

## Implementation Guidelines for Public Health Measures in Higher Education Institutions (HEIs).

The guidelines and implementation measures in this document have been drawn up by public health experts within the HEI sector and are endorsed by the Health Protection Surveillance Centre of the HSE.

## Introduction

The government's Roadmap for Reopening Society and Business, combined with the HSA Return to Work Protocols and ongoing public health advice provide the over-arching framework for all parts of society to reopen facilities and premises. The government has also published Guidance for Further & Higher Education for returning to on-site activity in autumn 2020. That Guidance provides for further "context-specific measures approved by government within public health guidelines".

The priority for HEIs is to assure the health and safety of staff and students, while offering students a rich and meaningful learning experience and sustaining research, scholarship and engagement. It is a fundamental principle that HEIs will operate in accordance with public health guidance. The specific features and context of HEI campuses require that this public health guidance is supplemented and supported by context-specific guidance and measures that address and accommodate the unique features of the sector and provide for their safe operation within the overall public health guidance framework.

These Implementation Guidelines set out a range of such context-specific measures with practical guidance for HEIs to safely deliver teaching and research activities on-campus in autumn 2020. They have been drawn up with specialist input from public health experts within the HEI sector and are endorsed by the HSE's Health Protection Surveillance Centre in liaison with the Department of Further, Higher Education, Research, Innovation & Science.

## Planning for reopening campuses

HEIs have continued to deliver a large portion of their services to students even in the period between 12<sup>th</sup> March and the end of academic year with the transition to emergency remote teaching and learning and the continuation of research activities where possible. HEIs are now working to finalise plans for further reopening campuses and on-site facilities in autumn 2020. A large amount of work has been completed in this regard with detailed risk assessments carried out by HEIs and preparatory measures being put in place to facilitate reopening. The plans for reopening are centred on the critical importance of personal contact for both the teaching and research components of college activity. Data from the Student Experience Survey highlights the importance of face-to-face contact for students, particularly in relation to mental well-being and health.

## Key features and challenges of Higher Education

There are a number of features of the higher education system that are unique in comparison with other sectors of education including primary, secondary and further education.

- Campuses are, generally, much larger in scale with peak populations of up to 30,000 staff and students.
- Campuses are multi-disciplinary with a wide range of facilities, buildings and outdoor spaces. They includes offices, break rooms, social venues and they also host private sector companies.
- Campus populations are adult or young adult unlike most other sectors of education.
- Campus facilities can be divided into four main categories: teaching / lecture halls, research / laboratories, service facilities including libraries, sport and other communal / commercial facilities, student accommodation.
- HEI campuses are very different to primary and secondary education facilities in that daily contact hours are considerably lower; students are generally not confined to a single building and many buildings have mechanically ventilated air with greater air exchange compared with most primary and secondary schools.

These features present very specific challenges and demand bespoke solutions in the context of reopening. The on-site / on-campus experience is a fundamental and essential component of a third level education. This does not preclude online or blended teaching and learning, particularly in the first semester of 2020-21.

### Context-specific guidelines

Noting that a number of sectors (including the hospitality sector, transport, prisons and other services) have been provided with adapted guidelines in respect of public health / social distancing that are based on the particular context in those sectors, combined with the mitigations introduced to ameliorate risk, a similar approach for HEIs is outlined here.

### What is different about 'campus life'?

Our HEIs are places where ideas are developed and debated, and this happens through social interaction and exchange. They are hotbeds of innovation and entrepreneurship. In partnership with government and business, academic research and technologies help to drive an array of vital industries.

They are key to attracting global talent and Ireland remains an attractive destination for non-EU international students who choose to learn through English. International staff and students do more than just boost the economy. They contribute to the vitality of our communities and help develop tolerant and inclusive societies. Moreover, internationalisation helps create lasting links into global networks.

Our HEIs highlight and address societal challenges providing government and communities with a robust evidence base to inform public policy as has been seen during the current pandemic, where our academics have been critical allies for policy development and research.

Most fundamentally, it is clear that access to higher education improves lives and wellbeing. It enhances self-knowledge, employment opportunities and promotes civic participation. As agents of social mobility, universities, technological universities and institutes of technology are more than sites of training and instruction, they are crucial intellectual milieus where knowledge is created, disseminated and challenged.

