

HIGHER EDUCATION IN ILLINOIS SAFELY LAUNCHING ACADEMIC YEAR 2020



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INTRODUCTION

The highest priority for Illinois' public and private institutions of higher education is the safety and health of students, faculty, and staff as they return to campuses across the state. A critical element of this reopening is a collective commitment to adhere to the latest guidelines from the Centers for Disease Control and Prevention (CDC), the Illinois Department of Public Health (IDPH), and Governor Pritzker's Restore Illinois plan.

Higher education in the state of Illinois and across the country is central to society. Students with some form of higher education earn more money over their lifetime and have a lower probability of unemployment. They also are more likely to live healthy lifestyles, to vote, to be leaders in their communities, and to volunteer for service. Beyond these individual benefits, higher education provides a rich set of benefits to cities and to the state. Our universities are engaged in cutting-edge research and scholarship that saves lives and transforms societies. Indeed, the research being conducted at Illinois universities now includes the epidemiological modeling of the virus transmission, the design and creation of ventilators and other healthcare devices to help COVID-19 patients, the active participation in a number of clinical trials of new drug treatments, and the creation of effective ways to test and track the virus. Quite literally, our institutions are at the forefront of science and discovery during this important time.

Higher education institutions often serve as the cultural and social anchor of their communities, providing important services and expertise to residents, schools, medical facilities, and non-profit organizations, to name a few. In addition, higher education institutions are among the most important economic engines both locally and in the state of Illinois. A quick glance at some numbers underscores this point. Collectively, higher education:

- Educates nearly 775,000 students annually;
- Employs approximately 165,000 people across the state;
- Serves every county in the state with extension offices and other outreach activities;
- Trains most of the doctors, dentists, social workers, nurses, other healthcare workers, as well as many other essential workers in the state; and
- Represents more than \$50 billion annual impact on the state's economy.

The great strength of Illinois' higher education system is the diversity in size, academic offerings and institutional missions, service to historically underrepresented populations, and the wide geographic distribution of institutions throughout the state. Coordinated by the Illinois Board of Higher Education (IBHE) and the Illinois Community College Board (ICCB), these institutions work together with the shared goal of transforming students' lives by providing gateways to professional careers, leadership opportunities, and an informed citizenry.

This document represents the set of principles and guidance for Illinois higher education institutions as they face the unprecedented challenge of reopening this fall in the midst of the COVID-19 pandemic.

As institutions of higher education consider how to operate as they transition to Academic Year 2020, they are guided by the following principles:

Campus Health and Safety

- Protect the health and well-being (including mental health) of students, faculty, and staff.
- Adopt science-based public health measures and procedures.
- Attend proactively to the needs of medically susceptible and other vulnerable subgroups among our campus stakeholders.

Sustaining Our Missions

- Focus relentlessly on student success inside and outside of the classroom, with high-quality teaching, learning, and support services.
- Emphasize issues of diversity, inclusion, and equity, with focused attention on the needs of underresourced and underserved students, faculty, and staff.
- Strengthen professional and career development efforts for faculty and staff whose work has been disrupted.
- Consider reasonable accommodations to the extent possible for faculty and staff who are in high-risk categories.
- Protect and advance scholarship and research in all disciplines, with particular urgency for research involving COVID-19.

Institutional Planning

- Prepare for multiple scenarios and flexibility to address ongoing uncertainties and changing risks for students, faculty, and staff.
- Recognize financial implications as well as opportunities to realize efficiencies in all decisions, both short- and long-term.
- Think creatively about all aspects of the institution.

Institutional Processes

- Be transparent in decision making.
- Engage faculty, staff, students, and other stakeholders in shared problem-solving.
- Communicate frequently and consistently, emphasizing individual and collective responsibilities in the reopening process.
- Collaborate with surrounding communities.

