



STJES FALL PLAN, 2021 REVISED SEPTEMBER 17, 2021

The emergence of COVID-19 has forced St. John's, like other schools around the world, to reevaluate nearly every aspect of our educational practices. As we plan for the start of school, our top priority is the safety of our students, faculty and staff. We have enacted a number of protocols to reduce the risks to our community.

Our planning has been guided by the STJES Medical Advisory Board, the [Centers for Disease Control](#) and Prevention, the [American Academy of Pediatrics](#), and the Maryland Department of Health.

Due to the novel nature of COVID-19, we are learning more about the virus every day, and expert guidance about best practices has continued to evolve accordingly. Therefore, these protocols are subject to change. We will promptly communicate any changes to these policies with the community. However, it is important for community members to appreciate that there are no strategies that can eliminate transmission risk entirely. These policies are designed to help keep risk of transmission as low as possible among our community, while keeping students as engaged in the learning process as possible.

Our understanding of this global pandemic continues to evolve daily, thus this plan represents our current plans based on current conditions. This plan outlines our guiding principles; scenarios; resources; health, safety and risk mitigation; social and emotional well-being of life on campus and community expectations.

GUIDING PRINCIPLES

Guiding principles that we are using to make decisions about the 2021-2022 school year:

- We will deliver on our promise of an excellent educational program for our students, with a commitment to rigorous academics, sound character and enduring faith.
- We will prioritize the safety of all members of our community by ensuring that we are mitigating risk in uncertain times.
- We will provide the opportunity for students to learn on campus to the extent possible recognizing that in-person learning is the preferred learning environment for children.
- We will ensure that our plan remains flexible in order to provide for the least disruptive experience possible no matter the variables.
- We will ensure that the school maintains financial sustainability.

CHALLENGES

There are many challenges with developing a robust plan in these times. We recognize that public health guidance has shifted and has been, at times, contradictory, which is why we are consulting a wide variety of resources and experts to make decisions. We also face the challenge of balancing our obligation to support the physical and social-emotional well-being of adults and children with the goal of providing in-person learning opportunities for our students. We know that the developmental needs of our students from pre-K through 8th grade are different; therefore, we must design programs that can meet those needs to the best of our ability.

ASSETS

The St. John's Medical Advisory Board (MAB) has been our greatest asset in navigating the pandemic over the last year. The MAB will continue to monitor the situation as it unfolds, and has made recommendations based on community, local and national public health data as well as experts in child development and health.

NORVELL (VAN) COOTS M.D., MSS, FAAD, BRIGADIER GENERAL, U.S. ARMY, RETIRED, (STJES PARENT)

Dr. Coots is the president and CEO of Holy Cross Health and president and CEO of the Maryland Region of Trinity Health. He is a retired Brigadier General, former Commanding General and CEO of Regional Health Command Europe, and Command Surgeon, U.S. Army Europe and Seventh Army. He is a board certified dermatologist, trained in disaster medicine, and has served as a member of the Governor's Covid19 task force.

RICARDO D. LAGRANGE, PH.D., M.P.H. (CURRENT STJES PARENT)

Dr. LaGrange is a Licensed Psychologist, behavioral scientist, and public health specialist. He is co-founder of BASICS Group Practice, a private mental health practice in the Washington, D.C. area that provides comprehensive psychological services to children, adolescents, and adults, along with a host of other community-based health and wellness programs that drive social progress. Dr. LaGrange is currently the Vice President, US Health for *ideas42*, a non-profit consulting agency that uses insights from behavioral science to improve lives, build better systems and policies, and drive social change.

CHARLES E. MCQUEEN M.D. (ST. JOHN'S EPISCOPAL CHURCH MEMBER)

Dr. McQueen is a board certified physician in gastroenterology and internal medicine. Retired from the U.S. Army after serving in a variety of positions that included patient care in the gastroenterology clinic at Walter Reed National Military Medical Center and as commander of the Walter Reed Army Institute of Research. Member of Saint John's Church and the board of African Palms. Dr. McQueen currently serves as volunteer faculty at the Uniformed Services University of the Health Sciences, on monitoring boards at the National Institutes of Health, and at the Smithsonian Institution.

