 planning and implementation to increase awareness of mitigation measures and the extent of COVID-19 messaging among student groups.
- Follow the recommendations outlined in [Interim Guidance for Administrators and Participants of Youth, College & Amateur Sports Programs](#).
- Consider canceling or postponing large gatherings that involve indoor settings in [areas of high or substantial levels of transmission](#) as defined by the CDC. If this is not possible, take steps to limit the risk of transmission such as limiting attendance to promote social distancing of at least 6 feet between people, taking steps to increase airflow and [ventilation](#), or moving gatherings outdoors if feasible.

It is recommended that institutions of higher education that do NOT require vaccination for all students, faculty and staff who will be physically present on campus:

- Promote social distancing of at least 6 feet between people at all social events, gatherings, and meetings.
- Establish written requirements and accountability for students participating in Fraternity and Sororities, Social Clubs, Societies, Affinity Group Housing, and other organized groups to limit social events, gatherings and meetings on and off campus and promote the use of face coverings and social distance of at least 6 feet between people who are not fully vaccinated
- Pursue virtual group events, gatherings, or meetings, if possible.

Shared or Congregate Housing

It is recommended that institutions of higher education that do NOT require vaccination for all students, faculty and staff who will be physically present on campus:

- Reduce density in congregate living settings by limiting on-campus housing for people who are not fully vaccinated
- Develop a plan for move in to maximize physical distancing and decrease congregating in common spaces. Stagger move-in times to allow for more free space in common areas. Consider using online dorm check-in methods or other advanced procedures to avoid long lines during move in.
- Close or limit shared and communal spaces such as game rooms and lounges if possible; otherwise, stagger use and restrict the number of people allowed in at one time to ensure everyone can stay at least 6 feet apart.

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- Encourage windows and doors to remain open when possible to allow for increased air flow and take other steps to increase [ventilation](#).
- Do not share dishes, drinking glasses, cups, or eating utensils.
- Make sure bathrooms are continuously stocked with soap and paper towels or automated hand dryers. Hand sanitizer could also be made available.
- Provide information on how to wash hands properly. Hang signs in bathrooms.
- Establish cohorts of people that are not fully vaccinated within communal living spaces.

Off Campus Housing and Gatherings

In addition to their on-campus activities, all institutions of higher education should develop detailed strategies, enforcement options in coordination with local law enforcement and campus police, and communication plans to address students living and spending time in off campus settings. These settings include off campus housing whether apartments, houses, or sorority/fraternity houses.

It is recommended that ALL institutions of higher education:

- Have shared housing settings follow [Shared or Congregate Housing Considerations](#).
- Ensure that events, parties, and gatherings follow recommendations for group gatherings and activities.
- Have social clubs pledge support to institutions' COVID-19 policies, rules, and control measures.

Classrooms, Laboratories and Learning Environments

It is recommended that institutions of higher education that do NOT require vaccination for all students, faculty and staff who will be physically present on campus:

- Implement remote or other learning options for students as needed to accommodate dormitory density reductions.
- Space seating/desks at least 6 feet apart when feasible. For lecture halls, consider taping off seats and rows to ensure six-foot distance between seats.
- Provide 6 feet distance between individuals who are not fully vaccinated engaged in experiential learning opportunities (e.g., labs, vocational skill building activities) and on transportation vehicles (e.g., skipping rows) when possible.
- Take steps to increase airflow and [ventilation](#) – e.g., open windows when possible.
- Limit classroom activities that require groups or partners who are not fully vaccinated, such as labs or other group projects where students will gather and work closely for long periods. If necessary to have such activities, consider cohorting and requiring the same partners or groups to reduce close exposure to multiple people.
- Consider holding individual office hours or virtual study groups instead of group office hours held in small offices. When students must meet in-person with faculty or other advisers who are not fully vaccinated, utilize 6 feet separation.
- Consider staggering class times to minimize crowding in hallways or areas entering and exiting classroom when feasible.
- Consider requiring regular or assigned seating assignments to minimize exposure and assist with contact tracing in the event of a positive case.
- Provide clear instruction on how to use cleaning and disinfecting chemicals in laboratory areas. Ensure there is not mixing of cleaning and disinfecting chemicals with other laboratory supplies or other chemicals to avoid dangerous chemical reaction.

