The Pembroke Hill School





2020-21

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During this pandemic, our top priority is our students' education and fulfilling our mission. To accomplish this, we must do all that we can to ensure the health and safety of our students, faculty and staff. Maintaining a healthy environment on our campuses will require the **collective effort** of everyone, and we ask that you **follow these guidelines on and off campus**.

As we start 2020-21, we share updated health protocols and procedures. These actions are in compliance with the latest direction from local and national health authorities. **However, as this is a rapidly evolving situation, these protocols may change.**

We must do all we can to ensure the health and safety of our students, faculty and staff.

We know the Pembroke Hill community is dedicated to having a safe and healthy school. Thank you in advance for following our safety protocols.

Office Of Infection Control

Pembroke Hill will use a team approach to managing our health response to COVID-19.

Health Impact and School Triggers Task Force

The Board-appointed Health Impact and School Triggers Task Force, co-chaired by Board president Dr. Anne Dema and Board member Dr. David Chao, is providing oversight in this effort. Other members of this task force include: Jean-Willy de Pierre, Dr. David Bamberger, Dr. Sarah Gladstone and Betsey Hughes.

Infectious Disease Consultant

Additionally, Dr. David McKinsey is serving as our infectious disease consultant to review and approve infection control protocols and school mitigation plans. He will also guide members of our infection control office in implementing these processes and responding to suspected or confirmed COVID-19 cases.

Dr. McKinsey is a seasoned Kansas City infectious disease physician with expertise in infection prevention. He received his undergraduate degree from Tulane University and his medical degree from the University of Missouri-Columbia. He completed an internal medicine residency at the University of Iowa and an infectious diseases fellowship at the University of Tennessee-Memphis.

He serves as regional medical director for Metro Infectious Disease Consultants, the largest group of infectious disease specialists in the country. Also, Dr. McKinsey is hospital epidemiologist at Research Medical Center and clinical professor of medicine at the University of Kansas. He is board certified in internal medicine and infectious diseases. He has served on the boards of several organizations regionally and nationally, has been actively engaged in medical research and education throughout his career, and has published many manuscripts and book chapters.

Dr. McKinsey has received multiple awards including the Clinician of the Year Award from the Infectious Diseases Society of America. He also serves as a consultant to colleges and businesses in the Kansas City area for COVID-19 prevention and treatment.

Office of Infection Control

Our office of infection control will implement the policies and protocols approved by Dr. McKinsey.

Dr. Sarah Gladstone, a pediatrician, Pembroke Hill parent of three students and a member of our Board's Health Impact and School Triggers Task Force since March, is currently managing our COVID response in consultation with Dr. McKinsey. Dr. Gladstone follows up with parents, students, faculty and staff to answer questions and provides announcements from the office of infection control.

Additionally, the office will be staffed by a full-time nurse and school nurse Judy Donnellan, R.N.

Other Resources

Kansas City-based MRIGlobal continues to provide important help with our emergency response and campus readiness plans.

Operation Levels

In conjunction with Dr. David McKinsey, our infectious disease consultant, and the Health Impact and School Triggers Task Force, we have developed a COVID-19 response framework. This matrix features several levels with conditions and our response. The level in which we are operating will be based on the prevalence of COVID-19 cases on campus, and in some situations, directives from local health and governmental officials.

We realize the conditions outlined in the following chart do not include numbers of cases. This is because we believe our testing program and contact tracing protocols will provide the information needed to determine if a move to a different operation level is warranted. Additionally, each situation will be different - depending on a variety of variables, such as: where positive cases are (classroom, building, campus, specific group such as an athletic team, etc.); if all health protocols were followed (everyone wearing masks, etc.); and close contacts with the individual(s) who tested positive.

We will start school at Level 3 because, at first, we will be operating at half capacity in order to give faculty and students the opportunity to learn new protocols and procedures.

Please Note: These conditions are subject to change, based on updated data and trends within our school. Specific circumstances may cause movement between levels to be different than those outlined here.

