Background

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**Tuscany Strategy Consulting** focuses on creating lasting client growth through strategy-to-implementation solutions for senior leaders in Education, Healthcare, and Service Businesses. The firm develops business strategies that are relevant, contextualized, and effectively implemented. Tuscany’s partners lead each engagement and the partners have extensive prior experience in higher education operational roles. Tuscany recognizes that every client’s needs are unique and thus engagements are fully customized to meet client goals, incorporating creativity and data-driven evidence to support long-term client success. This approach builds strong and lasting relationships with clients, with the vast majority of Tuscany clients engaging for multiple projects. Tuscany’s higher education client list includes institutions of all sizes and encompasses public and private colleges and universities.

**Johns Hopkins Center for Health Security** – The Johns Hopkins Center for Health Security works to protect people’s health from epidemics and disasters and ensure that communities are resilient to major challenges. The Center examines how scientific and technological innovations can strengthen health security by studying the policies, organizations, systems, and tools needed to prevent and respond to outbreaks and public health crises. The Center advances policies and practice to address a range of challenges, including the global rise in emerging infectious diseases, a continued risk of pandemic flu, major natural disasters, our dependence on vulnerable infrastructure, outbreaks of foodborne illness, and the potential for biological, chemical, or nuclear accidents or intentional threats. The Center plays a critical role in advancing policies and practices in health security and its work surrounding the Covid-19 pandemic includes:

- A National Plan to Enable Comprehensive COVID-19 Case Finding and Contact Tracing in the US
- Public Health Principles for a Phased Reopening During COVID-19: Guidance for Governors
- Operational Toolkit for Businesses Considering Reopening or Expanding Operations in COVID-19
- Filling in the Blanks: National Research Needs to Guide Decisions about Reopening Schools in the United States

**CHEA** – A national voice for academic quality in higher education through accreditation, the Council for Higher Education Accreditation (CHEA) is an association of degree-granting colleges and universities and recognizes U.S. institutional and programmatic accrediting organizations. CHEA serves as an outspoken advocate for accreditation, working with the U.S. Congress and the Department of Education. It is “Accreditation Central” – serving as the source of the most comprehensive national information on U.S. accreditation and its value to society. CHEA provides leadership and serves as an authority in the national dialogue not only on accreditation, but also quality and quality assurance in higher education. Through its international arm, the CHEA International Quality Group, CHEA works with governments, multi-national organizations and quality assurance bodies worldwide and serves as a convener, partner and thought-leader in addressing accreditation. CHEA’s support of this guide does not set standards related to COVID-19.
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Special thanks to Jeffrey Cochran Exclamation Communications, Inc! who donated extensive design and support services for this guide and www.OpenSmartEDU.org.
Cautions and Limitations

This guide does not provide authoritative health and safety recommendations. It is intended to stimulate discussion and prompt planning committees to probe critical areas, ask challenging questions, and develop frameworks for planning for different COVID-19 scenarios. Health and safety guidance is provided by the CDC, federal, state, and local public health authorities along with federal, state, and local government mandates that may change based upon public health conditions. We have provided a list of resources but encourage all institutions to regularly check with public health authorities for updated information.

Disclaimer
There is no one-size-fits-all approach or industry-wide best practice standards developed and proven for reopening institutions of higher learning during the COVID-19 pandemic. The information provided in this Guide, Self-Assessment Calculator, and Project Planning tool is not, nor can it be, a comprehensive guide or list of requirements given the range of institutions, environments, and conditions that exist in higher education today. It is understood that some of the considerations will not be applicable, relevant, or financially viable depending on the institution and its progress to date in COVID-19 response planning. In preparing this guide, the authors decided to err on the side of being as detailed as possible in order to anticipate needs or questions of the readers. But the detailed checklists and notes should not be interpreted as requirements or standards.

This guide does not provide legal recommendations; nor does it attempt to impose, suggest, or provide best practice guidance for a standard of care by which academic institutions should be judged. Rather, it is intended to encourage planning committees to investigate a wide range of options for planning and operating higher education institutions in a pandemic environment. Institutions should consult legal counsel regarding all plans and contingencies. Institutions are also advised to check with their insurance providers.