The following guidelines are issued to help institutions of higher education (IHEs) operate under <u>Restore Illinois:</u> <u>A Public Health Approach to Safely Reopen Our State</u>. This guidance remains subject to change pursuant to updated public health guidance and changing public health conditions. Future updates will be posted at <u>www.ibhe.org</u>. In the event of a resurgence of the virus, or second wave in the fall, IHEs should be prepared to return to full remote learning if conditions necessitate.

General Health of Campus Population.

- IHEs should use current guidance from the CDC and IDPH for social distancing, physical spacing, cleaning, disinfecting, hygiene practices, and personal measures (e.g. face coverings) to limit viral transmission.
- o IHEs should provide hand sanitizing stations at locations throughout campus.
- o IHEs should require self-monitoring of symptoms and require individuals to stay at home and obtain medical evaluation if they are showing any symptoms or signs typical of COVID-19 or influenza-like illness. If automated symptom monitoring is implemented, there must be a mechanism for the institution to track and analyze the data.
- o IHEs should encourage overall health, mental health, and wellness for students, faculty, and staff.
- Staff and faculty should have training in how to identify and refer students in distress to appropriate services.
- Wide-scale absences of faculty, staff, or students should be noted and brought to the attention of the local public health department.
- IHEs should encourage faculty, staff, and students to have up-to-date immunizations wherever possible and with consideration for populations that cannot do so.
- IHEs should encourage faculty, staff, and students to have influenza vaccines at the appropriate time. They should develop plans for future mass immunizations with influenza and COVID-19 vaccines, when available.

Campus Operations and Staffing.

o Phase 3.

- IHEs should make determinations about work that cannot be done remotely and must be done on campus as part of institutional operations and in preparation for Phase 4, including research and administrative functions.
 - Personnel should be scheduled to enable social distancing.
 - Personnel on campus should adhere to the use of face coverings and physical distancing. Personnel working in individual office spaces can remove face coverings but should wear them when leaving their individual office space.
 - In spaces such as labs where specialized furniture and equipment are fixed, the use
 of face coverings and additional scheduling considerations should be employed.
 - Breaks for staff should be staggered to allow for distancing while masks are removed when eating.

Phase 4.

IHEs should consider options for faculty and staff to work remotely. Faculty and staff who need to be present on campus should follow protocols for the use of face coverings, hand hygiene, and physical distancing consistent with CDC and IDPH guidelines.

Protection of Vulnerable Community Members.

 IHEs should provide reasonable and appropriate accommodations for remote work and learning for students, faculty, and staff who are at <u>higher risk</u> according to the CDC, referencing existing contracts and collective bargaining agreements, where appropriate.

Health, Safety, and Social Responsibility Training for Students, Faculty, and Staff.

- IHEs should implement training and messaging strategies to encourage the campus community to follow IDPH and CDC safety practices. Publicly available <u>resources from the CDC</u>, including videos, signage, and step-by-step guides in multiple languages, are available.
- IHEs should encourage campus members who use public transportation to follow IDPH and CDC <u>Protect Yourself When Using Transportation</u> guidelines.
- IHEs should work with campus governance structures to amend codes of conduct, handbooks, and other related documents to make transparent expectations for health, safety, and social responsibility.
- IHEs should work with shared governance and collective bargaining units in providing guidance on including information in course syllabi about COVID-19-related health, safety, and social responsibility, as appropriate.

Testing and Contact Tracing.

