

Committee: Directly to Council Committee Review: N/A

Staff: Essie McGuire, Senior Legislative Analyst

Purpose: Receive briefing and have discussion - no vote expected

Keywords: Coronavirus, COVID-19, MCPS Quarantine Protocols

AGENDA ITEM #2C September 14, 2021

> Discussion Revised

SUBJECT

Briefing – MCPS Protocols for Vaccination and Quarantine Requirements

EXPECTED ATTENDEES

- Dr. Monifa McKnight, Interim Superintendent of Schools, Montgomery County Public Schools (MCPS)
- James D'Andrea, Chief of Staff, Office of the Superintendent of Schools, MCPS
- Ruschelle Reuben, Chief, Office of Teaching, Learning, and Schools, MCPS
- Eugenia Dawson, Chief, Office of Finance and Operations, MCPS
- Heather Dublinske, Coordinator, Office of Districtwide Supports and Services
- Dr. Raymond Crowel, Director, Department of Health and Human Services
- Dr. James Bridgers, Acting Chief Health Officer, Department of Health and Human Services
- · Earl Stoddard, Acting Assistant Chief Administrative Officer

COUNCIL DECISION POINTS & COMMITTEE RECOMMENDATION

• Council sitting as the Board of Health to receive updates.

DESCRIPTION/ISSUE

The County Council will receive an overview presentation from MCPS regarding the quarantine guidelines and protocols for COVID-19 cases in schools.

SUMMARY OF KEY DISCUSSION POINTS

- MCPS provided explanation and detail regarding the current quarantine guidance in a community message dated September 8, 2021. This message is attached and also at the link below: https://www.montgomeryschoolsmd.org/departments/publicinfo/community/school-year-2021-2022/Community-Update-20210908.html
- This community message included a letter from Dr. Travis Gayles, Montgomery County Health
 Officer, to Dr. McKnight, Interim Superintendent of Schools. This letter is attached and can be
 found within the community message linked above.

 The Maryland Department of Health and the Maryland State Department of Education published "P-12 School and Child Care COVID-19 Guidance", dated August 13, 2021. This document includes a decision aid for exclusion and return of individuals related to COVID-19 cases. The decision aid is attached, and is included in the full guidance document that can be found at the following link:

https://earlychildhood.marylandpublicschools.org/system/files/filedepot/3/covid guidance ful l 080420.pdf

- A process map detailing the steps for quarantine and notification following COVID-19 exposure
 or symptoms is available on the MCPS website:
 https://ww2.montgomeryschoolsmd.org/coronavirus/dashboard/positive-case-letters.aspx
- On September 7, 2021, Board of Education President Brenda Wolff wrote a letter to Montgomery County Executive Marc Elrich. This letter outlined concerns of the Board and the community regarding the extent and impact of student and staff quarantines at the beginning of the school year. The letter requested the assistance of the Department of Health and Human Services (DHHS) in clarifying the protocols required for quarantine; increased COVID-19 testing in schools and school health rooms; additional support for contact tracing; and allowing students and staff to return to school with negative tests prior to the recommended quarantine period.
- On September 10, County Executive Marc Elrich responded to Board of Education President Wolff. The County Executive's letter outlined many of the steps that DHHS and MCPS have been working together to implement regarding increased testing, increased support for contact tracing, and other possible improvements to the testing and quarantining protocols.
- The Board of Education met on Thursday, September 9, 2021, and received an update on the health planning processes in MCPS, including the quarantine experience in the opening weeks of school, the screening testing program that will be implemented for grades Pre-Kindergarten through sixth grade, and plans to provide continuity of instruction for students in quarantine. The September 9 presentation materials are attached for information.
- The Maryland Department of Health and the Maryland State Department of Education have made testing kits and materials available to local school systems to support testing programs in schools. These departments issued a "K-12 COVID-19 Testing Program Guidebook" that provides additional overview information about the testing program and requirements. The version of the guidebook updated on June 30, 2021, can be found at the link below:

https://health.maryland.gov/phpa/Documents/K-12%20COVID-19%20Testing%20Guidebook%20v2.pdf