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Toolkit Purpose

Preparing for Fall 2020
Since the late winter of 2020, institutions of higher education have grappled with tremendous academic, operational, ethical, financial, and legal challenges related to Coronavirus Disease (COVID-19). In order to help institutions prepare for the Fall 2020 academic year, Tuscany Strategy Consulting, the Johns Hopkins Center for Health Security, and Council for Higher Education Accreditation developed a comprehensive COVID-19 toolkit which included four components:

- COVID-19 Planning Guide for Higher Education
- COVID-19 Self-Assessment Calculator for Higher Education
- University Response Tracker & Web Resources on www.OpenSmartEDU.org
- Higher Education Planning Tool (Smartsheet)

Preparing for Fall 2021
Over the past year and a half researchers, academic institutions, private business, and governments have created an unprecedented response to the global pandemic. Academic institutions, in particular, have managed a wide range of robust responses to meet the complex needs of their stakeholders. This guide is designed to help institutions assess their preparation for the upcoming academic year. This Summer 2021 addendum includes the following updates:

- New COVID-19 Self-Assessment Calculator for Higher Education. This revised Risk Calculator and Mitigation Evaluation reflects advances in vaccines and places greater emphasis on ventilation and less emphasis on extensive sanitation procedures.
- New, COVID-19 Summer 2021 Addendum for Higher Education (this document) provides highly pertinent websites & resources related:
  - Vaccines & vaccine policies,
  - International students,
  - Managing student cohorts.

This guide and accompanying risk assessment are intended to accommodate a wide range of institutions: public, private, large, small, comprehensive, specialized, urban, and rural. Each institution will need to develop and implement its own tailored approach to reopening in-person instruction. There is no one-size-fits all approach to reducing risk from COVID-19 because colleges and universities have different situations, needs, and resources. However, institutions must ensure their answers to the questions found in this document and the self-assessment calculator are substantive in order to yield a robust, scientifically grounded strategy for managing institutional operations.
How To Use The Self-Assessment Calculator

The accompanying Self-Assessment Calculator (MS Excel) is designed to identify activities that are associated with a high risk of COVID-19 spread at universities or colleges and provides considerations to meaningfully reduce these risks. There are three stages to the Self-Assessment Calculator:

- Stage 1: Risk Assessment
- Stage 2: Mitigation Questionnaire
- Stage 3: Determination of the Overall Risk

The risk assessment includes questions intended to identify the high-risk operations of the university or college by measuring opportunities where risk of transmission would be significant. The mitigation questionnaire allows users to identify considerations to include in the university or college reopening strategy or plan that would greatly reduce the risk of COVID-19 outbreaks on campus. The risk rating and mitigation rating provided after completing the respective stages interact to determine the overall risk of COVID-19 for the college or university to resume in-person instruction.

Instructions are provided on the first tab of the excel document and walks users through the three stages which are found on the following tabs in the document. In order to receive an overall risk rating, users must answer all questions provided in the risk assessment and mitigation questionnaire. For higher institutions with multiple campuses, users should conduct a self-assessment per campus to distinguish between the different operations and conditions between campuses.

Once an institution has completed the Stage 1 Risk Assessment and Stage 2 Risk Mitigation Questionnaire, Stage 3 provides an overall risk determination which allows universities and colleges to better understand the level of risk various activities (academics, research, student life, etc.) present and how to meaningfully reduce these risks. If universities or colleges receive an overall risk score of moderate, high, or very high, careful consideration should be taken to determine how the college or university should reopen and what additional measures could be implemented to further reduce this calculated risk. Users should regularly complete the self-assessment calculator to account for changes in their operating policies and ensure the evaluation of their risks is up to date.
Planning for Fall 2021

These statements represent a continuation of the 2020 COVID-19 Guide. These statements are in addition to the previously published sections 1-16.

17. Vaccines
The approved COVID-19 vaccines represent a vital tool in contesting the pandemic. Multiple vaccines have demonstrated high rates of efficacy in clinical trials and significant numbers of individuals are already vaccinated and availability is increasingly widespread. As of April 2021, the American College Health Association (ACHA) recommends COVID-19 vaccination for all on-campus college and university students:

“Where state law and available resources allow, ACHA recommends COVID-19 vaccination requirements for all on-campus college and university students for fall semester 2021, in accordance with the IHE's normal exemption practices, including exemptions for medical contraindications. This recommendation applies to all students who live on campus and/or participate in on-campus classes, studies, research, or activities.”

Like the ACHA, we recommend that institutions implement a COVID-19 vaccine mandate covering all on-campus students subject to supply limitations or conflicting state law. A vaccine mandate is the most effective way for colleges and universities to safely return to a robust on-campus experience, and protect students, faculty, staff, vendors, and members of the local community.

