



Interim Guidance for Off-Campus Shared Housing Settings Specific to Institutions of Higher Education (September 8, 2020)

Guidelines for Shared or Congregate Housing: Any scenario in which many people gather together poses a risk for COVID-19 transmission. For this guidance, shared housing includes a broad range of settings, such as apartments, condominiums, student or faculty housing, sororities and fraternities. Special considerations exist for the prevention of COVID-19 in shared housing situations.

People living and working in this type of housing may have challenges with [social distancing](#) to prevent the spread of COVID-19. Shared housing residents often gather together closely for social, leisure, and recreational activities, shared dining, and/or use of shared equipment, such as kitchen appliances, laundry facilities, stairwells, offices, and elevators.

The guidance below reflects early lessons learned that viral spread is originating in communal living settings off campus and social gatherings and is adapted from the Centers for Disease Control and Prevention's (CDC's) [COVID-19 Guidance for Shared or Congregate Housing](#).

This guidance covers the following topics:

- Social Distancing and Minimizing Exposure
- Cloth Face Coverings
- Cleaning and Hygiene
- Shared Dining or Shared Restrooms
- Group or Shared Transportation
- Monitoring for Symptoms, Isolation, and Quarantine
- Communications and Combatting Misinformation
- Protecting Vulnerable Populations
- Water and Ventilation Systems
- Additional Resources

Social Distancing and Minimizing Exposure

[Social distancing](#) is one of the few tools 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. 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.

It is required that all residents and owners of shared living settings:

- Follow the indoor and outdoor mass gathering limits. This would include guests who visit for parties, events, or other recreational activities.

It is recommended that shared or congregate living settings:

- Establish and enforce written requirements and accountability for residents participating in Fraternities and Sororities, Social Clubs, Societies, Affinity Group Housing, and other organized groups to limit social events, gatherings and meetings on and off campus and require adherence to the current mass gathering limits and promote social distance of at least 6 feet between people.
- Close shared and communal spaces such as dining rooms, game rooms, and lounges if possible; otherwise, stagger use and restrict the number of people allowed in at one time and arrange furniture to ensure everyone can stay at least 6 feet apart, and clean and disinfect between use. Designate some areas of shared furniture as not for use to encourage social distancing.
- Limit occupancy at fitness facilities and pools and follow the [NCDHHS Interim Guidance for Fitness Centers](#) and [NCDHHS Interim Guidance for Public Pools and Spas](#).
- Place [signage](#) and frequent reminders for residents 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 remain at least 6 feet apart in lines, while using elevators and stairways and at other times. Restrict occupancy in elevators.
- Space seating at least 6 feet apart when feasible or block off furniture that is within 6 feet of other sitting areas if it cannot be spaced out further.
- Place physical barriers such as plexiglass for protection in areas where it is difficult for individuals to remain at least 6 feet apart (e.g., reception desks, mail pick up).
- Provide resident support services virtually, as feasible. If repairs must be made, schedule a time to limit the number of individuals in the space at once.
- Follow CDC's guidance for [Shared or Congregate Housing](#) for communal spaces in congregate housing (e.g., laundry rooms, shared bathrooms and recreation areas).

Cloth Face Coverings

There is growing evidence that 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 required that all residents and owners of shared living settings:

- Must wear a cloth face covering when they may be near (less than 6 feet from) non-residents of the living setting, unless the resident states that an exception applies.
- All residents must wear a cloth face covering when in communal non-living areas (elevator, stairwells, mail room, lobby, etc)
- 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.

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 congregate living settings:

- Perform ongoing and routine environmental [cleaning and disinfection](#) of high-touch areas (e.g., door handles, sink handles, drinking fountains, grab bars, hand railings, bathroom stalls, dining hall tables, key pads, keyboards) with an [EPA approved disinfectant for SARS-CoV-2](#) (the virus that causes COVID-19), and increase disinfection during high-density times. Ensure disinfectant remains on the surface for the contact time recommended by the manufacturer.
- 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.
- Systematically and frequently check and refill hand sanitizers.
- Ensure safe and correct use and storage of cleaning and disinfection products, including storing products securely, and allowing for adequate ventilation when staff use such products.
- Discourage sharing of items that are difficult to [clean or disinfect](#). Minimize soft surfaces in shared and communal spaces, such as throw pillows, blankets and other items.