- o IHEs should follow the guidance of IDPH and their local health departments if they determine that surveillance testing becomes necessary in a specific area or region during **Phases 2-4**.
- IHEs should develop procedures and communications for having students, faculty, and staff selfisolate when returning from travel in accordance with CDC and IDPH guidance.
- IHEs should work with their local departments of public health to build and leverage capacities for contact tracing.
- Quarantine and Isolation Measures. Guidelines provided by the CDC, the Occupational Safety and Health Administration, and IDPH for isolation and quarantine will continue to evolve as does our understanding of COVID-19. Consequently, IHEs should continuously monitor these sources for the latest information and stay in frequent contact with their local departments of public health. Given the current guidelines:
 - o IHEs should emphasize the importance of self-monitoring and require self-quarantine or isolation, following CDC and IDPH guidelines, when an individual has symptoms, has been exposed to an individual who has tested positive for COVID-19, or has traveled in a high-risk area as defined by the CDC.
 - o IHEs with residential campuses should have sufficient accommodations for isolation and quarantine available, working with local departments of public health and CDC guidelines.
 - o IHEs should follow CDC and IDPH guidance regarding <u>cleaning of spaces used by individuals</u> <u>who have tested positive</u> for COVID-19.
 - Any student who lives off campus and needs to isolate or quarantine should do so at their residence.
 - o IHEs should support options for remote learning for students who are in isolation or must quarantine due to contact with someone who has tested positive for COVID-19.
 - O Students who are in isolation (i.e., have the disease) should not participate in in-person activities until recovered as defined by IDPH and CDC guidelines.
 - IHEs should have plans in place following IDPH and CDC guidelines for requiring isolation of employees who test positive for COVID-19. Employees should not return to campus until they have recovered as defined by IDPH and CDC guidelines.

Campus Space Utilization.

- O IHEs should implement plans that consider traffic flow in and out of buildings, dining centers, classrooms, labs, and studios, and other congregate spaces with particular attention to surge times and choke points, as well as spacing of students, faculty and staff to be consistent with IDPH and CDC guidelines.
 - Possible considerations include allowing students additional time to move from class to class, defining the direction of movement within classrooms, designating doors for entry and exit where feasible, and adding signage to assist with flow.

- o In settings such as classrooms/auditoriums and other spaces where it is possible to socially distance, the following safety guidance applies:
 - Faculty, staff, and students should maintain a distance of at least six feet from others, use face coverings and practice hand hygiene consistent with IDPH and CDC guidelines.
 - The maximum number of individuals in the room should not exceed 50 people.
- IHEs should consider additional measures to ensure social distancing and safety as determined by the features of spaces, learning methods, and other factors (Consider the use of floor markings, staggered furniture arrangements, and additional space between lecterns and student seats).

Cleaning of Facilities.

- o IHEs should follow protocols and use equipment (e.g. HEPA vacuums) as outlined by the IDPH and CDC for cleaning-disinfection.
- IHEs should provide personal cleaning resources in classrooms for students who want to clean their area.
- O Use of shared objects should be limited and cleaned between each use (e.g., computers in computer labs, lab equipment, desks, etc.).
- Shared bathrooms are considered high-touch areas and require frequent cleaning and disinfecting, consistent with CDC and IDPH guidelines.

Adjustments to Campus Academic Schedules.

IHEs should evaluate whether changes to the academic year are appropriate and may help reduce the number of people on campus when a disease recurrence is potentially more likely. Changes being considered by some institutions include starting face-to-face courses later in the fall, starting face-to-face courses earlier and ending the fall term at Thanksgiving, etc.

• Completion of labs, clinicals, and other performance/demonstration skills.

- While the default instructional modality under Phases 2 and 3 is online, there are situations in which face-to-face instruction is critical to students completing their degrees/certificates.
 - In Phase 2, students preparing to be essential workers such as medical professionals, first responders, transportation workers, and trade professionals would be included.
 - In Phase 3, this would also include career and technical education students and those enrolled in lab science courses or other courses that require face-to-face instruction to demonstrate competencies and complete their course of study as well as those taking foundational courses that must meet in person.
- Face-to-face instruction in Phase 2 and 3 will be reserved for these situations and observe the following guidelines.
 - Consistent with <u>guidance from the Illinois Community College Board</u>, when space or capacity is limited, institutions should consider giving priority of such face-to-face instruction to those students unable to complete their courses or degrees/certificates due to interruption of instruction.
 - The maximum number of individuals in the room should not exceed 10 or the gathering size specified in Restore Illinois.
 - Individuals will maintain a distance of six feet, and face coverings and hand hygiene practices, consistent with CDC and IDPH guidelines, will be used.
 - In close instructional lab/demonstration settings where it is impossible to socially distance, instruction should be planned wherever possible such that students and instructors are placed in static groups to reduce as much as possible their exposure to different people. Face coverings and hand hygiene, consistent with CDC and IDPH guidelines, will be practiced. Institutions may adopt a "checklist" including possible items as symptom and temperature checks that students and instructors would use to self-

certify their health status prior to entering the setting, consistent with **General Health of Campus Population**, above.