- Develop specialized plans for classes that require close contact and physical distancing between people who are not fully vaccinated is not possible.

Dining Services and Shared Restrooms

It is recommended that ALL institutions of higher education:

- Increase outdoor options for dining seating when feasible.
- Set up handwashing stations when feasible at the entrance of dining areas. When handwashing stations are not available, ensure hand sanitizer with at least 60% alcohol is available at all entrances.
- Stagger use of dining areas.
- Consider posting occupancy limits for large shared restroom facilities.
- Provide additional paper towels or other methods to assist with entering and exiting multi-stall restrooms without touching door handles when possible.
- Provide visual cues or floor markings to increase physical distancing in food service lines, including self-service, buffet, and condiment service areas.

Handling Possible, Suspected, Presumptive, or Confirmed Cases of COVID-19

Students, faculty and staff should be encouraged to self-monitor for symptoms such as fever, cough, or shortness of breath and be aware that a person can become infectious before they become ill, or without becoming ill. If they develop symptoms, students, faculty and staff should [self-isolate](#). More information on [how to monitor for symptoms](#) is available from the CDC.

Diagnosed: People presumed to have or are diagnosed with COVID-19 must stay home and isolate until they meet the criteria for return to school. Staying home when sick with COVID-19 is essential to keeping COVID-19 infections out of schools and preventing spread to others.

Exposed: It is also essential for people who are not fully vaccinated to quarantine after a recent close contact to someone with COVID-19. Close contact with a case is defined as being physically exposed within 6 feet of another person for 15 minutes or longer cumulatively, within a 24-hour period.

It is recommended that ALL institutions of higher education:

- Before returning to campus, actively encourage students, faculty and staff who have been sick with COVID-19 symptoms, tested positive for COVID-19, or have been potentially exposed to someone with COVID-19 (either through community-related exposure or international travel) to follow CDC guidance to self-isolate or stay home until they meet CDC criteria to be released from isolation or quarantine.
- Make sure that students, faculty and staff who do not reside on campus know they should not come to campus if they are sick, and should notify campus officials (e.g., designated COVID-19 point of contact) if they become sick with COVID-19 symptoms, test positive for COVID-19, or have been exposed to someone with COVID-19.
- Immediately separate students, faculty or staff who have symptoms from others when they arrive on campus or develop symptoms while on campus.
- Require symptomatic individuals to wear masks until after leaving the campus building or facility.
- Establish and enforce sick policies to prevent the spread of disease, including:

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- Enforcing faculty and staff staying home if sick.
- Encouraging liberal use of sick leave policy.
- ❑ Develop plans for backfilling positions of employees on sick leave and consider cross-training to allow for changes of staff duties.
- ❑ Post signage at the entrances to campus buildings and facilities requesting that people who have been or are symptomatic with fever and/or cough not enter, such as [Know Your Ws/Stop if You Have Symptoms](#) flyers (English - [Color](#), [Black & White](#); Spanish - [Color](#), [Black & White](#)).

Isolation and Quarantine

- ❑ All students who test positive should be isolated until they meet CDC guidance for release from isolation. Please consult with your local health department on release from isolation for positive students. Please note that there are **no exceptions** for isolation for COVID-19 positive individuals, and testing-based release from isolation is not recommended.
- ❑ Per CDC guidelines, if an individual has been diagnosed with COVID-19 or is presumed positive by a medical professional due to symptoms, the individual should isolate until:
 - No fever for at least 24 hours since recovery (without the use of fever-reducing medicine) AND
 - Other symptoms have improved (e.g., coughing, shortness of breath) AND
 - At least 10 days have passed since first symptoms
- ❑ Per CDC guidelines, if an individual has been diagnosed with COVID-19 but does not have symptoms, they should isolate until 10 days have passed since the date of their first positive COVID-19 diagnostic test, assuming they have not subsequently developed symptoms since their positive test. Anyone who develops symptoms should follow the criteria for when symptomatic individuals can end isolation described above.
- ❑ All close contacts to a positive case who are not fully vaccinated should quarantine.
- ❑ Per CDC guidelines, students, faculty, and staff should remain in quarantine for up to 14 days after last exposure, assuming they do not become symptomatic or test positive. If they do become symptomatic or test positive, they should follow the isolation criteria above.
 - For more information about quarantining and alternative options to shorten quarantine period please visit NCDHHS Quarantine Guidance and consult with your local health department.
- ❑ Quarantine is not required after close contact for:
 - People who are **fully vaccinated and do not have symptoms**. People who are fully vaccinated and have been exposed to COVID-19 should get tested 3-5 days after exposures and wear a mask in public indoor settings for 14 days after last exposure or until they receive a negative test result.
 - People who have **tested positive for COVID-19 within the past 3 months and recovered and do not have symptoms**.
- ❑ People who are **not fully vaccinated and have tested antibody positive within 3 months before or immediately following a close contact** may not need to quarantine IF they have limited or no contact with people at high risk for severe COVID-19 illness, including older adults and those with certain medical conditions. Since this may be difficult or impossible to assess, NCDHHS generally recommends that individuals who do not meet the two exceptions listed above should still quarantine after a close contact even if they tested antibody positive. Exemption from