Shared Dining and Shared Restrooms

It is recommended that shared or congregate living settings:

- Close communal dining rooms. When dining rooms and cafeterias cannot be closed, then is it required that they: operate at a reduced Emergency Maximum Occupancy of 50% of stated fire capacity or 12 people per 1,000 square feet, designate seating areas that meet physical distancing requirements, and provide disinfection supplies and instructions for students to clean area before and/or after using.
- Use disposable food service items (e.g., utensils, dishes). If disposable items are not feasible or desirable, ensure that all non-disposable food service items are washed with dish soap and hot water or in a dishwasher. Individuals should wash their hands after removing their gloves or after directly handling used food service items.
- Do not share dishes, drinking glasses, cups, or eating utensils.
- 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.
- Switch to individual packaged condiment containers to reduce shared condiment stations.
- Clearly designate specific stalls, sinks, and other areas in shared restrooms to promote social distancing. Consider posting occupancy limits for large shared restroom facilities.
- Encourage shared bathrooms to be cleaned regularly using [EPA-registered disinfectants](#) at least twice per day (e.g., in the morning and evening or after times of heavy use).
- Residents should be instructed that shared sinks and countertop spaces in shared bathrooms could be an infection source. Post signs advising residents to keep toothbrushes and other personal care items in containers, and do not place directly on counter surfaces. Totes could also be used for personal items to limit their contact with other surfaces in the bathroom.
- Make sure common bathrooms are continuously stocked with soap and paper towels or automated hand dryers. Hand sanitizer could also be made available.
- Provide additional paper towels or other methods to assist with entering and exiting multi-stall restrooms without touching door handles when possible.
- Make sure trash cans are emptied regularly.
- Provide information on how to wash hands properly. Hang signs in bathrooms.

Group or Shared Transportation

It is recommended that shared and congregate housing:

- Individuals should wear a face covering while on shared transportation (e.g., campus shuttles or buses) unless they have a medical or behavioral health contraindication.
- Space riders out to maximize social distancing, ideally 6 feet apart.
- Encourage cleaning and disinfection of transportation vehicles regularly, including frequently touched surfaces in the vehicle (e.g. surfaces in the driver's cockpit, seats, arm rests, door handles, seat belt buckles, grab handles).
 - Ensure safe and correct storage of cleaning and disinfection products, including storing products away from riders and adequate ventilation when employees are using products.
- Have more frequent routes or deploy more vehicles to decrease density of riders.
- Keep windows open while vehicle to increase air circulation.
- Provide hand sanitizer for passengers boarding transportation. Hand sanitizer should only remain in the vehicles when they are in use.
- Encourage students, faculty and staff who use public transportation or ride sharing to follow CDC guidance on [how to protect yourself when using transportation](#) or use forms of transportation that minimize close contact with others (e.g., biking, walking, driving or riding by car either alone or with household members).

Monitoring for Symptoms, Isolation and Quarantine

Conducting regular screening for symptoms can help reduce exposure to COVID-19. Residents 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 get tested and [self-isolate](#). More information on [how to monitor for symptoms](#) is available from the CDC.

It is recommended that shared or congregate living settings:

- Post signage at the entrances to 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](#)).
- Conduct daily screening, which could include daily on-line surveys, to identify [symptoms or close contact to someone diagnosed with COVID-19](#) (use this standard interview questionnaire) ([English](#) | [Spanish](#)) of staff. Encourage daily screening for residents.
- Immediately separate residents who have symptoms from others.
- Cleaning and disinfecting procedures should be implemented by designated personnel following [CDC guidelines](#) once the sick individual leaves.
- If individual rooms are not available, develop a plan to safely isolate anyone who has COVID-19 or symptoms of COVID-19 and quarantine anyone who has had close contact. Residents who have COVID-19 or are exposed should quarantine/isolate in place and not leave their residence if possible. The plan should:
 - Identify and provide areas for isolation or quarantine (e.g. isolation or quarantine room, area or building/floor) to isolate anyone with a shared room, 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.