Setting foot on campus has always been and remains an inspirational experience. This physical presence on campus and the opportunities for multi-disciplinary exposure has a value that underpins the essence of the student experience. It fosters opportunities for collaboration, knowledge exchange and social empowerment.

### Guiding principles

We propose that the following guiding principles are applied to the proposed measures.

1. HEIs will operate within the parameters of public health and safety advice at all times. Specifically, the Return to Work Protocol and public health guidance, as it develops on a rolling basis, will be adhered to.
2. The safety and well-being of staff and students will be paramount in all cases.
3. HEIs commit to carrying out risk assessments on individual facilities / buildings as required and will apply appropriate reopening solutions in accordance with the outcome of those risk assessments.
4. In keeping with the wider approach in society in response to the COVID-19 pandemic, it is recognised that the successful implementation of 'Return to Campus' can only be done on a cooperative basis with shared responsibility between staff and students and HEI management.

The Implementation Guidelines set out below are based on these guiding principles.

### Background to Covid-19

COVID-19 is a viral respiratory tract infection. The virus cannot multiply outside of a living host but can persist and survive for a period of hours or days (depending on the conditions) if not cleaned away or inactivated. It is not yet clear how long such viral residue is capable of infecting someone.

The most important mechanism to prevent viral transmission is for anyone with symptoms suggestive of COVID-19 to self-isolate immediately and seek medical advice. Equally, close contacts of confirmed cases, or those living with someone with symptoms suggestive of COVID-19, should restrict their movements in accordance with public health guidance.

Everyone sheds liquid particles (larger droplets and smaller aerosols) from their respiratory tract when they breathe, talk, laugh, cough, sneeze (you can feel the larger ones impact if someone coughs in your face). The liquid particles come in a very wide range of sizes forming a continuum. The larger particles are called droplets and the smaller ones' aerosols. The cut-off between droplets and aerosols is generally accepted as 5 micrometres.

The virus that causes COVID-19 (called SARS-CoV-2) is scattered from the respiratory tract of infected people. The virus can be found in droplets and aerosols. There are differences in emphasis on the relative importance of droplets and aerosols in the published literature but on current evidence the general consensus is that it is overwhelmingly the larger droplets that are important in spread of COVID-19 in most circumstances. COVID-19 is therefore considered a droplet transmitted infection.

The distinction between droplet transmission and aerosol/airborne transmission is critical. Droplets generally impact on a surface within a short distance from the mouth or nose of the person generating the droplets. Virus in droplets is carried through the air over a short distance directly to the eyes nose or mouth of a susceptible person or they fall on a surface (for example skin, table top) close to the person generating the droplets. For as long as virus in the droplets remains viable on the surface where they land, they can subsequently be transferred to the eyes, nose or mouth of a susceptible person on hands or other items contaminated with virus as a result of contact with those surfaces. It is for this reason that good hand hygiene, respiratory etiquette, regular cleaning of work surfaces and the maintenance of appropriate physical distance are the mainstay of public health guidance.

When a person generates a plume of droplets, the distance travelled by individual droplets in the plume varies with size and circumstances. The density of droplets declines rapidly with increasing distance from the nose and mouth as some fall out of the air and those remaining in the air disperse. This is the basis for the public health advice to maintain physical distance, or to wear face coverings, (which protect others from droplet infection if are carrying the virus) or take other precautions if physical distance cannot be maintained. There is no specific distance that offers absolute protection against droplet transmission; at 2m distance the risk is believed to be very low, and on current evidence a distance of 1m provides most or all of the reduction in risk of infection afforded by interpersonal distance when distance is considered as one of a package of control measures that work together to manage risk.