This report contains:

September 8, 2021 Community message from

MCPS Interim Superintendent Dr. McKnight

September 8, 2021 letter from Dr. Gayles to Dr. McKnight

© #3-4

MDH/MSDE Decision Aid

September 7, 2021 letter from Montgomery County Board of Education

President Brenda Wolff to County Executive Marc Elrich © #7-8

September 10, 2021 letter from County Executive Marc Elrich

to Montgomery County Board of Education President Brenda Wolff © #9-12

September 9, 2021 MCPS presentation to the

Montgomery County Board of Education, "Health Contingency Plan" © #13-28

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Maryland's Largest School District

MONTGOMERY COUNTY PUBLIC SCHOOLS

Expanding Opportunity and Unleashing Potential

English / español



SEPTEMBER 8, 2021

Dear MCPS Community:

The September 3 communication regarding updated guidance about quarantining students in close contact with an individual who displays COVID-19 symptoms has raised concerns and further questions. I would like to provide additional information about this guidance, as well as share some new information about tools that will help us minimize the number of students who need to quarantine. Attached is a <u>letter from Dr. Travis Gayles</u>, Montgomery County Health Officer. Following are some of the major points regarding our prevention strategies.

MCPS follows guidance from the Montgomery County Department of Health and Human Services (DHHS).

The Maryland Department of Health and the Maryland State Department of Education, using recommendations from the CDC, provide guidance to assist local school districts but advise schools to "work with local health departments to determine the layered prevention strategies needed in their area to protect students/children, teachers, and staff." The deference to local health departments was outlined in the August 13, 2021, guidance issued by the state agencies where they "strongly recommend" that schools work with their local health departments because decisions about prevention strategies "should be informed by monitoring levels of community transmission, COVID-19 vaccine coverage, use of screening testing to detect cases in K-12 schools, ages of children served, and the associated factors that may impact the risk of transmission and feasibility of different prevention strategies."

In developing its COVID-19 safety and health protocols, MCPS has relied on recommendations provided by federal and state agencies, but ultimately follows guidance provided by DHHS, the agency assessing every local COVID-19 case in our community.

The decision to quarantine close contacts of a student with COVID-19 symptoms was made pursuant to DHHS guidance.

While DHHS follows state guidelines, it takes a different position with respect to one area referenced in the state's August 13 guidance. Specifically, Dr. Travis Gayles, Montgomery County Chief Health Officer, states that "our guidance differs with the state guidance for one category—persons with symptoms, no negative test result, no alternative diagnosis to explain symptoms, and no known COVID-contact history."

MCPS' decision to quarantine close contacts of a student with COVID-19 symptoms was based on guidance from our local health department. While the state guidance does not require these students to quarantine until a positive test result is obtained, DHHS advises a different strategy for that category of students. As Dr. Gayles states, "locally, we have

asked students who have been identified as close contacts to those cases to quarantine pending a negative test result from the index case; the local decision was made based upon concerns related to the increased contagiousness of variable COVID strains, and the percentage of students who are not yet eligible to be vaccinated."

New tools will help to reduce quarantining.

MCPS will be receiving rapid tests for every school from both the state and county by the end of next week. The use of these tests, in conjunction with the other safety measures we have in place, will hopefully help us keep more students in school. We will be receiving further guidance from DHHS on the implementation of this rapid testing program and will provide information to you as quickly as possible.

MCPS will continue to adjust protocols based on DHHS guidance.

We have all experienced the dynamic nature of this pandemic and the need to pivot based on what health officials learn and the trends that they observe in schools and communities. DHHS has committed to continue to "monitor epidemiologic and surveillance data to tweak the approach" to quarantining students. In addition, Dr. Gayles shared that DHHS has implemented a review of its staff's administration of the guidance around quarantines to ensure it is universally applied and that they will continue working closely with MCPS staff to better identify close contacts that meet the CDC guidelines.