AUTUMN RICHARDS, MD. (CURRENT STJES PARENT)

Dr. Richards is a board-certified pediatrician serving as the Quality Deputy Director for Medicine (QDDM) at Walter Reed National Military Medical Center (WRNMMC). After growing up near Los Angeles, CA, she graduated magna cum laude from Washington University in St. Louis with degrees in Biomedical Engineering and Spanish. She earned her commission in the United States Army in 2001 through the Army Reserve Officer's Training Corps (ROTC), and completed medical school at the Uniformed Services University of Health Sciences (USUHS) in 2005. She completed her Pediatric Residency at the National Capital Consortium Pediatrics Residency Program in 2008.

RESOURCES GUIDING DECISION-MAKING

The sources of information for how to approach educating our children during this pandemic are endless and ever-evolving. We are consulting a wide variety of resources to ensure that our plans for 2020-21 are informed and grounded in science, data, and best practices.

The following resources have been useful in our planning:

- Public health guidance from the [Centers for Disease Control](#), the [American Academy of Pediatrics](#) and the [Harvard School of Public Health](#).
- Guidance from local jurisdictional bodies, including Maryland Department of Health.
- Other schools' experiences, particularly our peer schools in the DMV area.
- Independent and public school colleagues around the nation, including those in the Association of Independent Schools of Greater Washington (AISGW) and the National Association of Independent Schools (NAIS) and our accrediting body, Association of Independent Maryland and DC Schools (AIMS).

HEALTH, SAFETY, AND RISK MITIGATION

We are taking a comprehensive, layered approach to health and safety and we continue to develop policies and protocols which will be updated as new information becomes available. In general, we are employing aggressive and multifaceted risk-mitigation strategies which include:

- Requiring vaccination among eligible teachers and staff, and encouraging vaccination for eligible students
- Requiring consistent and correct mask use
- Encouraging reasonable physical distancing
- Emphasizing hand washing
- Insisting that students and employees stay home when they feel unwell
- Directing traffic flow in and out of the building
- Maintaining cohorting by grades - PreK, Kindergarten-Grade 4, and Grades 5-8
- Cleaning throughout the school day
- Providing enhanced ventilation
- Providing more outdoor opportunities for instruction and breaks.

VACCINATION

The best defense against the virus is vaccination. The PolicyLab at Children's Hospital of Philadelphia recently published *Guidance for In-person Education in K-12 Educational Settings*. They state: "Vaccination of school staff, students, and family members is the most reliable intervention for ensuring safety during the upcoming school year and quickly returning schools to pre-pandemic activities."

The Pfizer vaccine has attained full FDA approval, and therefore is required for all eligible teachers and staff. Exceptions are made on a case-by-case basis with the help of the Medical Advisory Board and Father Henry (?). At this point, we are not mandating that eligible students on campus become vaccinated, but will consider this requirement **once the vaccine receives full FDA approval for children.**

Vaccination provides the least interruption to school life and reduces the risk of transmission throughout our community. **We urge, as strongly as we can, that all eligible individuals get vaccinated.**

FACE COVERINGS

In general, regardless of vaccination status, all students and employees must wear a well-fitting face covering while in school buildings unless contraindicated due to a medical condition, intellectual or developmental disability, or another safety concern.

Acceptable face coverings include well-fitting cloth masks, disposable surgical-style masks, and neck gaiters. Face coverings must cover the nose and mouth at all times, and cannot have vents or exhalation valves. For more specifics about face coverings, please consult [CDC guidance on cloth face coverings](#).