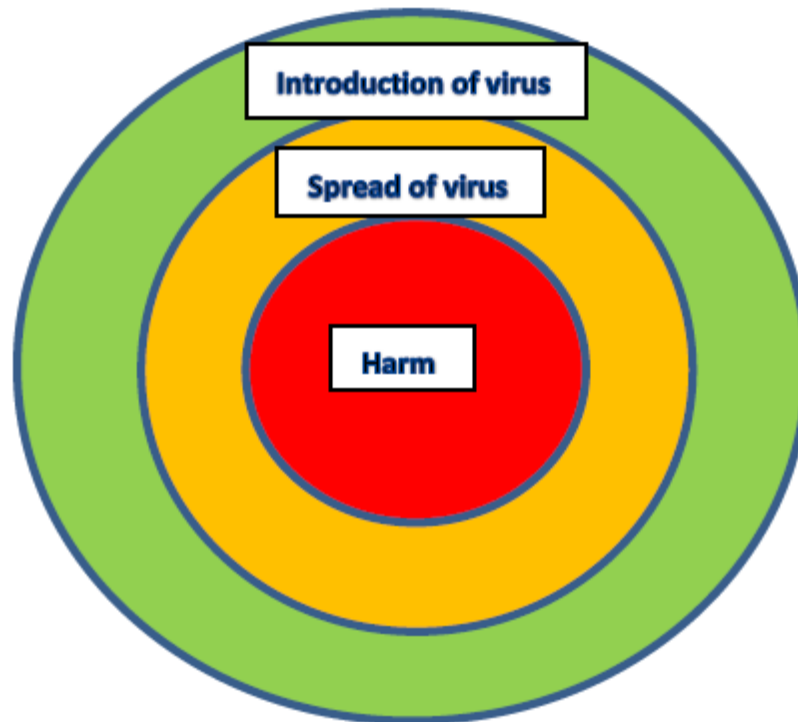
### Managing the Risk of COVID-19 on a campus.

Managing the risk of spread of COVID-19 on a campus can be considered as three concentric circles.

1. Minimising the risk of introduction of infection onto campus
2. Minimising the risk of spread of the virus on-campus if it is introduced

### 3. Minimising the associated harm if introduction and spread on-campus happens

Figure 1.



#### 1. Minimising the risk of introduction of the virus onto the campus

This is the outer circle in the figure and the most critical issue. If the SARS-CoV-2 virus is not introduced onto the campus it cannot spread or cause harm regardless of how much contact occurs between people on campus.

The management of this risk is dependent on the behaviour of the individual members of the HEI community at all times. If individual members of the community minimise their risk of exposure to COVID-19 in their life off campus, this reduces the likelihood that they become infected and reduces the risk that they introduce the virus onto campus. It is reasonable to assume in the context of campus life that adherence to risk avoidance behaviour off-campus will be very far from complete even with maximal efforts on risk communication.

The risk of a member of the HEI community acquiring infection and subsequently introducing it to the HEI is dependent on the level of control of the infection in the general community at any time. If transmission in the general community is low the likelihood of any individual member of the HEI community becoming infected off-campus and introducing the virus on-campus to others in the HEI community is low even if adherence to risk avoidance off-campus is less than optimal.

Control of access to the campus and in particular to indoor space within the campus is vitally

important. If all individuals are supported to scrupulously observe guidance to absent themselves from the campus if they have any symptoms that suggest that they may have COVID-19 and if they have been identified as Contacts of someone with COVID-19, this greatly reduces the risk of introduction to the campus. Likewise, individuals should leave the campus promptly if they have any cause to suspect that they are developing symptoms that suggest COVID-19.

Control of access to student accommodation is particularly challenging because if students are unwell and need to self-isolate and rest it is natural that they will go to their residence. If this is to be discouraged, it may require that there is some alternative residential space that can be made available at short notice to students in campus residences who develop symptoms of COVID-19. There is also a requirement for some space on campus where students who develop symptoms that suggest COVID-19 while on campus can wait safely away from other while waiting pick up from campus if they live off campus (for example in their family home in the city).

Note: One of the considerations is whether the HEI seeks to limit access to campus or limit access to indoor areas of campus. Limiting access to campus overall is likely to be impractical and low impact since risk of spread outdoors is low. Preventing access of symptomatic staff and students to indoor space is possible and likely to be of more value but also challenging. Any consideration of limiting access/exit points needs to take account of the risk of congestion around entry points if the number of entry points is reduced and also of requirements for emergency evacuation of the building.

The provision of on-campus teaching results in the assembly of students in the adjacent neighbourhood / town / city and is likely to result in a great deal of off-campus inter-personal interaction associated with risk of spread in that context. Although the HEI cannot police the behaviour of students off-campus this is an important consideration because:

- (1) of the HEIs overall commitment to student welfare;
- (2) the association between off-campus infection and the risk of introduction of infection onto campus and
- (3) the potential risk to the wider community if there is amplification of COVID-19 infection in the student body. For all of these reasons, the resumption of on-campus teaching and learning will require significant consideration as to how the HEI can promote risk avoidance among the student body when off-campus.