- If the following safety guidelines are in place, instruction, academic support, student services, and research at an IHE are permitted.
 - O Under **Phase 3**, while remote instruction continues, some IHE operations may reopen to conduct research or scholarly activities and to prepare for resuming in-person campus activities under Phase 4. For example, academic success, advising, testing, and similar centers may offer limited face-to-face services in situations where remote delivery is impossible or inadvisable; and campus employees deemed necessary to prepare for reopening may return. In these circumstances, the following guidelines apply:
 - Meetings will take place remotely whenever possible.
 - Faculty, staff, and students should maintain a distance of at least six feet from others if practical in meetings, labs, and waiting rooms, use face coverings and practice hand hygiene, consistent with CDC and IDPH guidelines.
 - Other spaces designed for people to congregate will be closed.
 - Cleaning and sanitization practices will follow IDPH, CDC, and Cleaning of Facilities guidelines, as outlined above.
 - O Under Phase 4, in-person instruction may resume with safety guidance, as outlined above.
 - Facial coverings should be used by instructors and students. However, if a face covering interferes with instruction, accommodations may be made to ensure Americans with Disabilities Act compliance. For example, additional distance between instructor and students or the use of a transparent physical barrier is recommended.
- Residential Life. Many campuses have allowed students to remain in campus housing if they are unable
 to return home or do not have a safe home to return to. These students are permitted to remain
 independent of Phase. All hand hygiene, face covering, and sanitization practices, according to IDPH
 and CDC guidance, must be practiced.
 - In Phase 3, residence halls may be opened in preparation for the return of students in Phase 4.
 For example, resident assistants may return for training. All IDPH and CDC safety and sanitization practices should be in place.
 - In Phase 4, residence life operations include the return of students to campus housing with the following safety guidance:
 - Resident institutions should create a move-in policy that minimizes interactions (e.g. limit building occupancy, control flow, extend schedule, etc.).
 - Roommates or suitemates may be treated as a household to allow more than one occupant per room.
 - Hallways should not be used to congregate.
 - In the case of individual or suite-style bathrooms where residents have primary cleaning responsibility, signs should be posted to remind students of proper cleaning procedures.
 - Limit guests. All guests should adhere to health guidelines, including hand hygiene, face coverings, and social distancing.
 - Students should use face coverings and follow social distancing guidelines in common areas like shared kitchens, lounges, computer labs, and e-sports labs. Signs should be posted to remind students of proper cleaning procedures.
 - Institutions should have accommodations for isolation and quarantine available, as outlined above, under Quarantine and Isolation Measures.
- **Food Service Operations.** Institutions should refer to relevant industry guidelines issued by the Illinois Department of Commerce and Economic Opportunity (DCEO) for Phase 3 Restaurants and Bars and Phase 4 where appropriate.

- o As the American College Health Association notes, while dining services may share similarities to restaurants, there are significant differences that call for different guidelines.
 - IHEs should require all dining facility staff to wear face coverings and gloves at all times while working and interacting with the public.
 - IHEs should require all diners to wear face coverings while in the facility when moving around.
 - IHEs should ensure physical distancing of patrons by limiting the number of individuals dining in the facility at one time, if needed.
- Additional guidance provided by the National Association of Colleges and University Food Services may offer helpful considerations as it becomes available.
- o For vending machines, institutions should refer to DCEO guidelines for Offices and decide whether they are able to sanitize machines in accordance with these minimum guidelines.
- Bookstore and Other Retail Operations. These operations on IHE campuses should follow retail industry guidelines released by DCEO for **Phase 3 Retail Guidelines** and **Phase 4 Retail Guidelines**.
 - o Institutions should use contactless/curbside pickup when possible and follow relevant guidelines for keeping staff safe.