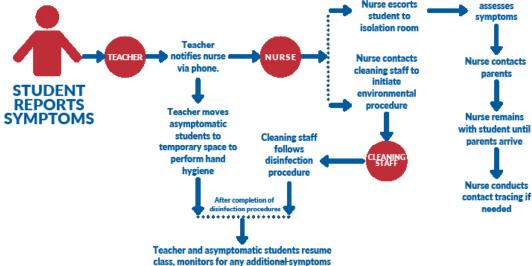
Infectious Disease Readiness and Decision Matrix

Level	Conditions	Pembroke Hill Response
0	Missouri state open Vaccine/therapeutics available.	School fully open; new normal. Student/staff vaccination requirements updated as appropriate.
1	Small number of isolated cases with no transmission at school.	School fully open with modifications. Perform contact tracing & quarantine affected students.
2	Moderate number of isolated cases Or multiple cases in a defined group, with limited transmission between students and/or staff at school.	Quarantine affected group(s), building or division as appropriate for 10 -14 days. Decontamination during quarantine time.
3	Per local/state mandate, Or based on specific circumstances as determined by office of infection control or administration	Reduced headcount in division resulting in 50/50 in-person and virtual.
4	Significant percentage of population test- ing positive for COVID, Or evidence of significant transmission between students and/or staff at school.	Close affected building, division or campus with short-term remote learning. Decontamination during closure.
5	Local authorities mandate closure Or evidence of widespread transmission between students and/or staff at school.	Close entire school. Long-term remote learning.

Protocols For COVID-19 Cases

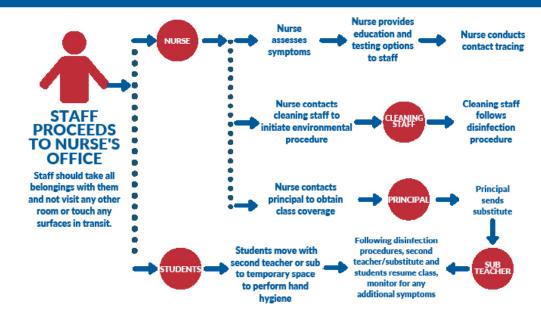
The following diagrams outline Pembroke Hill's protocols for handling suspected or confirmed cases of COVID-19.

COVID-19 Intervention Chart SYMPTOMATIC STUDENT ON CAMPUS Nurse escorts student to isolation room Nurse assesses symptoms



COVID-19 Intervention Chart

SYMPTOMATIC STAFF ON CAMPUS



Quarantine Protocols

Quarantine is used to keep someone who has been exposed to COVID-19 away from others to help prevent the spread of COVID-19. COVID-19 is caused by a virus named SARS-CoV-2. A person with COVID-19 disease may spread the virus to others prior to having symptoms. In addition, a

person may have COVID-19 disease and experience no symptoms, but can still spread the virus to others. People in quarantine should stay home, separate themselves from others, monitor their health, and follow directions from their state or local health department.

Who needs to quarantine?

- People who have been advised that they are a Close Contact of someone who has COVID-19. (**note**: people who come in contact with individuals who have had COVID-19 within the past three months and have recovered, do not need to be quarantined.)
- People who have tested positive for COVID-19, and recovered, do not need to quarantine or be tested again for up to three months as long as they do not develop symptoms again.
- People who develop symptoms again within three months of their first bout of COVID-19 may need to be tested again if there is no other cause identified for their symptoms.

A Close Contact is an individual who has:

- Been within 6 feet of an infected person for a cumulative total of 15 minutes or more over a 24-hour period starting from two days before onset of illness or positive test.
- Provided care at home to someone who is sick with COVID-19.
- Had direct physical contact with the person who has COVID-19 (e.g. hugged or kissed them).
- Shared eating or drinking utensils with a person who has COVID-19.
- Been the recipient of respiratory droplets from a person who has COVID-19 (e.g. the person sneezes or coughs on/near you).

Steps to take

- Stay home and monitor your health and symptoms.
- Stay home for 14 days after your last contact with a person who has COVID-19 and transition to the virtual learning environment.
- Watch for fever (100.4°F), cough, shortness of breath, fatigue, headache, loss of sense of smell or taste, diarrhea. If you develop any of these symptoms, contact your healthcare provider.
- If possible, stay away from others, especially people who are at higher risk for getting severe COVID-19 disease such older individuals (i.e. people over 60) and individuals with underlying health conditions (e.g. diabetes, lung disease, kidney disease, pregnant women).

For more quarantine guidelines, go to the CDC website.

Isolation Protocols

Isolation is used to separate people infected with SARS-CoV-2, the virus that causes COVID-19, from people who are not infected.

People who are in isolation should stay home until it's safe for them to be around others. In the home, anyone sick or infected should separate themselves from others by staying in a specific "sick room" or area and using a separate bathroom (if available).

Who needs to isolate?

- People who have a known positive test for COVID-19.
- People who have symptoms of COVID-19 and were instructed to isolate by their healthcare provider.