#### Specific measures.

1. The HEI should have an ongoing communication plan to raise awareness amongst all members of its community about how COVID-19 spreads and how spread can be prevented on-campus and off-campus.
2. The HEI should consider if there is a requirement to communicate with the wider community regarding potential fears regarding the student body contributing to spread of COVID-19 in the wider community. One important message is that after 2 weeks in a host country/city a person has the risk associated with that country/city. There is no enduring relationship between risk and geographical origin.
3. Any communication campaign should emphasise the need to avoid exposing those at most risk of serious disease in the HEI community and wider community to COVID-19. Students or staff who are concerned that they may have symptoms should be particularly careful to avoid contact with older people or people who they know to have medical conditions that put them at particular risk of severe disease.

4. Any communication campaign should provide information for members of the HEI community regarding where they should go to self-isolate if they develop symptoms of COVID-19 on-campus, in residences or elsewhere.
5. Any communication campaign should provide information for members of the HEI community regarding who to contact if they develop symptoms of COVID-19.
6. The HEI should encourage all members of its community to register with a GP (student health unit or other GP) to whom they have access if they require medical attention for COVID-19.
7. The HEI should have a protocol in place to enable safe access to indoor space. Where practical a one-way system and or marked lanes should be used to separate flow of people into, out of and within the building.
8. The HEI should control access to student accommodation. Students should not visit buildings other than the one where they live and should not invite guests to the residences. Students who are not residents in HEI accommodation should not access the buildings.
9. HEIs should clearly communicate with all staff and students that they should not attend campus if they are showing COVID-19 symptoms. Such communication should be re-affirmed on an ongoing basis. The HEI should encourage all members of its community to download the COVID-19 Tracker App and to use the symptom checker on the App on a daily basis. Advice on using the COVID-19 Tracker App will be included in email communication to students, on the HEIs website and on noticeboards across the campus.
10. Monitoring of temperatures on access to campus facilities is not required.
11. Members of the HEI community who travel to Ireland from other jurisdictions should follow Government advice on restricted movement on arrival in Ireland and may require support to do this if they are new to the area and are alone.

## 2. Minimising the risk of spread of the virus on campus if it is introduced

This is the second circle of the figure. The outer circle may be breached and the virus introduced if one or more members of the community does not adhere to advice regarding absenting themselves OR if one or more members of the community with infection is present because at the time, they have no symptoms to indicate to them that they are infected. This may be because they are pre-symptomatic in which case symptoms subsequently appear one or more days later. This may be because they have true asymptomatic infection and never develop symptoms. It is accepted that people who are pre-symptomatic or asymptomatic can spread virus but it is less clear how infectious they are and they are likely to be less infectious than symptomatic people.

### Specific Measures

Managing the risk of spread on campus can be considered under two headings

- A. Risk of spread in student accommodation provided by the HEI
- B. Risk of spread related to teaching, learning and research activities, out-reach activity

and recreation in the context of providing a safe environment for staff and students.

*A. Risk of spread in student accommodation provided by the university*

Students living in on-campus student accommodation are independent adults living unsupervised in relatively dense-congregated settings and generally sharing cooking and dining/recreation areas. Students should be encouraged to be vigilant to note signs and symptoms of COVID-19 in peers and be willing to encourage and support other students to self-isolate and seek medical advice if they observe any features that suggest COVID-19 (for example new onset coughing).

Standard measures to reduce risk of infection (reducing time in shared space indoors, hand hygiene, cough etiquette, cleaning, use of masks) can be promoted and facilitated. However, it is likely that adherence will be far from complete. If COVID-19 is introduced into student residences, there is a high risk of spread. (See above notes on providing an alternative “sick bay” residence).

Similar risks will apply in similar style residences from providers other than the HEI. The HEI should consider how it can work with other providers to promote similar measures.

*B. Risk of spread related to teaching, learning and research activities and indoor recreation space*

This is likely to be a lower risk than that associated with spread in student residences since the setting is more controlled and students spend less time in this setting.

Hand hygiene, respiratory etiquette and environmental cleaning are critical elements in Minimising the risk of spread if an infected person is present in a teaching, learning or research group. It should be noted that teaching takes place in a variety of settings including lecture theatres / classrooms, laboratories, catering facilities, science and engineering workshops and online through distance or blended learning.

