

CONTAGIOUS ILLNESSES

Guidance to House Corporations Regarding Specific Communicable Diseases

For many of our facilities, our members are in close physical contact for extended periods of time. Because of this, communicable diseases and infection could spread easily within our facilities. In order to assist those who work closely with ADPi facilities, helpful information from various sources and the Centers for Disease Control (CDC) has been compiled to create this document. It should be stated as a disclaimer that the staff of Alpha Delta Pi are not medical professionals, and the information shared here does not take the place of advice a medical professional might give to an individual. This information is shared from a place of prevention and risk reduction education and is intended to provide House Corporations, other volunteers and chapter officers with guidance and practical information to prevent and limit the spread of certain infections and communicable diseases between members.

Flu

Influenza, commonly known as the "flu," is an extremely contagious respiratory illness caused by influenza A or B viruses. Flu appears most frequently in winter and early spring and attacks the body by spreading through the upper and/or lower respiratory tract. Although the common cold and flu are both contagious viral infections of the respiratory tract and symptoms can be similar, flu is much worse.

SIGNS AND SYMPTOMS

- Cough
- Feverish/chills
- Sore throat
- Difficulty breathing or shortness of breath
- Fatique
- Muscle and body aches
- Severe weakness or unsteadiness
- Worsening of chronic medical conditions

PREVENTION

Standard recommendations to prevent infection spread include:

- Avoid close contact with those who are sick
- Stay home or be isolated when sick

- Thorough and regular hand washing
- When coughing/sneezing use tissue, elbow, or mask to prevent the spread of droplets and wash hands after contact with respiratory secretions
- Avoid touching eyes, nose or mouth
- Practice other good health habits like healthy eating and a balanced diet, adequate rest and sleep, and regular exercise

BEST PRACTICES FOR THE FACILITY

- Research plans a college/university may have in place if an outbreak of flu or another illness occurs and whether flu vaccinations are offered on campus
- Clean and disinfect high touched surfaces such as counters, tabletops, doorknobs, bathroom fixtures, toilets, phones, keyboards, tablets, and bedside tables regularly.
 - Have conversations with your cleaners or cleaning company about areas to pay special attention to (i.e. doorknobs, handles, etc.)
- Ensure there is a good supply of tissues, soap, paper towels, alcohol-based hand rubs, and disposable wipes on-site
- Educate all members, volunteers and staff about flu prevention including vaccination
- Encourage good hygiene habits such as thorough handwashing and no sharing of personal items
- Keep sick members and facility staff separated from others as best as possible
 - Ask that any food service employee stay home or away from food prep if they are feeling ill
 - o Ask that ill members stay in their room, if possible
- Develop alternative plans for housekeeping and cooking services should staff become ill and are unable to work

WHAT TO DO IF A MEMBER IS INFECTED

If a member is sick with the flu, be sure the member stays secluded and avoids contact with other people except to get medical care. If possible, residential members who live relatively close to campus should return to their permanent home to seek medical care and reduce the spread of the virus to other members of the chapter. The member should wear a facemask when in public places or when around others. The CDC recommends that one remains secluded for at least 24 hours after a fever is gone. The best course of action is to encourage the drinking of clear fluids, rest, use of tissues to cover sneezes or coughs, frequent hand washing, and eating of a healthy diet.

For members who cannot leave campus or who do not have a private room, the Executive Board and House Corporation Board should consider alternative housing for ill members. Members should not stay on sleeping porches or in rooms with multiples members to minimize risk of spreading the illness to others.

If a member has symptoms of flu and may be in a high-risk group (i.e. immunocompromised), or a member is very sick or worried about a current illness, a health care provider should be contacted (doctor, physician assistant, etc.). Over the counter medications can be utilized as fever reducers or pain relievers and may be recommended by the health care provider. In addition, antiviral drugs could be prescribed and can lessen symptoms and shorten the amount of time one is sick by one or two days. Health care providers can also help in the prevention of serious flu complications, like pneumonia. To read more please visit the CDC's site (https://www.cdc.gov/flu/index.htm)

If multiple members of the chapter become ill, consider postponing large group events to minimize the spread of the illness. Excuse and strongly discourage those with obvious flu-like symptoms from attending large group events. Work with the Executive Board to review and revise, as needed, attendance policies for mandatory chapter events, including chapter meeting and recruitment events. Do not require a doctor's note to confirm illness or recovery.