Steps to take

- Stay home except to get medical care.
- Monitor your symptoms. If you have an emergency warning sign (including trouble breathing), seek emergency medical care immediately.
- Stay in a separate room from other household members, if possible.
- Use a separate bathroom, if possible.
- Avoid contact with other members of the household and pets.
- Don't share personal household items, like cups, towels and utensils.
- Wear a mask when around other people, if you are able to.

When can I be around others?

- If you are asymptomatic, you can be with others after 10 days have passed since the date you had your positive test.
- If you have had symptoms:
 - At least 10 days since symptoms first appeared; and
 - At least 24 hours with no fever without fever-reducing medication; and
 - Other symptoms of COVID-19 are improving. (Loss of taste and smell may persist for weeks or months after recovery and need not delay the end of isolation.)

For more https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/isolation.html.

Return To Campus Protocols

These guidelines will be followed to determine when a person may return to campus after testing positive for COVID-19 or after exhibiting symptoms.

I think or know I had COVID-19, and I had symptoms.

- Contact the office of infection control, <u>infectioncontrol@pembrokehill.org</u>.
- Isolate at least 10 days after symptoms first appeared; and
- At least 24 hours with no fever without fever-reducing medication; and
- COVID-19 symptoms are improving.

I tested positive for COVID-19, but had no symptoms.

• If you continue to be symptom-free, you can be with others after 10 days have passed since the date you had your positive test.

I have had severe illness from COVID-19 (admitted to a hospital and needed oxygen).

- Your healthcare provider may recommend that you stay in isolation for longer than 10 days after your symptoms first appeared (possibly up to 20 days), and you may need to finish your period of isolation at home.
- Following hospital discharge, follow-up testing wil be determine by your healthcare provider. In general, two negative test results will be needed at least 24 hours apart to end isolation.

I have developed symptoms after testing positive.

Follow the guidance above for "I think or know I had COVID, and I had symptoms."

I have been exposed, but not exhibiting symptoms.

- Contact the office of infection control, <u>infectioncontrol@pembrokehill.org</u>.
- You will need to stay home and quarantine for 14 days after the date of your exposure to the virus. Students will need to move to the virtual learning environment.
- Quarantined students, staff and faculty who are asymptomatic will have COVID testing performed one time during their quarantine by Pembroke Hill.

I either had COVID-19 or tested positive for COVID-19, and I have a weakened immune system.

- If you have a weakened immune system (immunocompromised) due to a health condition or medication, you might need to stay home and isolate longer than 10 days. Talk to your healthcare provider for more information.
- Your healthcare provider may recommend you undergo repeat testing for COVID-19. If your healthcare provider recommends testing, you can be with others after you receive two negative test results in a row, at least 24 hours apart.
- Your doctor may work with an infectious disease expert at your local health department to determine when you can be around others.

Communication of Test Results



We will communicate aggregated results of testing to parents, faculty and staff on a weekly basis through the COVID-19 Dashboard in the Parent and Faculty/Staff Portals.

Individual results will not be shared and are considered protected health information. The office of infection control will maintain all health information. If the test results indicate that modifications need to be made to a particular classroom, building, division, campus or school-wide, then that information will also be included.

Real-time data from testing will allow us to make decisions quickly. Therefore, we ask parents to be prepared to act promptly on any decisions regarding a particular classroom, building, division, campus or school-wide.

Contact Tracing

The office of infection control will use contact tracing and evaluate the specific circumstances of a possible exposure to determine next steps. We have adopted procedures for contact tracing in the case of a laboratory-confirmed or probable COVID-19 test. Under the direction of infectious disease consultant Dr. David McKinsey, the office of infection control will follow these steps:

- Notify individuals and families of a positive COVID-19 result.
- Identify close contacts of the individual whose test was positive.
 - A Close Contact is defined as any individual:
 - Who has been within 6 feet of an infected person for a cumulative total of 15 minutes or more over a 24-hour period starting from two days before onset of illness or positive test (other mitigating factors masks/plexiglass may modify this criterion);
 - Who has provided care at home to someone who is sick with COVID-19;
 - Had direct contact with someone (hugged or kissed them) who has COVID-19;
 - Who has shared eating or drinking utensils with a person who has COVID-19; or
 - Been sneezed or coughed on or somehow gotten respiratory droplets on them.