Recreation and Centers.

- Institutions should consider keeping fitness centers closed to the public during Phase 3.
- Fitness centers open to staff and students for one-to-one training and outdoor fitness classes should follow DCEO guidelines for Health and Fitness Businesses under Phase 3.
- New guidelines released by DCEO for Phase 4 will be considered for updates to this guidance as necessary.
- Campus Early Childhood Care and Education Facilities. Licensed child centers on campuses may operate in Phases 3 and 4 in accordance with guidance from IDPH, the Department of Children and Family Services, the Department of Human Services, and Governor's Office of Early Childhood Development.
- Campus Transportation. IHEs with their own institutional modes of campus transportation should implement enhanced procedures for the safety of drivers and passengers.
 - IHEs should reduce capacity limits to afford riders social distancing. In this case, IHEs may also need to consider increasing service to manage the volume of passengers.
 - o IHEs should require drivers to wear face coverings or shields and use routine hand hygiene.
 - o IHEs should require passengers to wear face coverings and implement policies for non-compliant passengers.
 - o IHEs should follow CDC and IDPH guidelines for regular cleaning of vehicles and to the extent possible provide disinfectant wipes at bus entrances and exits.

Campus Access, Visitors, and Events.

- Campus meetings and events, including student organization activities and athletic events.
 - Phase 3.
 - Faculty, staff, and students should conduct meetings remotely and carry out inperson meetings on a scheduled basis with 10 or fewer people using CDC and IDPH guidelines for face coverings hand hygiene, and social distancing.
 - Students and guests should attend campus events in a virtual or remote format.
 - Institutions may return certain student athletes to campus, in alignment with the National Collegiate Athletic Association (NCAA), the National Association of Intercollegiate Athletics (NAIA), the National Junior College Athletic Association

(NJCAA), and conference guidelines, while following all social distancing and health practices as otherwise outlined in this document.

Phase 4.

- Events meeting the Restore Illinois guidelines for gatherings in Phase 4 (currently 50 people or fewer) may occur on-campus, using current CDC and IDPH guidance for face coverings, hand hygiene, and social distancing.
- Multiple gatherings of 50 people or fewer are permitted if at least 30 feet is maintained between groups or the groups are in different rooms, consistent with DCEO Phase 4 meeting guidance.
- Athletic events make take place in alignment with NCAA, NAIA, NJCAA, and conference guidelines, while following IDPH safety guidance.
- Official institutional activities taking place off-campus are subject to the same guidelines as on-campus events.
- Community groups, camps, and other external activities using institutional facilities.
 - Phase 3.
 - IHEs should limit community groups, camps, and other external activities that use institutional facilities. Health safety guidelines apply to all such activities.
 - Youth sports camps may be offered on campus in accordance with the DCEO guidelines for youth sports.
 - Phase 4. IHEs should limit community groups, camps, and other external activities using institutional facilities and gatherings must be of 50 people or fewer, or consistent with CDC and IDPH guidance at the time of the event.
- o Campus visitors. Campus visitors include, for example vendors, construction workers, prospective students, faculty, or staff, and the like.
 - Phase 3. IHEs should limit campus visitors. Visitors who must be on campus should adhere to health guidelines, including hand hygiene, face coverings, and social distancing, wherever possible.
 - Phase 4. Campus visitors are permitted on campus following health guidelines.
- IHEs should have plans in place to move to a previous phase if needed and outlined in the Restore Illinois plan.

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Concurrently, the ICCB convened a state work group comprised of institutional leaders, faculty, and staff from the state's community college system. Many of those work group members also served on this Committee and ensured the highest level of coordination and collaboration. We offer particular thanks to them for taking on this joint role.

We greatly appreciate the efforts of all of those who contributed, especially in these extraordinary times.

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