Coronavirus

Coronaviruses are a large family of viruses that cause illness ranging from the common cold to more severe diseases (example: MERS and SARS), while Coronavirus Disease 2019 (COVID-19) is a new strain currently affecting the population. Common signs of infection include respiratory symptoms, fever, cough, shortness of breath and breathing difficulties. In more severe cases, infection can cause pneumonia, severe acute respiratory syndrome, kidney failure, and even death. COVID-19 is spread by:

- Person-to-person contact
- Contact with infected surfaces or objects
- Respiratory droplets produced from coughs or sneezes of an infected person in public areas

SIGNS AND SYMPTOMS

- Fever
- Cough
- Shortness of breath

PREVENTION

Standard recommendations to prevent infection spread include:

- Avoid close contact with those showing symptoms of respiratory illness such as coughing and sneezing
- Stay home or be isolated when sick
- Thorough and regular hand washing
- When coughing/sneezing use tissue or mask and wash hands after contact with respiratory secretions
- Avoid touching eyes, nose or mouth

BEST PRACTICES FOR THE FACILITY

- Research plans a college/university may have in place if an outbreak of COVID-19 occurs, including understanding what notifications need to be made to whom
- Clean and disinfect high touched surfaces such as counters, tabletops, doorknobs, bathroom fixtures, toilets, phones, keyboards, tablets, and bedside tables regularly
 - Have conversations with your cleaners or cleaning company about areas to pay special attention to (i.e. doorknobs, handles, etc.)
- When coughing/sneezing use tissue, elbow, or mask to prevent the spread of droplets and wash hands after contact with respiratory secretions
- Ensure there is a good supply of tissues, soap, paper towels, alcohol-based hand rubs, and disposable wipes on-site
- Ensure dishes, drinking glasses, cups, eating utensils, etc. (anything that may be shared) is washed thoroughly with hot soap and water
- Encourage good hygiene habits such as thorough handwashing and no sharing of personal items
- Sick individuals should have access to face masks to wear when entering common areas of the facility

WHAT TO DO IF A MEMBER IS INFECTED

If a member feels she has been in contact with someone with coronavirus or has symptoms, she needs to go to the hospital immediately for testing. Should the member test positive for COVID-19, the CDC and the local health department will conduct contact tracing which will lead back to the sorority facility (if applicable). It will be under the control of the CDC and the local health department to determine the next steps. Individuals should not be quarantined in a sorority facility, nor would it be allowed if there was a known case of COVID-19.

The decision to discontinue home isolation precautions for an infected member should be made on a case-by-case basis and in consultation with health care providers and state and local health departments. For more information please visit the CDC's site https://www.cdc.gov/coronavirus/2019-ncov/about/index.html

Should COVID-19 be present in any facility, the facility needs to be properly decontaminated prior to approved reentry. For information on certified decontamination specialists, please consult the Global Biorisk Advisory Council at: https://gbac.org/

It is strongly recommended that the House Corporation notify their Housing Resource Director, Collegiate Province Director, any Chapter Advisors, and Executive Office of an occurrence of such an illness in the facility.

Measles/Mumps

Measles is a viral respiratory illness characterized by a fever, cough, coryza, and conjunctivitis followed by a rash approximately 14 days after exposure. Patients are contagious four days before to four days after the rash appears and spreads through the air when an infected person coughs or sneezes. The measles virus can live for up to two hours in an airspace where the infected person coughed or sneezed. Measles is so contagious that if one person has it, up to 9 out of 10 people around the infected individual will also become infected if they are not protected.

Mumps is best known for the puffy cheeks and tender, swollen jaw that it causes. This is a result of swollen salivary glands under the ears on one or both sides, often referred to as parotitis. Mumps is a contagious disease also caused by a virus. It spreads through direct contact with saliva or respiratory droplets from the mouth, nose, or throat.

SIGNS AND SYMPTOMS

- High fever (may spike to more than 104°)
- Cough
- Runny nose (coryza)
- Red, watery eyes (conjunctivitis)
- Small raised bumps may also appear on top of the flat red spots
- The spots may become joined together as they spread from the head to the rest of the body

With mumps, symptoms typically appear 16-18 days after infection, but this period can range from 12–25 days after infection. Some people who get mumps have very mild symptoms (like a cold), or no symptoms at all and may not know they have the disease. You should watch for the following:

- Fever
- Headache
- Muscle aches
- Tiredness
- Loss of appetite

PREVENTION

Standard recommendations to prevent infection spread include:

- Vaccination with the measles-mumps-rubella (MMR) or the measles-mumps-rubella-varicella (MMRV) vaccines
- Stay home or be isolated when sick

- Thorough and regular hand washing
- When coughing/sneezing use tissue, elbow, or mask to prevent the spread of droplets and wash hands after contact with respiratory secretions
- Avoid sharing items that may have saliva on them, such as water bottles or cups
- Avoid participating in close-contact activities with others

BEST PRACTICES FOR THE FACILITY

- In some cases, it is recommended people get an additional vaccine dose if your health department or campus recommends it to a group during an outbreak
- Monitor campus reports for concerns of an outbreak
- Clean and disinfect high touched surfaces such as counters, tabletops, doorknobs, bathroom fixtures, toilets, phones, keyboards, tablets, and bedside tables regularly
 - Have conversations with your cleaners or cleaning company about areas to pay special attention to (i.e. doorknobs, handles, etc.)
- Ensure dishes, drinking glasses, cups, eating utensils, etc. (anything that may be shared) are washed thoroughly with hot soap and water
- Understand if members are unvaccinated and if members may be involved with communities of pockets of unvaccinated people

WHAT TO DO IF A MEMBER IS INFECTED

If a member has been identified as having measles or mumps by a medical professional, be sure the member stays secluded, including use of a separate bathroom (if available). The member should wear a face mask when in public places or when around others. It is strongly recommended that the House Corporation notify their Housing Resource Director, Collegiate Province Director, any Chapter Advisors, and Executive Office of an occurrence of such an illness in the facility.