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- Encourage providing additional 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.
- Make every effort to arrange for a brief and safe daily outside/exercise time for quarantined students. This should be set up so as not to expose non-quarantined people or others also in quarantine.
- ❑ Consult local health authorities of confirmed COVID-19 cases among residents and staff and coordinate with them regarding control measures, including isolation and quarantine.
- ❑ Ensure that if a person with COVID-19 was within a communal living space or shared living space while infectious, facilities manager coordinate with [local health officials](#) to inform the residents who might have been exposed immediately while maintaining confidentiality in accordance with FERPA, [NCGS § 130A-143](#), and all other state and federal laws.
- ❑ [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 as described above.
- ❑ Any resident or staff that has had close contact with a confirmed case of COVID-19 should immediately quarantine.
- ❑ [Per CDC guidelines](#), residents or staff should remain in quarantine for 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. NOTE: a negative test prior to the end of quarantine does not change the requirement for a full 14-day period under quarantine.

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 shared or communal living spaces:

- ❑ Clearly communicate the expectation that residents adhere to the facilities COVID-19 rules and policies.
- ❑ Non-adherence with policies should be considered a violation of an honor code, community standards, or similar set of expectations guiding behavior, and consequence should be strictly applied, as leniency could lead to larger numbers of residents engaging in high risk behaviors and increased viral spread.
- ❑ Designate an administrator or office to be responsible for responding to COVID-19 concerns and notify all residents and staff who this person is and how to contact them.

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- ❑ Disseminate COVID-19 information and combat misinformation through multiple channels to students, faculty and staff.
 - Some reliable sources include [NC DHHS COVID-19 Webpage](#), [Know Your W's: Wear, Wait, Wash](#), [NC DHHS COVID-19 Latest Updates](#), [NC DHHS COVID-19 Materials & Resources](#), and the additional resources listed at the end of this guidance document.
- ❑ Post signs, posters, and flyers at main entrances and in key areas throughout 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 (Wear, Wait, Wash).
 - [Know Your W's](#) signs are available in English and Spanish.
- ❑ Support coping and resilience by:
 - Providing residents and staff with information on how to access [resources for mental health and wellness](#) (e.g., 211 and Hope4NC Helpline 1-855-587-3463).
 - Encouraging residents and staff to take breaks from watching, reading or listening to news stories, including social media if they are feeling overwhelmed or distressed.
 - Promoting residents and staff eating healthy, exercising outdoors, getting sleep and finding time to unwind.
 - Encouraging residents and staff to talk with people they trust about their concerns and how they are feeling and post [signs](#) reminding on resources

Protecting Vulnerable Populations

Information on who is at higher risk for severe disease is available from the [CDC](#) and [NCDHHS](#).

It is recommended that shared or congregate living settings:

- ❑ Enable staff that self-identify as high risk for disease to minimize face-to-face contact and to allow them to maintain a distance of 6 feet from others, modify job responsibilities that limit exposure risk, or to telework if possible.

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.

Before reopening, it is recommended that shared or congregate living settings:

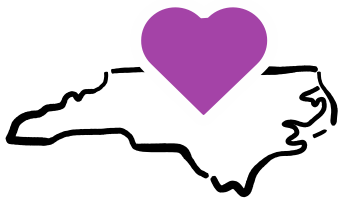
- ❑ Follow the CDC's [Guidance for Reopening Buildings After Prolonged Shutdown or Reduced Operation](#) to minimize the risk of diseases associated with water.
- ❑ Ensure ventilation systems operate properly and increase circulation of outdoor air as much as possible by opening windows and doors, using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

Additional Resources

- NCDHHS: [North Carolina COVID-19](#)
- CDC: [Shared and Congregate Housing](#)
- CDC: [Cleaning and Disinfecting Your Facility](#)
- CDC: [Reopening Guidance](#)
- CDC: [Coping with Stress](#)

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- 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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