MCPS is committed to finding innovative solutions to create distance among students at schools and we commend our principals for their work in doing this. We are encouraging teachers to continue using creative strategies in the classroom that help students physically distance and to continue to be mindful of groups of students working together. Our efforts can minimize the number of students who need to quarantine.

Prevention strategies continue to be key in reducing the number of quarantined students.

Our top priority is to keep schools open and ensure that students and staff are safe. All the prevention strategies we have put in place will help us to minimize disruption to learning. Vaccinations, masks, handwashing, maximizing the use of outdoor spaces, and staying home when sick can help reduce transmission of COVID-19.

We appreciate our partnership with DHHS and other county agencies in developing prevention strategies that meet the needs of our community. Thank you for your patience, understanding, and flexibility through these difficult times. By continuing to work together, we will keep our doors open with our students learning in-school five days a week.

Sincerely,

Monifa B. McKnight, Ed.D.

Interim Superintendent of Schools

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212



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Marc Elrich

County Executive

Raymond L. Crowel, Psy.D. *Director*

September 8, 2021

Dr. Monifa McKnight Interim Superintendent Montgomery County Public Schools 850 Hungerford Drive Rockville, Maryland 20850

Dear Dr. McKnight:

Investigations into potential COVID-19 cases in Montgomery County Public Schools (MCPS) are conducted by the clinical staff in Montgomery County's Department of Health and Human Services' (DHHS) Disease Control unit. As part of each investigation our team reviews the concerning symptoms, exposure history, and any other relevant illness history to determine if there are other factors or diagnoses which might explain a student's symptoms. This is done in order to ascertain the risk the symptomatic individual poses to others and to provide further guidance to the patient and other individuals who may have been exposed. Our staff then works closely with MCPS staff to identify close contacts and provide guidance on any further actions these individuals should take, including potential quarantining.

Every prospective COVID-19 case in MCPS is evaluated by our staff using the <u>P-12 School and Child Care COVID-19 Guidance</u> (State Guidance) issued by the Maryland State Department of Education and Maryland Department of Health (MDH) and the information, knowledge, and experience we have gained throughout the course of countless contact tracing investigations during this pandemic. Our guidance differs with the State Guidance in only one area: what to do with students who have been in close contact ("close contact students") with a symptomatic student who has no negative COVID-19 test result, no known COVID-19 contact history, and no alternative diagnosis to explain their symptoms.

The State Guidance does not require close contact students to quarantine pending the results of the symptomatic student's COVID-19 test results.

It is the County's guidance that the close contact students should quarantine pending a negative test result from that individual. This guidance is based in part upon the increased contagiousness of variable COVID-19 strains and the percentage of students who are not yet eligible to be vaccinated. We are in the process of training our staff on this guidance to ensure that it is uniformly applied throughout MCPS.

Public Health Services

Dr. Monifa McKnight September 8, 2021 Page 2

In addition, our school health team is working closely with MCPS staff to better identify close contacts pursuant to the Center for Disease Control and Prevention definition for <u>close contacts in school settings</u>. We will continue to monitor epidemiologic and surveillance data and amend this approach as needed.

Additionally, DHHS, along with MDH, will be providing every MCPS school with access to rapid COVID-19 testing. The use of this testing platform, in conjunction with all the other safety protocols in place, will help to keep more students in school and minimize the number in quarantine. More specific details about the implementation of the rapid test program will be forthcoming.

Sincerely,

Travis A. Gayles
Travis A. Gayles, M.D., Ph.D.