Further, we recommend that vaccine mandates apply to faculty, staff, and where practical, vendors and contractors. To date, several hundred institutions have instituted vaccine mandates and substantial resources are available to help navigate the process of issuing a mandate. The end of this section lists several guides on the legality of vaccine mandates.

Especially pertinent is the CDC’s July 27th, 2021 early release guidance on COVID-19 prevention strategies, “COVID-19 vaccination remains the most effective means to achieve control of the pandemic. In the United States, COVID-19 cases and deaths have markedly declined since their peak in early January 2021, due in part to increased vaccination coverage. However, during June 19–July 23, 2021, COVID-19 cases increased approximately 300% nationally, followed by increases in hospitalizations and deaths, driven by the highly transmissible B.1.617.2 (Delta) variant of SARS-CoV-2, the virus that causes COVID-19.”


Of particular concern is the COVID-19 Delta variant which is driving marked increases in COVID-19 cases. Multiple reports highlight the need for vaccination requirements:

• New York Times, Life Expectancy in U.S. Dropped 1.5 Years in 2020, Largely From the Pandemic, July 21, 2021
• Washington Post, *For unvaccinated, coronavirus is soaring again* An analysis of adjusted rates for cases, covid-19 deaths and hospitalizations shows the country’s summer upswing is slamming the unprotected while others enjoy freedom, July, 2021


• Nature, *Delta coronavirus variant: scientists brace for impact,* The rapid rise of the highly transmissible strain in the United Kingdom has put countries in Europe, North America and Africa on watch. June 22, 2021

• Economist, *The march of the coronavirus across America,* Explore which places are most severely affected by Covid-19 April 19th, 2021

If an institution does not mandate vaccines, per the ACHA’s Considerations for Reopening Institutions of Higher Education for the Fall Semester 2021 “physical distancing, masking, control of group sizes, appropriate ventilation, advanced testing strategies, and rapid contact tracing would likely need to be continued.”

The CDC’s July 27th, 2021 early release guidance on COVID-19 prevention strategies, makes this especially clear “Until vaccination coverage is high and community transmission is low, public health practitioners, as well as schools, businesses, and institutions (organizations) need to regularly assess the need for prevention strategies to avoid stressing health care capacity and imperiling adequate care for both COVID-19 and other non–COVID-19 conditions. **CDC recommends five critical factors be considered to inform local decision-making:**

1) level of SARS-CoV-2 community transmission;
2) health system capacity;
3) COVID-19 vaccination coverage;
4) capacity for early detection of increases in COVID-19 cases; and
5) populations at increased risk for severe outcomes from COVID-19.

Among strategies to prevent COVID-19, **CDC recommends all unvaccinated persons wear masks in public indoor settings.** Based on emerging evidence on the Delta variant (2), **CDC also recommends that fully vaccinated persons wear masks in public indoor settings in areas of substantial or high transmission.** Fully vaccinated persons might consider wearing a mask in public indoor settings, regardless of transmission level, if they or someone in their household is immunocompromised or is at increased risk for severe disease, or if someone in their household is unvaccinated (including children aged <12 years who are currently ineligible for vaccination).”

See Section 2 of the 2020 COVID-19 Guide for an extensive list of considerations related to isolation, quarantine, and testing protocols.

17.1. **Vaccine Policies**

17.1.1. Senior leadership and trustees have determined if **COVID-19 vaccines** will be mandated for students, faculty, staff, contractors/vendors, and guests to return to campus.

17.1.2. The institution’s policies and protocols are documented and communicated to stakeholders.

17.1.3. Appropriate signage is put in place to communicate institutional restrictions/requirements.
17.1.4. Senior leadership and trustees have determined if influenza vaccines will be mandated for students, faculty, staff.

17.1.5. Senior leadership, health, and operations leadership have established a process to identify and address Covid-19 and vaccine misinformation.

17.1.6. Senior leadership, health, and operations leadership have established alert levels enabling it to determine when and how to change institutional policies and protocols to accommodate increasing/decreasing COVID transmission.

17.1.7. Health and operations leadership have reviewed methods to maximize ventilation both through dilution and filtration of air. Per CDC guidance “Proven effective strategies against SARS-CoV-2 transmission, beyond vaccination, include using masks consistently and correctly (7,8), maximizing ventilation both through dilution (9,10) and filtration (11) of air, and maintaining physical distance and avoiding crowds (12,13)."

See pages 19-22 of the 2020 COVID-19 Guide for an example of Alert Levels and an illustration of potential triggers to move between alert levels. Appendix B also provides an illustration of activities by alert level.