A physical distance of 2m should be maintained under all circumstances possible. It should be feasible to maintain 2m distance between members of staff, or between staff and students, under almost all circumstances, and in the exceptional circumstances where this cannot be achieved, appropriate precautions (such as face coverings, visors or barriers) should be employed. There will be circumstances under which teaching cannot be delivered while maintaining 2m distance between students, and under such circumstances the distance between student seats or workstations may be reduced to (but not less than) 1m, with appropriate precautions to minimise the risk of viral transmission, and specific provision made for vulnerable students.

The NPHET recommend the use of cloth face coverings in indoor settings where adequate physical distance cannot be maintained. The basis for this advice is that the mask is expected to minimise the scattering of droplets from the mouth and nose. Therefore, if an infected person is present it is expected that mask use will reduce direct droplet transmission (to anyone standing close by) and reduce contamination of the surfaces in the vicinity of the infected person. A similar rationale may be applied to the use of full-face visors in settings where mask use is not acceptable or not appropriate.

Other than cloth face coverings (or visors where appropriate) in indoor settings, there is no requirement for other personal protective equipment related to COVID-19 risk for teaching, learning and research activities. (Note however that personal protective equipment may be required for other reasons in particular in certain laboratory settings).

Specifically, if the teacher is at a lectern or on a podium at a safe distance from the student body there is no need for them to wear a mask or visor. The risk to teachers who maintain distance and



are careful with respect to hand hygiene is low. It may be helpful to mark a boundary to define a safe distance for students who have questions after a lecture or tutorial. If the teacher wishes to cover their face, a visor may be more convenient than a mask. Gloves should not be used unless required for other reasons (for example in a research laboratory) and should be actively discouraged as they generate refuse and tend to distract from hand hygiene. In any situation in which gloves are required, people must be trained in their use and hand hygiene is required before putting on and after taking off gloves. Gloves must never be used as a substitute for hand hygiene. Cleaning protocols should be in place to allow for decontamination of the workspace at the end of each shift.

Meeting in offices can be planned to maintain distance and to check if students are symptomatic immediately before the meeting (for example by phone or email). Where this cannot be established meetings may take place online.

Note: Similar precautions apply to meetings of HEI staff.

Consideration for on-campus catering – note there is HPSC guidance for food business that is relevant.

In the event that government guidance permits opening of pubs, the relevant guidance will apply to relevant on-campus facilities if they are opened.

Indoor recreation spaces (gyms, pools) should apply sector-specific guidance.

Places of worship on campus should adhere to appropriate guidance for places of worship

The HEI should work with student societies and clubs to ensure that any organised activities on or off-campus comply with all necessary public health guidance for indoor or outdoor sports and activities.

### Specific measures

#### *A. Risk of spread in student accommodation provided by the HEI*

1. Residents in student accommodation should be given clear direction as to who to contact and an immediate pathway of access to an area where they can effectively self-isolate if required.
2. Students who share a common food preparation area should be advised to limit time spent with others in the shared space and to wear face coverings other than when eating.
3. Corresponding guidance should be made available to other providers of similar types of student accommodation.

#### *B. Risk of spread related to teaching, learning, research activities, out-reach activity and Recreation*

1. A careful review of out-reach activity is required to consider the appropriateness of the activity at this time and, where it is appropriate, how it can be organized safely.
2. Members of the HEI community should be advised to avoid/minimise sharing personal items (pens, phones), beverage or food with others.
3. To the greatest extent possible, the entry and exit from teaching space and taking of seats should be managed to avoid congregation at the entrance and exit. This is likely to be quite challenging. [Note: It may be helpful to give more time to enter and exit so that scheduling an hour with a maximum of 40 minutes of teaching may support this

as may reducing the numbers attending]

4. The HEI, to the greatest extent possible, should record attendance at all events and retain records for 4 weeks in case required for contact tracing purposes.