Montgomery County Health Officer

TG:ss

cc: Raymond L. Crowel, Psy.D., Director James C. Bridgers, Jr., Ph.D., M.B.A., Deputy Health Officer

Decision Aid: Exclusion and Return for Persons with COVID-19 Symptoms and Close Contacts in Child Care, Schools, and Youth Camps

For the purposes of this decision aid, **COVID-19 symptoms** are any ONE of the following: fever of 100.4° or higher, sore throat, cough, difficulty breathing, diarrhea or vomiting, new onset of severe headache (especially with fever), or new loss of taste or smell. For persons with chronic conditions such as asthma, the symptoms should represent a change from baseline.

Exclude all persons (child, care provider, educator, other staff) with COVID-19 symptoms and recommend evaluation by a health care provider and testing for COVID-19 ¹	Recommendations for the person with symptoms who is NOT FULLY VACCINATED Individuals are fully vaccinated 2 weeks after receiving either 1) both doses of a 2-dose vaccine series or 2) a single dose vaccine.	Recommendations for <u>close contacts</u> of the person with symptoms
Person has symptoms and positive test for COVID-19 or clinical diagnosis of COVID-19	May return when it has been at least 10 days since symptoms first appeared AND no fever for at least 24 hours without fever-reducing medication AND improvement of other symptoms.	All close contacts should quarantine according to MDH and local guidance except those who are fully vaccinated ² OR have been infected with COVID-19 in the past 90 days AND are asymptomatic.
Person has symptoms and negative test for COVID-19	If no known exposure, may return when symptoms have improved, no fever for 24 hours without fever-reducing medication, AND applicable criteria in the Communicable Diseases Summary have been met. If known exposure, may return when quarantine completed according to	Close contacts do not need to quarantine.
Person has symptoms and health care provider documents symptoms are due to a specific alternative diagnosis (ex. strep throat, otitis media, pre-existing condition such as asthma)	MDH and local guidance. If no known exposure, may return when symptoms have improved, no fever for at least 24 hours without fever-reducing medication, AND applicable criteria in the Communicable Diseases Summary have been met. If known exposure, may return when quarantine completed according to MDH and local guidance.	Close contacts do not need to quarantine.
Person has symptoms with no negative test for COVID-19 AND no specific alternative diagnosis	If no known exposure, may return when it has been at least 10 days since symptoms first appeared AND no fever for at least 24 hours without fever-reducing medication AND improvement of other symptoms.	Household members ³ should not attend or work in a child care, school, or youth camp until the person with symptoms is able to return <i>except</i> those who are fully vaccinated OR have been infected with COVID-19 in the past 90 days AND are asymptomatic.
	If known exposure, may return when it has been at least 10 days since symptoms first appeared AND no fever for at least 24 hours without fever-reducing medication AND improvement of other symptoms.	All close contacts should quarantine according to MDH and local guidance <i>except</i> those who are fully vaccinated ² OR have been infected with COVID-19 in the past 90 days AND are asymptomatic.

¹For persons with symptoms who were previously infected with COVID-19 and recovered, follow <u>CDC guidance</u>.

²Fully vaccinated persons who are exposed to someone with COVID-19 should follow <u>CDC guidance</u>.

³These persons should not be reported to the local health department as contacts. The child care, school, or youth camp should inform the household members of these recommendations.

(5)

Decision Aid: Exclusion and Return for Persons with COVID-19 Symptoms and Close Contacts in Child Care, Schools, and Youth Camps

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Person has symptoms and health care provider documents symptoms are due to a specific alternative diagnosis (ex. strep throat, otitis media, pre-existing condition such as asthma)	May return when symptoms have improved, no fever for at least 24 hours without fever-reducing medication, AND applicable criteria in the Communicable Diseases Summary have been met.	Close contacts do not need to quarantine.
Person has symptoms and no negative test for COVID-19 AND no specific alternative diagnosis	If no known exposure, may return when symptoms have improved, no fever for 24 hours without fever-reducing medication, AND applicable criteria in the Communicable Diseases Summary have been met. Person should have written health care provider assessment that COVID-19 testing is not indicated and risk of COVID-19 is low.	Close contacts do not need to quarantine.
	If known exposure, may return when it has been at least 10 days since symptoms first appeared AND no fever for at least 24 hours without fever-reducing medication AND improvement of other symptoms.	All close contacts should quarantine according to MDH and local guidance <i>except</i> those who are fully vaccinated ² OR have been infected with COVID-19 in the past 90 days AND are asymptomatic.