17.2. If the institution enacts a vaccine mandate

17.2.1. Senior leadership has determined if and what exceptions to the vaccine mandate are allowable, whether they be specific populations and or circumstances.

17.2.2. Senior leadership has determined which vaccines will be accepted by the institution. This is particularly important for international students who may have received a vaccine that is not approved for emergency use by the FDA.

17.2.3. Health and operational leadership have determined what quarantine protocols, vaccination protocols, and resource requirements are needed for students, faculty, staff that are unable to gain access to approved vaccines until they return to campus. Note that per CDC guidance, “fully vaccinated persons who are exposed to COVID-19 do not need to quarantine or, in most cases, be tested.”

17.2.4. The institution’s health and or operations function has determined what forms of proof of vaccination will be accepted.

17.2.5. The institution’s health and or operations function has determined protocols for quarantine what forms of proof of vaccination will be accepted.

17.2.6. Senior leadership has determined the consequences of not providing proof of vaccination and assessed the impact across stakeholder groups including students, faculty, staff, vendors/contractors, and guests.

17.2.7. Vaccine requirements are communicated to all stakeholders, including the rationale, specific requirements, exceptions, and consequences of not meeting the mandate.

17.2.8. Senior leadership has assessed what burdens the vaccine mandate places on students, faculty, staff, contractors/vendors, and guests and determined what supports are appropriate for the institution to provide.
17.3. Managing unvaccinated populations

17.3.1. The institution has established a protocol for unvaccinated populations to return to campus that may include SARS-CoV-2 testing, symptom screening, and/or 14-day quarantine before full immersion in the campus environment.

17.3.2. The institution has established a process for determining if students, faculty, staff are traveling from a COVID-19 hotspot. See the New York Times, Hot Spots, Coronavirus Hots Spots from around the world (updated weekly).

17.3.3. The institution has written and approved a SARS-CoV-2 virus testing plan for unvaccinated students, faculty, staff, contractors, etc. This includes timing, location of test sites, sample collection processes, notification, and cost of testing. The plan specifies who will be tested, with what frequency, and the type of testing.

17.3.4. The institution tests frequently enough to ensure timely identification of those infected with SARS-CoV2.

17.3.5. The institution’s health function has established a process to monitor the impact of Coronavirus variants on students, faculty, and staff.

17.3.6. Health and operational leadership have determined what quarantine protocols and resource requirements are needed for returning, unvaccinated students.

17.3.7. Health and operational leadership have determined what quarantine and isolation protocols and resource requirements are needed for students that have been exposed or have contracted COVID-19.

17.3.8. Senior leadership has determined how the institution will manage the mixing of unvaccinated and vaccinated students, faculty, and staff.

17.3.9. Senior leadership and faculty department heads have determined if and how the institution will accommodate unvaccinated students who seek to attend classes remotely for either an entire academic term or when required to isolate following COVID-19 exposure.

17.3.10. Senior leadership and faculty department heads have determined if and how the institution will accommodate unvaccinated faculty and or staff who seek to work remotely.

17.3.11. Senior leadership and faculty department heads have determined if and how the institution will accommodate instructional faculty and or staff who contract COVID-19 and or need to be isolated following exposure to COVID-19.

17.3.12. For students that live on campus, leadership has determined is student housing or housing allocation be modified so that large outbreaks of COVID-19 can be prevented.

17.3.13. Senior leadership has determined if modifications to physical spaces, policies, and protocols can be put in place to reduce the risk of transmission while maintaining viability and quality of essential on-campus activities.

17.3.14. Senior leadership has identified the threshold(s) for reducing and or halting in-person activities if there is a COVID-19 outbreak/transmission. This includes identification of the threshold(s) for restarting in-person activities again.

17.3.15. Health and operations leadership has determined if and how the institution can help protect individuals (students, faculty, and staff) who are at increased risk for severe disease.
17.3.16. How will the institution ensure that policies and practices are equitably applied and do not negatively affect vulnerable individuals or other groups disproportionately?

17.3.17. How will non-compliance with policies and protective measures for COVID-19 be handled, and what protective measures will be required vs. optional?