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quarantine based on a recent positive antibody test can be considered on a case-by-case if approved by the local public health department.

- ❑ There are no exceptions for isolation and quarantine for student athletes.
- ❑ Notify local health authorities of confirmed COVID-19 cases among students, faculty and staff and coordinate with them regarding control measures, including isolation and quarantine.
- ❑ Ensure that if a person with COVID-19 was on campus while infectious, administrators coordinate with local health officials to notify students, faculty and staff who might have been exposed immediately while maintaining confidentiality in accordance with FERPA, NCGS § 130A-143, and all other state and federal laws.
- ❑ Develop a plan to safely isolate anyone who has COVID-19 or symptoms of COVID-19 and quarantine anyone who has had close contact and is not fully vaccinated. Students who have COVID-19 or are exposed should quarantine/isolate in place and not leave the campus area. The plan should:
 - Identify and provide areas for isolation or quarantine (e.g., isolation or quarantine room, area or building/floor for on-campus housing) to isolate anyone who has COVID-19 symptoms or tests positive but does not have symptoms or to quarantine anyone who has had close contact with someone diagnosed with COVID-19.
 - Ensure students, staff, and faculty have a place they can isolate or quarantine effectively if they have off-campus housing.
 - Provide services needed for support (e.g., food and other basic necessities, academic materials, study aids, mental health support, clothing, electronic equipment, medications, laundry, trash pick-up, and food delivery) to ensure the individual can successfully isolate or quarantine for the required amount of time whether in on-campus or off-campus housing.
 - Make every effort to arrange for a brief and safe daily outside/exercise time for isolated and quarantined students. This should be set up so as not to expose non-isolated or quarantined people or others also in quarantine.
 - Transport an ill student, faculty or staff member to a place they can isolate or to medical care if needed and contact health care providers in advance.
- ❑ Provide remote learning options and flexible attendance policies and testing/exam policies for students unable to be in class due to isolation or quarantine secondary to illness or exposure.

Case Investigation and Contact Tracing

Institutions of higher education should coordinate with their local health departments to make plans for case investigation, contact tracing, and case and contact information data sharing. Effective communication and data sharing are essential for outbreak control. Plans for case investigation and contact tracing, including a **communication plan, roles and responsibilities, and data sharing mechanisms**, should be formalized as part of a memorandum of understanding or similar document. A communication plan should include points of contact for both entities, a regular meeting schedule that can be adjusted based on case numbers, and defined frequency of data sharing. Respective roles and responsibilities can be described by different models of collaboration in case investigation and contact tracing, which include:

- a fully integrated model, where case interview and contact identification, notification and monitoring are carried out by the institution of higher education, in collaboration with the local health department;

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- an embedded model, where case investigation and contact tracing are carried out by health department or surge staff who are located at the institution of higher education; or
- a data sharing model, where the institution of higher education and the local health department develop mechanisms for secure data sharing, and all case investigation and contact tracing is conducted by the local health department.

As part of all models, critical data for institutions of higher education to share with local health departments include:

- names and identifying information about cases identified through on-campus testing;
- contact information;
- information relevant to identifying clusters (e.g., housing, activities, and classes).
- If the institution of higher education is conducting a case interview, they should also share key dates: symptom onset and testing date, and names, contact information, and exposure date of contacts.