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MONTGOMERY COUNTY BOARD OF EDUCATION

850 Hungerford Drive ◆ Room 123 ◆ Rockville, Maryland 20850

September 7, 2021



The Honorable Marc Elrich, County Executive Executive Office Building 101 Monroe Street, 2nd Floor Rockville, Maryland 20850

Dear Mr. Elrich:

We deeply appreciate the productive partnership we have shared during the course of this pandemic. In light of our constructive working relationship, the members of the Montgomery County Board of Education respectfully request your support in urgently providing the resources and guidance we need to enable us to effectively provide in-person instruction for all of our students. It is imperative that we keep students in schools and avoid excessive quarantining that may disrupt the continuity of their education. It is our understanding that staff from the Department of Health and Montgomery County Public Schools (MCPS) staff have been meeting regularly to plan for the start of the school year, however, it is urgent that we have all of the measures in place that will support in-person instruction for our students. Therefore, we are asking for your direct involvement.

As you are aware, MCPS began this school year on August 30, 2021, with in-person instruction, five days per week for all students. Under the current direction of the Montgomery County Department of Health and Human Services (DHHS), excessive numbers of our students were quarantined during this first week of school. This could have been avoided with testing in schools. We understand that other states, such as Massachusetts in order to prioritize students getting back to the classroom as soon as possible, allow negative COVID-19-tested students to return to school prior to the recommended quarantine period. This method is called the "test-to-stay" approach and requires school health personnel to process the negative test results. Additionally, we understand that some jurisdictions have opted to use the rapid COVID-19 test as a component of their strategy to minimize disruption to in-person learning. We would like to add both of these tools to our approach in order to mitigate risk and prioritize in-person instruction. We know that you have heard the urgent requests from parents and other community members to ensure that we provide clear guidance and appropriate health and safety measures as we strive to prioritize keeping our students in schools.

To that end, we ask that you provide the following:

- 1) written clarification of quarantine protocols;
- 2) in-school health room COVID-19 testing;
- 3) additional support for contact tracing;
- 4) Rapid COVID-19 tests; and
- 5) "Test to Stay" for students that receive a negative COVID-19 test

We all can agree that our students need the in-person experience with educators to fully access their educational opportunities. Our youngest learners and our most vulnerable learners are in particular need of in-person interactions with educators. However, this is also the population of students who will be most impacted by the requirement to quarantine because our elementary students are not eligible for COVID-19 vaccinations.

Our role has been and continues to be prioritizing student learning. We are relying on the DHHS health care staff in our buildings to mitigate risk and support in-person learning. We value our partnership with DHHS, and we know that county leaders are working to provide clear guidance, meet community needs, and make difficult decisions. We ask for urgency to get these measures implemented. We appreciate your continued partnership and advocacy to help our students access quality in-person education.

Thank you for your support for all of the students, families, and educators in Montgomery County.