- The close contact occurred two days before the onset of symptoms or, if asymptomatic, two days prior to collection of a positive specimen.
- Once Close Contacts have been identified, our contact tracers will notify Close Contacts who are Pembroke Hill students or staff, within 24 hours, to provide options for quarantine, symptom management.
- Close Contacts who are from the school will need to quarantine for 14 days.
- Individuals and families will be encouraged to notify any additional Close Contacts.
- All medical information will be managed by the office of infection control and will be considered protected health information. Pembroke Hill nurses will follow HIPAA regulations.

Pembroke Hill's contact tracing procedures are based on current research and CDC recommendations.

COVID-19 Testing

Pembroke Hill is conducting a mandatory testing program for all students (in-person), faculty and staff. The school's Health Impact and School Triggers Task Force has reviewed and endorsed the testing approach and program.

We believe a testing program is essential in order to hold in-person classes on campus. The test results provide important data pertaining to the prevalence of the virus in our community and inform our decisions regarding actions we may need to take to keep individuals safe within a classroom, building, division or the entire school.

Testing Partners

We are partnering with Sinochips Diagnostics (SCD) to provide weekly surveillance testing for students, faculty and staff.

Sinochips Diagnostics (SCD) is a private clinical reference laboratory operating on the campus of the University of Kansas Medical Center. Its other clients include the Wyandotte County Health Department, Vibrant Health, multiple assisted living facilities, and other safety net clinics in Kansas and Missouri.

The surveillance test is saliva-based and does not use nasopharyngeal or nasal swabs. The SCD test uses a saliva swab that is placed under the tongue.

It is unprecedented for an independent school to test 1,500 individuals weekly. Because of this, adjustments continue to be made to procedures.



Testing Procedures

SCD provides all testing supplies and protocols for sample collection. Members of our Health Impact and School Triggers Task Force and the office of infection control oversee the implementation of these protocols and the actual testing.

Tests are conducted each week, and they are processed through pooled testing, which involves testing a group of five samples together. Pooled testing allows for quicker turnaround and is more cost effective than processing each test individually. Test results are typically available within 24 to 48 hours. If a pool tests positive, the labs will run individual tests on each of the members of that pool.

Parents will ONLY be contacted by the office of infection control if the results of surveillance testing indicate a positive test, and follow-up is required. The office of infection control will provide direction on next steps in compliance with Pembroke Hill COVID-19 protocols.

Additionally, the office of infection control will initiate our contact tracing protocols in all presumptive positive cases. All testing results, along with any medical information, will be managed by this office and are considered protected health information.

Costs For Testing

Pembroke Hill will cover the cost of weekly COVID surveillance testing.

Who Will Be Tested?

Testing will be required for all students, faculty, staff and substitutes who are on campus.

Virtual-only students will not be tested. However, if a student transitions from virtual-only to the in-person learning environment, they must be tested before returning to campus.

Anyone who is exhibiting COVID-19 symptoms will not participate in weekly saliva-based testing, but should arrange for an individual test or remain home for 14 days. The PHS surveillance test program is designed to identify people who have the virus, but are asymptomatic.

Families who decline to participate in the testing program must register for the virtual-only option.



Testing Timeline

Throughout the school year, all students (in-person), faculty and staff will be tested weekly.

More Information

For questions regarding the testing program, please contact the office of infection control, infectioncontrol@pembrokehill.org.

Updated Mask Policy

The use of masks is an effective tool in limiting the spread of SARS-CoV-2, the virus that causes COVID-19. Therefore, everyone will be required to wear a mask when on our campuses. Parents on the Wornall Campus should also wear masks while in their cars when dropping off or picking up students.

Students carpooling to school are highly encouraged to wear masks while riding to school in a private car.



Based on recently released guidelines from the CDC, individuals will not be able to wear masks with valves or neck gaiters. Cloth masks are permitted, especially to encourage proper mask use by young children. However, disposable masks, especially those certified by the ASTM, are likely to have more consistent quality and are more likely to protect against particles and droplets than cloth masks.

Face coverings that will be allowed include:

- KN95 masks
- Disposable procedural masks
- Cloth masks, with at least two layers of cloth

Mask FAQs

Do masks have to be worn outside?

Masks should be worn outside if 6-feet distance from other people can not be maintained at all times.

Do athletes have to wear masks?

Yes, athletes must wear masks during practice and contests. An exception for winter sports is swimming. Swimmers must wear masks when out of the pool. Masks are to be worn in the locker room.

Why are gaiters prohibited?

Neck gaiters do not stay in place, fall off of the nose and often do not fit well.