Local health departments may also share data with IHEs under G.S. 130A-143(4) that is necessary to protect public health and implement communicable disease control measures, such as outbreak control. This sharing should be limited to the minimum necessary information for this purpose. Relevant data are:

- Information on cases among IHE student and staff population linked to IHE clusters identified through off-campus testing and their associated dates of testing;
- Information on contacts identified through local health department case investigation that are part of the IHE student and staff population.

Both entities should regularly share information on potential clusters.

Mechanisms for sharing data include: secure emails; spreadsheets that can be accessed securely by both entities; website portals for data entry; or provision of access to data systems to staff at another organization. Institutions of higher education may access and use the contact tracing software used by local health departments, the COVID-19 Community Team Outreach (CCTO) tool, without cost.

Outbreak Response

Institutions of higher education and local health departments should plan to rapidly surge capacity to handle 50-100 cases per day for a period of 2-3 weeks. Institutions of higher education and local health departments should meet frequently to share information about new cases and clusters and to manage outbreaks. CDC recommendations for broader testing can be found [here](#).

Surveillance and Screening Testing

- It is recommended that institutions of higher education develop surveillance or screening plans for campuses in order to monitor COVID-19 spread on campus and provide early detection of cases or clusters.
- Institutions of higher education should require individuals who are not fully vaccinated, or do not disclose vaccine status, participate in regular screening/testing programs.

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- ❑ Students, faculty, and staff who are fully vaccinated can refrain from routine surveillance testing.

Surveillance and screening plans developed by North Carolina universities to date have ranged from regular testing of a representative cohort, to testing a set percentage of the student body each week (e.g., 25% of students per week), to weekly or biweekly testing of all students with any on-campus classes or activities.

When forming their surveillance or screening plans, it is recommended IHEs especially consider how they will conduct surveillance of the following populations:

- Students living in on-campus residence halls
- Students participating in fraternities and sororities, especially those living in fraternity or sorority houses
- Student athletes
- Students living off campus
- Faculty and staff present on campus
- Other student populations identified to have increased risk of COVID-19 spread based on local data

While PCR testing is preferred over antigen testing due to [lower sensitivity of antigen tests](#), especially when testing asymptomatic people, antigen testing may present some benefit given the short time to result. If antigen testing is used, [antigen testing guidance](#) should be followed and positive antigen tests should be appropriately confirmed with PCR.

Plans should be made in coordination with the local health department for testing strategies and action plans to use the results of the testing. Absence and sick leave policies for students, faculty and staff should be reviewed to ensure they are consistent with public health guidance, including non-punitive “emergency sick leave” policies for employees without regular sick leave, and these policies should be clearly communicated to all students, faculty and staff to promote maximum effectiveness of testing strategies. IHEs planning screening strategies must take action to support the testing efforts, ensuring facilities and services (e.g., food) to isolate those who test positive and quarantine their close contacts and communicating consistently with the local health department for follow-up and contact tracing plans.

Testing in the Setting of a COVID-19 Cluster

NCDHHS defines a cluster as a minimum of 5 cases with illness onset or positive result within 14 days AND a plausible linkage between cases (presence in same general setting during same time period). When a cluster is identified at an IHE, a risk-based approach to testing may be used, as per the [CDC’s tiered approach](#). If using this approach, prioritization of high-risk groups should be done quickly to avoid delays in testing, and planning should be coordinated with the local health department.

Further guidance on testing can be found at CDC’s [Interim Guidance for SARS-CoV-2 Testing and Screening at Institutions of Higher Education \(IHEs\)](#)

Cleaning and Hygiene

Washing hands with soap for 20 seconds or using hand sanitizer with at least 60% alcohol reduces the risk of transmission.