Sincerely

Brenda Wolff President

Brenda Worff

BW:lsh

Copy to:

Members of the County Council Members of the Board of Education Dr. McKnight Mr. D'Andrea Ms. Webb



OFFICES OF THE COUNTY EXECUTIVE

Marc Elrich
County Executive

September 10, 2021

The Honorable Brenda Wolff, President Montgomery County Board of Education 850 Hungerford Drive, Room 123 Rockville, Maryland 20850

Dear President Wolff,

Thank you for your letter regarding the policy and resources needed to enable MCPS to provide effective in-person instruction during the on-going COVID-19 pandemic. I too deeply appreciate the more than 18 months of partnership with MCPS in addressing COVID-19. I was also pleased to quickly respond to the recent request to help identify additional solutions to effectively provide as much in-person instruction as possible for students. As you may know, as soon as we were contacted during the first week of school, I have been working directly with Superintendent Dr. Monifa McKnight and parents, and my staff has been working with school system staff on a variety of issues related to school protocols on testing and what happens in health rooms. I also asked the County's Office of Procurement to help find a scalable and sustainable supply of rapid and PCR tests kits; I am pleased that they were able to provide some guidance and support to your Department of Materials Management.

We have now worked with MCPS to identify rapid test kits for students who go to the health room with symptoms that might indicate a COVID-19 infection. These students can be tested and get results within about 15 minutes, and we believe this will be an enormous help to determining whether "close contacts" to the child should be sent home. The rapid tests are about 97 percent accurate so the vast majority of the test results will be accurate and resolved quickly. As you know, a positive test on the rapid test will be followed up by a PCR test and, generally, results will be available within two-to-three days. I'm glad that every school will have

access to rapid tests beginning next week.

As a former teacher, I understand how disruptive it can be to send children home for quarantine. I also know that back-to-school is always a huge logistical challenge. This year, it is unprecedented. In fact, schools everywhere are struggling with how to manage prevention combined with as much education as possible. It was remarkable that out of more than 160,000 students, only about 1,000 were sent home the first week. School systems one-quarter the size of MCPS sent home almost as many students.

While I am committed to providing this and other supports, I want to point out a few things regarding the current testing situation. Below is from the 7/23/21 memo that was sent by jointly by the State Maryland Department of Health (MDH) and the State Department of Education (MSDE):

"According to CDC guidance, schools should consider the use of screening testing as part of a layered prevention approach. Screening testing can help promptly identify and isolate cases, quarantine those who may have been exposed to COVID-19 and are not fully vaccinated and identify clusters to reduce the risk to in-person education. Screening testing may be most valuable in areas with substantial or high community transmission levels, in areas with low vaccination coverage, and in schools where other prevention strategies are not implemented. The use of diagnostic testing in the school setting should also be considered; at minimum, schools and childcare programs should offer referrals to diagnostic testing for any student/child, teacher, or staff person who develops symptoms of COVID-19 at school or childcare and to any identified close contacts in the school or child care setting. MDH and MSDE have grant support to offer screening and diagnostic testing services in K-12 schools. Schools interested in onsite testing operations should contact the MDH COVID-19 Testing Task Force and see this information before August 9, 2021. Schools should refer to CDC guidance for specific testing recommendations when crafting their testing plans." (https://health.maryland.gov/phpa/Documents/07.23.2021%20MDH%20MSDE %20School%20Childcare%20Guidance%20FINAL.pdf pg.2)

The guidance makes it clear that MCPS was to contact the State for ordering tests by August 9. I'm not clear on whether MCPS contacted the State and how many tests were requested, but in reading Health and Safety Procedure that is available to parents, this is how MCPS describes the testing program:

"MCPS is committed to providing students and staff with access to COVID-19 testing. Parents of students in grades preK-6 will have the option for their students to opt-in to a school-based testing program whereby a random sample of students in grades preK-6 will be selected and tested on a weekly basis. Details will be shared with families at the beginning of the school year. In addition, MCPS works with the Department of Health

and Human Services to connect students with the County's free network of COVID-19 testing should students develop symptoms or be exposed to someone who has tested positive for COVID-19." https://www.montgomeryschoolsmd.org/reopening2021/

This describes the MCPS pool testing program for grades preK-6 and intends to send others to existing DHHS options for PCR or another testing. I believe this reflects the range of tests that MCPS requested through the joint MSDE/MDH through their testing guidebook. However, the first week of school has made clear that the above mentioned range of testing options is insufficient. I am glad we were able to help identify additional testing strategies.