5. Teaching space should be laid out and managed in order to safeguard the health of both staff and students. A physical distance of 2m should be maintained where possible. However, there are many situations where tuition can only be realistically delivered with less than 2m (but no less than 1m) distancing between students, and some exceptional circumstances (confined to laboratory and practical tuition) where 2 m distance cannot be maintained between staff and students. This is safe and should proceed, provided both staff and students take appropriate mitigation measures such as the following:

- a) As in all circumstances, good hand hygiene and cough/sneeze etiquette is of paramount importance.
- b) Face coverings should normally be worn in teaching situations where distancing is reduced to between 1 and 2m.
- c) Physical contact should be avoided.
- d) Staff teaching stations should be located at least 2m from students, or more where possible, and should maintain 2m physical distance insofar as possible. This provides for a safe teaching context, but where there is a risk that the 2m distance could be compromised a face covering or other appropriate protection should be used.
- e) In the event that tuition requires the staff member to be less than 2m from students, extra precautions are required. In such situations, staff should wear face shields, visors or other protective equipment which will be provided by the HEI. The HEI must ensure that the necessary safeguards and protections are in place in accordance with the risk assessment that has been carried out for the particular context.
- f) The maximum number of people allowed in a class will be in accordance with the prevailing public health guidance on indoor gatherings and it is recognised that this may change in accordance with the evolving COVID-19 situation nationally.

6. Students should be reminded at the start of each session that they should leave if they have symptoms of COVID-19 or if they are a 'close contact' of a person that has been diagnosed with COVID-19.

7. There is no maximum duration of a teaching session (for example a laboratory practical) from an Infection Protection Control perspective (Note, however, that if people spend 2 hours or more in a shared space together, they may be regarded as COVID-19 contacts in the event that someone present is subsequently identified as a case).

8. There is no maximum duration which a person can spend in a research laboratory or office space provided distance is adequate and other measures are in place.

9. After each group leaves a teaching space, high-contact surfaces (desk tops/ compute keyboard) should be cleaned with water and detergent. Disinfectant should not generally, be used and there is no requirement for the room / theatre to be left vacant for a specific period once cleaned. (Note: Computer key boards will need to be covered with waterproof covers to facilitate cleaning after use.)

10. Food service areas should conform to national public health guidance for food business operators.

11. Areas that support student self-preparation of food require particular attention to ensure that they remain clean at all times.
12. Office hours should be organised to avoid students waiting in groups and with appropriate arrangements for distancing and mask use in keeping with Government Guidance.
13. Teaching and learning activities should, where possible, use rooms / lecture halls with good ventilation.
14. In post-graduate research, rotas may be considered to ensure that the number of people present at any one time allows for maintaining of distance. If a rota system is used, the same group of people (pods) should consistently be rostered together to minimise mixing of groups of people. Student supervision meetings for one to one or small group teaching could also take place online.
15. Staff should develop rotas for use of self-catering facilities to ensure that distance can be maintained. Rotas should in so far as practical ensure consistent groups using facilities at the same time.
16. Where group work is required (for example among students) the groups should be as small as practical and in so far as practical the membership of groups should be consistent over the semester for as many activities as possible (pods) to minimise mixing of people.

### 3. Minimising Harm if the virus is introduced and spreads

There are three key elements to managing the risk of harm to members of the HEI community if the virus is introduced and spreads.

The first is the vulnerability of individual members of the HEI community to develop severe disease. The HEI should ensure that appropriate arrangements are in place whereby staff or students who are vulnerable can declare this to the HEI and the HEI should put specific measures in place as may be appropriate.

The second key element of reducing risk of harm is that the HEI has processes in place to identify as rapidly as practical if there is any evidence of spread of COVID-19 in the HEI and has a plan to respond appropriately.

The final element of harm reduction is timely access to good medical care for anyone who becomes infected.

#### Specific measures

1. The HEI should enhance programmes to promote a healthy lifestyle to the greatest extent possible.
2. The HEI should encourage members of the campus community to signal to a central point in the HEI early if they are diagnosed with COVID-19 (Note: Confidentiality and data protection issues must be considered in how this is done). The intention is to support the HEI in identifying early if there is evidence of

transmission of COVID-19 related to HEI community activity so that it can respond appropriately in association with public health authorities.

3. Pathways for access to healthcare should be clear so that people know who to contact for access to healthcare at any time if they develop symptoms of illness.

4. Staff who consider themselves specifically at risk of severe illness, or with vulnerable members of their household, should engage with the HEI as their employer to manage that risk as appropriate.

5. The HEI should advise teaching staff who are very high risk (as per HSE guidance) that they are not required to teach face to face and facilitate such staff to work remotely, including offering teaching and learning online, where this is necessary. This is crucial in ensuring the safety of such staff. The HEI will ensure that staff living with very high risk individuals or staff in the high risk category will be risk assessed on a case-by-case basis with appropriate measures implemented accordingly.

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