High-Risk Students and University Reopening

Introduction

Institutions of higher education (IHEs) need to take precautionary measures to protect vulnerable individuals from COVID-19. The reopening of IHEs increases the likelihood of students, staff, and faculty members contracting COVID-19 due to increased daily interactions. According to the U.S. Centers for Disease Control and Prevention (CDC), “the more closely you interact with others, and the longer that interaction, the higher the risk of COVID-19 spread.”

Per the Americans with Disabilities Act and Section 504 of the Rehabilitation Act, students who are at high risk due to chronic illness or disability must have equal educational opportunities. It is imperative that IHEs address the need to accommodate high-risk students, staff, and faculty and that they work to make their campuses safe for these individuals to return.

According to the RAND Corporation, 60% of Americans have a chronic condition that places them in the high-risk category. Per the National Center for Education Statistics, in the United States, 20% of students have a disability and 17% of students have a chronic health condition. With such a high prevalence of chronic illness nationwide, it can be assumed that a significant portion of faculty and staff at institutions of higher education also have conditions that place them into high-risk categories.

Classrooms, residence halls, dining halls, libraries, and restrooms are just a few of the many campus settings where transmission of COVID-19 can occur. The CDC states that opening residence halls and classrooms at lower capacity still poses “more risk” (see Table 1 & 2).

<table>
<thead>
<tr>
<th>Table 1: IHE General Settings</th>
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<tbody>
<tr>
<td><strong>Lowest Risk</strong></td>
</tr>
<tr>
<td><strong>More Risk</strong></td>
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Table 2: IHE On-Campus Housing Settings

<table>
<thead>
<tr>
<th>Risk Level</th>
<th>Housing Settings</th>
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<tbody>
<tr>
<td>Lowest Risk</td>
<td>Residence halls are closed, where feasible.</td>
</tr>
<tr>
<td>More Risk</td>
<td>Residence halls are open at a lower capacity and shared spaces are closed (e.g., kitchens, common areas).</td>
</tr>
<tr>
<td>Highest Risk</td>
<td>Residence halls are open at full capacity including shared spaces (e.g., kitchens, common areas).</td>
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Few institutions of higher education have implemented plans for high-risk students who must return to campus. Even fewer institutions have implemented plans for students who are unable to return to campus and must complete their classes online. Additionally, many institutions may not have included high-risk students, staff, or faculty on their planning teams or asked for feedback from these high-risk individuals regarding current and future plans.

Many students rely on the stable housing, healthcare, and dining programs that IHEs provide. High-risk students are also facing a greater fear of uncertainty than their peers, as medically withdrawing from a semester could mean loss of tuition, financial aid, and scholarships. Prior to the pandemic, students with pre-existing conditions had higher rates of absenteeism and often struggled with their condition impacting their grades per the American Academy of Pediatrics. Additionally, the stress of the pandemic may cause flare-ups and additional mental health issues for these students.

**Disability Services**

Students may also face challenges with their existing accommodations during the upcoming semester. Some accommodations may be inadvertently weakened or eliminated through hybrid or online programs, which could greatly impact high-risk students’ academic outcomes. Prior to COVID-19, many students with disabilities already struggled with processes for managing their disability, especially with communication and getting their needs met. Online classes and the resulting issues may exacerbate these pre-existing difficulties.
Recommendations

1. Task Force
   1.1. Develop a task force to address the needs of high-risk students, staff, and faculty.
       1.1.1. This task force should work closely with the dean(s) of students and
       the disability and/or accessibility office.
   1.2. Include those who are considered high risk throughout the planning process.

2. Accommodation and Attendance Policy Revision
   2.1. Consider revising attendance policies to create flexibility and equality for all
       students, not just those who are high risk.
       2.1.1. Consider removing a limit on absences for students who may be sick,
       as these limits may cause students to push themselves to attend classes even
       when it is against public health guidance.
       2.1.2. Changing absence policies for all students to promote staying home
       when sick and not penalizing students for staying home could be extremely
       beneficial.
   2.2. Medical withdrawal policies should be updated to prevent students from losing
       tuition, financial aid, and scholarships if they are to need to withdraw at any point in
       the semester.
   2.3. Accommodations should be extended to cover all hybrid and online classes, in
       addition to face-to-face classes.
       2.3.1. Notetakers and/or video recording should be provided for all classes
       to assist in the event that any student is ill and misses class.
       2.3.2. There must be proper and timely communication highlighting how
       accommodations will be translated to a virtual setting.
   2.4. Accessibility and/or disability offices should consider revising their eligibility
       requirements so students who are at high risk do not need to enter medical settings
       to complete paperwork and/or exams in order to receive accommodations.

3. Provision of Supplies
   3.1. Consider providing adequate supplies to support healthy hygiene behaviors,
       mask-wearing, and to limit community transmission.
       3.1.1. Soap, hand sanitizer (at least 60% alcohol) tissues, and no-touch trash
       cans.
       3.1.2. Provide cloth coverings for those who need them.

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4. Signage and Educational Materials
   4.1. Elevators and classrooms should have tape and signage to show proper spacing for social distancing so students do not crowd in an area.
   4.2. Elevators and bathrooms should have strict capacity limits to reduce the number of people in enclosed spaces.
   4.3. Create virtual programs, signage, and educational materials highlighting the importance of taking steps to reduce opportunities for transmission and minimizing the risk to people who are at higher risk.
      4.3.1. i.e. How to behave in the classroom
            4.3.1.1. Stay six feet apart.
            4.3.1.2. Do not share objects.
            4.3.1.3. How to wait outside of the classroom.
      4.3.2. i.e. Promoting proper hygiene
            4.3.2.1. Wash hands for at least 20 seconds.
            4.3.2.2. Avoid touching your eyes, nose, and mouth.
            4.3.2.3. Cover your mouth and nose with a cloth face cover when around others.

5. High-Risk Communities
   5.1. Consider creating designated floors and/or residence halls for high-risk students.
      5.1.1. Consider designated bathrooms with increased disinfection practices for high-risk students.
      5.1.2. Consider low-cost MIRV 13 air filters.
      5.1.3. Consider temperature checks and frequent screening at all residence halls.
      5.1.4. Consider creating an application or website for daily/weekly self health screenings to use to allow entry into residence halls.
       5.1.4.1. Have you been in contact with anyone who has had COVID-19?
       5.1.4.2. Have you had any of the following symptoms in the last 14 days: sore throat, cough, chills, body aches for unknown reasons,
shortness of breath for unknown reasons, loss of smell, loss of taste, fever at or greater than 100.4 degrees Fahrenheit?

5.1.4.3. What is your temperature?

5.1.4.4. Have you traveled anywhere in the last 21 days?

6. Food Programs

6.1. Consider creating a food program for high-risk students.

6.1.1. Consider providing a refrigerator and a microwave in residence hall rooms.

6.1.2. Consider providing boxed meals.

6.1.3. Consider having a designated dining hall section.

For more information and recommendations please visit the following ACHA Guidelines:

ACHA Considerations for Reopening Institutions of Higher Education in the COVID-19 Era

ACHA Checklist for Considerations Related to Reopening Campus Medical Service Operation

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References


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