**Vaccine Policies**

- Inside Higher Ed, The Mandate Maze, Michael J. Vernick, Molly E. Whitman and McKenzie F. Miller advise colleges on the legal issues related to vaccine mandates. May 25th, 2021
- Best Colleges, Can Colleges Make the COVID-19 Vaccine Mandatory? June 3rd, 2021
- Congressional Research Service, State and Federal Authority to Mandate COVID-19 Vaccination. April 2nd, 2021
- University Business, Why one university with vaccine mandate is requiring COVID testing. International student arrivals and the Delta variant complicate decisions. July 15, 2021
- Wall Street Journal, Covid-19 Prevention Measures Are Keeping Childhood Diseases Like Chickenpox at Bay Washing hands and disinfecting remain valuable even after the pandemic fades, doctors say, June 1, 2021.
- Wall Street Journal, Want That Job Offer? A Covid-19 Vaccine Is Now Required. Employers are starting to mandate shots before candidates are hired. It’s a new rule some managers are rolling out for existing employees, too. April 26, 2021
- University Business, Fans in the fall? 4 COVID decisions facing colleges: A new study from Seton Hall University shows that those fans are optimistic, but cautious, about attending games. May 27, 2021

**Institutions Requiring Vaccines**

- Newsweek, All the U.S. Colleges Requiring COVID Vaccines to Return to Campus in the Fall, So Far. June 16th, 2021
- Chronicle of Higher Education, Here’s a List of Colleges That Will Require Students or Employees to Be Vaccinated Against Covid-19, July 15, 2021
- University Business, State-by-state look at colleges requiring COVID-19 vaccines. Updated June 28th, 2021
- University Business, R.I. first state to have all colleges mandating COVID vaccine, Delta variant, out-of-state students still pose concerns. July 14th, 2021
University Business, Vaccine mandate or not? Fall plans at 10 universities that saw COVID spikes in 20-21 Michigan State and Wisconsin are among the many that aren’t requiring them or requiring masks. July 1, 2021


Oxford Academic, Diverse Computer Simulation Models Provide Unified Lessons on University Operation during a Pandemic. October 15th, 2021

International Students

Forbes, What International Students And U.S. Universities Need To Know. May 3rd, 2021


Forbes, Navigating Vaccine Requirements for International Students What foreign COVID vaccines should colleges accept? What protocols should be in place for international students who weren’t able to be vaccinated at home prior to coming to campus? July 6, 2021

Identifying Covid-19 Hot Spots

New York Times, Hot Spots, Coronavirus Hots Spots from around the world. (updated weekly)

New York Times, Vaccine Tracker (updated regularly)

OECD, Country education responses to the coronavirus (COVID-19) pandemic

OECD Policy Hub, Building a resilient recovery: How we can emerge stronger from the COVID-19 pandemic.

OECD Policy Responses to Coronavirus (COVID-19) OECD initiative for safe international mobility during the COVID-19 pandemic (including blueprint) May 2021

Vaccine Efficacy, Variants, & Testing

Johns Hopkins Coronavirus Resource Center Expert guidance to support response, improve care, and to save lives.


Johns Hopkins Center for Health Security, The COVID-19 Testing Toolkit

IHME, COVID-19 vaccine efficacy summary. June 4th, 2021

CDC, Largest CDC COVID-19 Vaccine Effectiveness Study in Health Workers Shows mRNA Vaccines 94% Effective. May 14th, 2021

Nature, Multitude of coronavirus variants found in the US — but the threat is unclear. March 5th, 2021

JAMA, SARS-CoV-2 Variants of Concern in the United States—Challenges and Opportunities. February 17th, 2021

18.1. Public Meetings
COVID-era has pushed institutional board meetings to be held online, which has greatly expanded access and transparency for members of the public and key stakeholders.

18.1.1. Senior leadership has determined a policy around live-streaming for college governing board meetings.

18.2. Academic Support Services
The 2020-2021 school year saw an influx of online instruction, from lectures to office hours and tutoring services. For many students, this increased access to academic resources and created a more flexible environment.

18.2.1. Faculty departments and professors determine policies on hosting virtual office hours or discussion sections in addition to or in place of in-person student assistance.

18.2.2. Campus tutoring/support services determine what portion of their staff and resources to dedicate to online instruction and services. Support services adequately communicates options to the student body.

18.2.3. The university’s IT Division determine what resources are needed to conduct virtual learning services. This may include dedicated cameras, supplies, and or rooms to support faculty, graduate students, and Teaching Assistants.

18.3. Tele-Health and Mental Health Counseling Services
The COVID-19 significantly altered the method of receiving primary medical care services, with virtual appointments increasingly common. Additionally, the pandemic increased the need for mental health and counseling services as people continue to cope with the short and long-term life changes. Colleges and universities should be cognizant of the increased need for counseling within the student, staff, and faculty bodies.