Why can we not use masks with valves?

According to the CDC, masks with exhalation valves or vents should NOT be worn to help prevent the person wearing the mask from spreading COVID-19 to others.

Why can't I just wear a face shield instead of a mask?

A face shield is an excellent source of protection when worn with a mask. However, a face shield alone is not sufficient protection.

How do I take off my mask safely?

Masks should be taken off carefully. To remove the mask, handle only the ear loops or ties, fold outside corners together and place the mask in the washing machine (see CDC guidelines for washing cloth masks). DO NOT touch your face, mouth or nose after removing the mask until you have washed your hands.

Face coverings should:

- Fit snugly, but comfortably against the side of the face, nose, mouth and chin;
- Cover the mouth, nose and chin;
- Be secured with ties or ear loops;
- Include multiple layers of fabric; and
- Allow for breathing without restriction.

Cloth masks should be laundered after each use and machine dried without damage or change to shape.

KN95 masks and procedural masks can be reused for several days if not wet or damaged. These masks should be stored in a brown paper bag when not in use.

If removed temporarily, masks should be placed outer side down (blue-side for disposable masks) on a clean paper towel. Students should have several masks with them each day in case the masks need to be changed. Place extra clean/unused masks in a ziploc bag. We will have extra masks available for students who may have forgotten one or if their masks become damaged or soiled during the school day. Masks are also available for purchase in the Bookstore.

We realize that wearing masks will be an adjustment for students but, based on our experience with students in summer programs, they will adapt well.

For information about masks from the CDC, click HERE.

Additional Health Screenings

Everyone who comes to campus, must be prepared to answer the daily health questions. If the answer to any of these questions is Yes, contact the office of infection control.

In the last 14 days, have you:

- 1. Traveled internationally? Domestically outside of Kansas or Missouri?
- 2. Had close contact* with someone exhibiting symptoms or diagnosed with COVID-19: (fever [100.4 F or higher], dry cough, sore throat, congestion, diarrhea, nausea, headache, muscle/body aches, fatigue, runny nose, respiratory illness, labored breathing, new loss of taste or smell)?
- 3. Do you currently have signs or symptoms of COVID-19? (As listed in question #2)

Temperature Checks



Student, faculty and staff temperatures will be taken as they arrive on campus each day. All screeners are adequately trained and will have apppropriate personal protective equipment.

Students on the Wornall Campus are to remain in their cars until their temperatures have been taken.

On the Ward Parkway Campus, self-check temporal scanners will be located at each entry location.

Anyone with a temperature of 100.4 degrees or above will be asked to return home and to contact the office of infection control and their health care provider.

^{* &}quot;close contact" is defined as being within six feet of a person for at least 15 minutes, starting from two days before illness onset or two days prior to a positive COVID-19 specimen collection.

Other Health & Safety Mitigations

In addition to taking temperatures, Pembroke Hill is implementing the following mitigation measures for the 2020-21 school year:

- A mandatory testing program for all students (in-person), faculty and staff;
- Conducting temperature checks;
- Creating an office of infection control to implement health protocols;
- Requiring everyone on campus to wear masks;
- Providing personal protective equipment (PPE) for faculty and staff;
- Rearranging classrooms and offices to accommodate social distancing;
- Installing plexiglass;
- Providing sanitizing stations at each entrance, common areas and classrooms;
- Displaying visual markers and signage to remind individuals to follow safety guidelines;
- Encouraging individuals to use water refilling stations; water fountains will not be in use;
- Enhancing cleaning and sanitation procedures; and
- Improving the HVAC and installing an ionization system.



Travel

For the health and safety of our community, we ask that our families, along with faculty and staff, avoid unnecessary travel. If you must travel, please adhere to the following safety protocols:

- Wear a mask when you are in public.
- Avoid large crowds, particularly indoors.
- Stay socially distant, at least six feet from others.

- Wash and/or sanitize your hands frequently.
- Avoid public transportation.
- If you must use a commercial airline, wear a KN95 mask and eye protection, distance yourself from others on and off the plane and wash hands often.

Upon your return, contact the office of infection control, *infectioncontrol@pembrokehill.org*.

More Information

If you have questions about student health, COVID-19 or the school's health-related protocols please contact:

- The office of infection control, <u>infectioncontrol@pembrokehill.org</u>
- Infection control nurse Rachel Arrow, F.N.P., <u>rarrow@pembrokehill.org</u>
- School nurse Judy Donnellan, R.N., jdonnellan@pembrokehill.org