Even as we account for where we are, our shared emphasis should be on improving the process to effectively decrease the need for excessive quarantines while maintaining the high health and safety standards that parents expect. To be clear, we all agree must effectively reduce both over-quarantining AND under-quarantining to keep children, staff, and educators safe. In my view, there are several key steps to achieving this goal:

- 1. Rapid tests need to be available for all students experiencing COVID-19-like illness as soon as possible. I am glad that the supply is now available.
- 2. DHHS contact tracers need to continue to provide ongoing guidance to MCPS staff and educators on effective contact identification processes to reduce overly broad contact identifications by MCPS staff.
- 3. MCPS staff must improve their accounting of student placement and activities to reduce close contact network size, emphasize distancing during lunch times, increase use of outdoor eating spaces, and eliminate activities that force reduced distancing or increase comingling (ex: carpet time in elementary schools).
- 4. MCPS should review its options for consenting processes (Opt-in vs. Opt-out) to ensure that the full range of testing options can be maximally leveraged to identify those who have COVID-19 and the appropriate corresponding close contacts.
- 5. DHHS will seek guidance from MDH on the "Test to Stay" model being employed in other states. "Test to Stay" would allow asymptomatic close contacts of someone who is Covid positive to remain in the classroom as long as they are rapid tested during their quarantine period. As this would be a less restrictive change to the joint MSDE/MDH quarantining guidelines, I believe consultation with the State is necessary.
- 6. I have directed DHHS to establish a process and vendor for rapid (< 24 hour) turnaround of the follow-up PCR tests that are used to confirm the rapid tests.

At the end of the day, despite all the challenges, more than 160,000 MCPS students and roughly 20,000 staff and faculty had a mostly normal first week of school. We should also recognize that what was achieved in the middle of a pandemic, particularly given the transmissibility of the Delta variant, was significant. I believe we can and will continue to do better, but our

performance relies on our partnership. I know we are all working as hard as we can to keep students, teachers, staff, and families as safe as possible and hope we remain focused on that goal.

Sincerely

Marc Elrich, County Executive

cc. County Council

Dr. Monifa B. McKnight, Interim Superintendent of Schools

Health Contingency Plan

Montgomery County Board of Education September 9, 2021

Outline for Today

- 1. Health Contingency Planning
 - a. Quarantine Plan Update
 - b. COVID-19 Screening
 - c. Hybrid Model Update



Quarantine Guidance Updated

Revised guidelines for student quarantine:

- Applies to unvaccinated students and staff (or vaccinated with symptoms)
- Close contact with an individual with a single COVID symptom
 - Fever of 100.4 or higher
 - Cough
 - Sore throat
 - Difficulty breathing
 - Vomiting and diarrhea
 - New onset of severe headache
 - New onset of loss of taste or smell
- May return if the suspected case is negative
- In the absence of negative COVID test, or alternate diagnosis, all students will be required to quarantine for the full 10 days.

Quarantine Numbers

Overall Statistics First Week of School (August 30 – September 3, 2021)

- Positive cases: 44
- Students sent home with COVID-19 symptoms: 55
- Contacts in quarantine: 1,682
 - 884 students in quarantine due to close contact with a confirmed positive case
- Total students currently home due to COVID-related absences as of September 3: 1,781

On-Site Symptomatic Testing

- DHHS and SHS will support on-site rapid testing
- MCPS has ordered 1,000 boxes of tests from MDSE
- DHHS has in-stock supply of tests to distribute to schools
- On-site testing can begin as early as next week
- Will reduce students in quarantine by immediately identifying results of symptomatic students

Quarantine Instructional Plan Update

Elementary Schools:

- live instruction
- independent work
- off screen breaks

Secondary Schools:

- access to materials
- check-ins/instructional support with each teacher daily

Well-Being Teams:

engaging with and supporting students in quarantine

Quarantine Plan Next Steps

- Greater than anticipated student counts
- Revisit instructional models and explore additional approaches at the elementary level

Quarantine: A School's Experience Ashburton Elementary School Mr. Gregory C. Mullenholz, principal

- Team Approach
- Mitigation Strategies
 - Masks, Outdoor Lunch, Spreading Out, Health Room Consults, Assigned Seating
- Coordination with Heather Dublinske and DHHS
 - Triage of Students
 - Contact Tracing
- Parent/guardian, Student and Community Communications
- Ensuring Continuity of Instruction
 - Individual vs. Whole Class

Screening Test for Grades Pre-K-6

MCPS has selected state-approved testing contractor- CIAN Diagnostics (Frederick, Maryland) to provide asymptomatic COVID testing. Phase 1 of the program will begin in 50+ schools the week of September 13.

- CIAN Diagnostics will complete individualized site assessments of each school prior to the start of testing
- CIAN Diagnostics will provide testing supplies, testing teams,
 and the processing lab for these low nasal PCR tests
- Schools will test the same day weekly
- Individual test results will be available 24–36 hours after samples are collected

Screening Test for Pre-K-6 Grade

MCPS continues to encourage families to opt-in by completing the consent forms. We have advertised in texts, emails, and ConnectEd calls. The consent form, other details, and a Frequently Asked Questions are available on the MCPS website.

- As of Wednesday, September 8th (our priority deadline) MCPS has received consent forms for 23,237 students
- In coming weeks, schools will share information about their testing start date and recurring day with their communities
- No pools are required for weekly testing to occur
- CIAN will work with schools to determine a consistent percentage of students to test weekly, that will provide equal opportunities for all consenting students.

DISCUSSION

Hybrid Model Planning

Planning: If directed by MSDE, readiness to shift to a hybrid in-person model.

Analysis of Individual School Factors

- Student enrollment/teaching space/staffing/class size
- Ratio modeling for feasibility (15:1 vs. 18:1)
- Rotations (3-day/2-day vs. Week A/Week B)

Proactive Collaboration/Preparation

 Communication and collaboration with a wide range of stakeholder groups

Elementary Hybrid 15:1 vs. 18:1

15:1 Student to Teacher Ratio

18:1 Student to Teacher Ratio

Space

Cannot uniformly serve all students

Pre-Kindergarten through Grade 2, 5 days per week.

Staffing/Class Size

Many schools cannot serve all Pre-Kindergarten through Grade 2 students, 5 days per week, with only a **few** Title I and Focus Schools being able to extend to Grade 3, 5 days per week.

Rotations

All Non-Focus Schools would require rotations in Grades 3–5, with **some** Title I and Focus schools able to serve students through rotations in Grade 4 and Grade 5 only.

Space

Can uniformly serve all students Pre-Kindergarten through Grade 2, 5 days per week.

Staffing/Class Size

Most schools can serve all Pre-Kindergarten through Grade 2 students, 5 days per week, with **all** Title I and Focus Schools being able to extend to Grade 3, 5 days per week.

Rotations

All Non-Focus schools would require rotations in grades 3–5, with **all** Title I and Focus schools able to serve students through rotations in Grade 4 and Grade 5 only.

Secondary Hybrid Model

School leadership teams develop an alternating Hybrid A/B Day schedule to facilitate in-person and virtual cohorts

- Feedback supports 2-day/3-day, alternating week rotation
- Canvas is utilized as the learning platform for all students, both in-person and virtual, to maintain connection to content and materials.

5 Days Per Week In-Person Learning

- All students that receive special education services
- All Level I and Level II ESOL Students
- All students in the primary grade levels (Grades Pre-Kindergarten-2)
- Grade 6 Students
- Grade 9 Students
- Grade 12 Students at risk of not graduating

DISCUSSION