It is recommended that institutions of higher education:

- Clean surfaces once a day, prioritizing high-touch surfaces. If there has been a sick person or someone who tested positive for COVID-19 within the last 24 hours, clean and disinfect the space using an [EPA approved disinfectant for SARS-CoV-2](#) (the virus that causes COVID-19).
- Have adequate supplies to support healthy hygiene behaviors (e.g., soap, paper towels, tissues, and hand sanitizer with at least 60% alcohol).
- Recommend and reinforce handwashing with soap and water for at least 20 seconds.
- Provide hand sanitizer (with at least 60% alcohol) at every building entrance and exit, in communal spaces, and in every classroom and lecture hall.
- Systematically and frequently check and refill hand sanitizers.
- Encourage staff and students to cough and sneeze into their elbows, or to cover with a tissue. Used tissues should be thrown in the trash and hands washed immediately with soap and water for at least 20 seconds.
- Increase circulation of outdoor air as much as possible by opening windows and doors, using fans, or other methods. Do not open windows and doors if they pose a safety risk.
- If transport vehicles (e.g., buses, vans) are used, drivers should practice all safety actions and protocols as indicated for other staff (e.g., hand hygiene, cloth face coverings) and review information for [bus transit operators](#).

Water and Ventilation Systems

When reopening a building after it has been closed for a long period of time, it is important to keep in mind that reduced use of water and ventilation systems can pose their own health hazards. There is an increased risk for Legionella and other bacteria that come from stagnant or standing water. For more information, the CDC provides guidance on methods to maintain safe [ventilation in buildings](#) during the COVID-19 pandemic.

Before reopening, it is recommended that institutions of higher education:

- Follow the CDC's [Guidance for Reopening Buildings After Prolonged Shutdown or Reduced Operation](#) to minimize the risk of diseases associated with water.
- Ensure ventilation systems operate properly and increase circulation of outdoor air as much as possible by opening windows and doors, using fans, or other methods. Do not open windows and doors if they pose a safety or health risk to people using the facility.

Communication and Combatting Misinformation

Help ensure that the information students, faculty and staff are getting is coming directly from reliable resources. Use resources from a trusted source like the [CDC](#) or [NCDHHS](#) to promote behaviors that prevent the spread of COVID-19.

It is recommended that institutions of higher education:

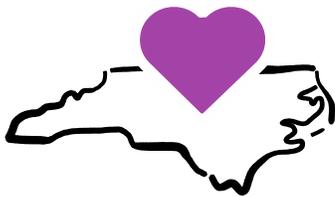
- Clearly communicate the expectation that students, staff, and faculty adhere to the institutions' COVID-19 rules and policies
- Non-adherence with policies should be considered a violation of an honor code or similar set of expectations guiding behavior.

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- ❑ Designate an administrator or office to be responsible for responding to COVID-19 concerns and notify all students, faculty and staff who this person is and how to contact them.
- ❑ Disseminate COVID-19 information and combat misinformation through multiple channels to students, faculty and staff.
 - Some reliable sources include [NC DHHS COVID-19 Webpage](#),
- ❑ Post signs, posters, and flyers at main entrances and in key areas throughout campus buildings and facilities such as those found on the [Social Media Toolkit for COVID-19](#) to remind students, faculty and staff to use face coverings, wash hands, and stay six feet apart whenever possible
- ❑ Support coping and resilience by:
 - Providing students, faculty and staff with information on how to access [resources for mental health and wellness](#) (e.g., 211 and Hope4NC Helpline 1-855-587-3463).
 - Promoting students, faculty and staff eating healthy, exercising, getting sleep and finding time to unwind.
 - Encouraging students, faculty and staff to talk with people they trust about their concerns and how they are feeling.

Additional Resources

- NCDHHS: [North Carolina COVID-19](#)
- CDC: [Colleges, Universities, and Higher Learning](#)
- CDC: [Shared and Congregate Housing](#)
- CDC: [Cleaning and Disinfecting Your Facility](#)
- CDC: [Reopening Guidance](#)
- CDC: [Coping with Stress](#)
- EPA: [Disinfectants for Use Against SARS-CoV-2](#)
- FDA: [Food Safety and the Coronavirus Disease 2019 \(COVID-19\)](#)
- HHS/OSHA: [Guidance on Preparing Workplaces for COVID-19](#)
- DHS: [Guidance on the Essential Critical Infrastructure Workforce](#)
- Johns Hopkins University Council for Higher Education Association: [COVID-19 Planning Guide for Higher Education](#)



#StayStrongNC

**Staying apart brings us together.
Protect your family and neighbors.**

Learn more at nc.gov/covid19.



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