18.3.1. Senior and health leadership has determined if the institution’s health function should be equipped to provide both in-person and telehealth services.

18.3.2. Senior and health leadership have assessed if the institute’s health function has the capacity to assist an increased proportion of the student body needing/seeking mental health services.

18.4. Intercollegiate Collaborative Initiatives
The virtual learning environment incited and encouraged many colleges and universities to partner for joint events, from student events to course-sharing initiatives. Universities should consider retaining these partnered events even through the return to a post-COVID-19 university life.
18.4.1. Senior leadership has determined its approach to continuing/expanding virtual events with multi-university input and reach.

18.4.2. College consortia have determined its approach to continue/expand offering select online courses to students within the consortium and help promote and encourage intercollegiate student bonding activities.

Resources

- Georgetown University Center on Education and the Workforce, COVID-19’s Impact on Education and the Workforce, Workers and households across the country have been devastated by the economic downturn caused by the coronavirus pandemic. Multiple reports Spring 2021.

- University Business, Excited for fall: Why 98% of international students are ready to return. Even with COVID-19 still lurking and uncertainty lingering on many campuses, they see opportunities. June 30, 2021

- World Economic Forum, Is this what higher education will look like in 5 years? November 25th, 2020

- OECD, The state of education – one year into COVID, May 7, 2021

- University Business, 4 keys to integrating telehealth into medical school curriculum, Adapting medical school to prepare clinicians to participate successfully in telehealth is a necessary investment, July 12, 2021

- Forbes, 8 Reasons This Coming Year Could Be The Hardest Yet For Higher Ed, July 14 2021

- University Business, President’s message to slumping colleges: Change what you’re doing. Unity College’s Melik Peter Khoury says there is more than one way to educate. July 15, 2021

- Forbes, The Future of the Physical Campus As one university plans to sell or repurpose a million square feet of campus space, experts discuss the role of in-person education as the pandemic recedes. July 16, 2021

- Midwestern Higher Education Compact, The Digital Divide Among College Students, February 11, 2021

- Chronicle of Higher Education, How to Prepare for the Next Phase of Hybrid Teaching, Some faculty members will continue to teach online and hybrid courses this fall. Here’s what they’ll need. July 12, 2021


- Journal of AHIMA, Telehealth Helps College Students Receive Care During a Pandemic, Northwestern University’s transition to telehealth services during the COVID-19 pandemic. April 29, 2020

- Big Ten Academic Alliance, Big Ten Academic Alliance Online Course Sharing Program, online course sharing initiative launched for the 2020-2021 school year. August 3, 2020

- EdTech, Telemedicine Makes an Impact on Higher Ed Student Healthcare, June 14, 2018
- University of Arizona, How Telemedicine Services Can Help the College Student, December 10 2020

**Additional Resources For Fall 2021**

**College and University Case Tracker**
- New York Times, Tracking Coronavirus Cases at U.S. Colleges and Universities, Last updated May 26th, 2021

**General News Information**
- Center for Infectious Disease Research and Policy, University of Minnesota, COVID-19 Higher Education, The latest news and information regarding COVID-19 and higher education.

**ACE PULSE Point Surveys on Campus Presidents COVID-19 Response (Big Issues)**
- American Council for Education, College and University Presidents Respond to COVID-19: 2020 Fall Term Survey Part I. October 8th, 2020

**Existing Guidance for Higher Education**
- CDC, Considerations for Institutions of Higher Education. June 4th, 2021
- CDC, Colleges & Universities Resources and Toolkit. Last Updated Jan 14th, 2021
- ACHA, Considerations for Reopening Institutions of Higher Education for the Fall Semester 2021. May 25th, 2021

**COVID-19 University Enrollment Impact**
- National Student Clearinghouse Research Center, Regular Updates on Higher Education Enrollment. Last Updated April 29th, 2021
• Best Colleges, The Pandemic’s Impact on College Enrollment. March 10th, 2021

• Inside Higher Ed, Few Positives in Final Fall Enrollment Numbers. December 17th, 2020

• University Business, COVID-19’s dramatic impact on enrollment in just one year. December 10th, 2020

• Salesforce.org, New NACAC Report Shows Impact of COVID-19 on Enrollment. October 22nd, 2020


• OECD, The Impact of COVID-19 on Education, September 8th, 2020

• Simpson Scarborough, Higher Ed and COVID-19 National Student Survey. April 2020