To learn more please visit the CDC's sites for measles (https://www.cdc.gov/measles/index.html) and mumps (https://www.cdc.gov/measles/index.html).

Meningitis

Meningitis is an inflammation (swelling) of the protective membranes covering the brain and spinal cord. A bacterial or viral infection of the fluid surrounding the brain and spinal cord usually causes the swelling. However, injuries, cancer, certain drugs, and other types of infections also can cause meningitis. It is important to know the specific cause of meningitis because the treatment differs depending on the cause.

FUNGAL

Fungal meningitis is rare in the United States. It can develop after a fungus spreads from somewhere else in the body to the brain or spinal cord. Certain fungi that can cause meningitis live in the environment in such places as soil and decaying wood. People get sick if they breathe in fungal spores and the fungal infection spreads from the lungs to the brain or spinal cord. Fungal meningitis does **NOT** spread between people.

Signs and Symptoms

- Fever
- Headache
- Stiff neck

- Nausea and vomiting
- Photophobia (eyes being more sensitive to light)
- Altered mental status (confusion)

To read more please visit the CDC's site https://www.cdc.gov/meningitis/fungal.html

BACTERIAL

Bacterial (meningococcal) meningitis is very serious, can be deadly, and death can occur in as little as a few hours. While most people recover from meningitis, permanent disabilities (such as brain damage, hearing loss, and learning disabilities) can result from the infection. Certain people are at increased risk for bacterial meningitis such as those in group settings. Infectious diseases tend to spread where large groups of people gather. College campuses routinely report outbreaks of meningococcal disease.

Symptoms of bacterial meningitis can appear quickly or over several days. Typically, symptoms will develop within three to seven days after exposure. Later symptoms of bacterial meningitis can be very serious (e.g., seizures, coma). For this reason, people who think they may have meningitis should see a doctor as soon as possible.

Signs and Symptoms

- Fever
- Headache
- Stiff neck
- Nausea
- Vomiting
- Eye sensitivity to light
- Confusion

To read more please visit the CDC's site https://www.cdc.gov/meningitis/bacterial.html

VIRAL

Viral meningitis is the most common type of meningitis, is often less severe than bacterial meningitis, and most people get better on their own (without treatment). Non-polio enteroviruses are the most common cause of viral meningitis in the United States, especially from late spring to fall.

Signs and Symptoms

Initial symptoms of viral meningitis are similar to those for bacterial meningitis:

- Fever
- Headache
- Stiff neck
- Eyes sensitivity to light
- Sleepiness or trouble waking up from sleep
- Nausea
- Irritability
- Vomiting
- Lack of appetite
- Lack of energy

To read more please visit the CDC's site https://www.cdc.gov/meningitis/viral.html

PREVENTION

Standard recommendations to prevent infection spread include:

- Vaccination
- Stay home or be isolated when sick
- Thorough and regular hand washing
- Avoid participating in close-contact activities with others

BEST PRACTICES FOR THE FACILITY

- Research plans a college/university may have in place if an outbreak of meningitis occurs, including understanding what notifications need to be made to whom
- When coughing/sneezing use tissue, elbow, or mask to prevent the spread of droplets and wash hands after contact with respiratory secretions
- Monitor campus reports for concerns of an outbreak
- Avoid close contact with people who are sick
- Understand if members are unvaccinated and if members may be involved with communities of pockets of unvaccinated people
- Encourage good hygiene habits such as thorough handwashing and no sharing of personal items

WHAT TO DO IF A MEMBER INFECTED

Depending on the type of meningitis, advice for what to do for a member if she is infected varies. It is recommended the member stays secluded and avoids contact with other people except to get medical care. It is strongly recommended that the House Corporation notify their Housing Resource Director, Collegiate Province Director, any Chapter Advisors, and Executive Office of an occurrence of such an illness in the facility.

To learn more please visit the CDC's sites for Meningitis (https://www.cdc.gov/meningitis/index.html)

Helpful Handouts

You can print and share the following handouts with your facility House Director or post in the facility were visible to all staff and members.

- Cover Your Cough
 https://www.health.state.mn.us/people/cyc/cycphceng.pdf
- Wash Your Hands
 https://www.cdc.gov/handwashing/pdf/wash-your-hands-poster-english-508.pdf
- Diseases & the Vaccines that Prevent them https://www.cdc.gov/vaccines/parents/diseases/index.html

Additional Thoughts

During times of illness, members and parents may react differently from member to member and parent to parent. It should also be understood that the House Corporation does have an obligation to consider all residents in the facility, not

just the one who may be ill. While HIPAA does not apply to fraternities and sororities, confidentiality of the member infected should always be maintained. In some cases, while the member's identity may be difficult to hide due to social media of the member, the House Corporation should always work with the member and parent as to what their wishes may be. Communication to parents of an individual, to members residing in the facility, and to concerned parents that may have heard of the illness must always be carefully planned. Your Housing Resource Director and Executive Office can provide support as needed.