Additional face covering information:

- Any community member that wishes to wear a face covering may do so at any time without question.
- Face coverings are not required outside; physical distancing of 6 feet or more is preferred in this setting. Masks are not required during outdoor physical education classes.
- PreK 3 & PreK 4 students are not required to wear a face covering while napping.
- Breaks from wearing face coverings may be taken throughout the day as determined by the School.
- For students, breaks from wearing face coverings occur only when students can be at least 3 feet away from other students, 6 feet away from adults, and appropriate ventilation can be assured (including outdoors).
- For staff and teachers, breaks from wearing face coverings occur only when they can be at least 6 feet away from other adults and students and appropriate ventilation can be assured (including outdoors).
- Face coverings are not required while actively eating or drinking; in this case, 6 feet of physical distancing should be maintained
- Please ensure each student has an adequate supply of clean, comfortable, well-fitted face coverings and that a clean face covering is worn each day (*2 spares are part of the back to school shopping list*).
- Student and staff face coverings must be solid color/simple pattern so as not to distract other students.

PHYSICAL DISTANCING

The [CDC](#) defines social distancing, also called “physical distancing,” as “*keeping a safe space between yourself and other people who are not from your household.*” *Physical distancing guidelines have changed during the pandemic, but the preferred physical distance to prevent spread of the virus is 6 feet. 3 feet of distance between students is adequate in the classroom setting when well-fitting masks are consistently worn.* STJES has adjusted classrooms to achieve at least 3 feet of distance between each student. Furthermore, all in-person group events, performances, athletics, and assemblies will be conducted by cohort; full school gatherings are cancelled until further notice.

HANDWASHING AND HYGIENE

Handwashing and hand sanitizing opportunities will be frequent.

- Hand sanitizing stations are present at all entrances to the building and all classrooms as well as portable units placed in high-traffic areas around campus.
- Automated paper towel dispensers and faucets are located in each student restroom.

- Students, faculty, and staff will be asked to clean their hands:
 - When they arrive on campus.
 - Between all activities.
 - Before leaving or returning to a classroom.
 - Before and after eating.
 - Before and after touching shared objects.
 - Before and after using the restroom.
 - Before and after transitioning inside from the outdoors.
 - After blowing their noses, coughing, or sneezing.
 - Before and after removing or putting on a face mask.
 - Before they leave the campus.

VISITORS TO CAMPUS

Only enrolled students, currently employed faculty, staff and essential vendors will not be allowed in the school buildings unless by specific invitation.

All visitors that the School permits on campus must have an appointment. They will be required to complete a health check and must comply with all other protocols.

Parents who must drop off forgotten items on campus will leave them outside the building and notify the front desk to retrieve the item in a contactless fashion.

DROP OFF

Drop-off will begin at 8:00 am for all student and announcements will start at 8:20. Students will enter the building as follows:

1. PreK will enter through the gym lobby doors.
2. Kindergarten will enter through the front right door, through the front grove.
3. Grades 1-4 will enter through their individual classroom doors.
4. Grades 5-8 will enter through the main lobby door.

ADDITIONAL MITIGATION STRATEGIES

- **Sick Policy:** Employee and student sick policies will be expanded and strictly enforced.
- **Enhanced Cleaning Processes:** We are continuing cleaning protocols as employed last year to comply with CDC recommendations.
- **Enhanced Ventilation:** We are continuing enhanced ventilation as employed last year.
- **Cohorts:** Academic schedules and classroom use will be designed to keep students in smaller, consistent groups during the day.
- **Outdoor Space:** Students will spend time outdoors for physical education, recess, and outdoor instruction.
- **Gatherings:** Chapel and assemblies will be conducted by cohort. We will have no all-school gatherings.
- **Athletics:** Weather permitting, students will have opportunities for outdoor physical education.
- **Extended Day Programs:** We will be limiting enrollment in before and after school programs; students will stay in their cohorts.

SOCIAL AND EMOTIONAL WELL-BEING

We are working with our faculty, church, and school community to address the mental health issues related to the pandemic and our current circumstances. As a school, we understand our role as one of the most critical sources of connection, education and support for children. In times of crises, this valuable relationship may be disrupted, which can lead to families and students becoming more isolated and vulnerable. We will continue to develop a trauma-informed support program to keep students connected to one another socially, spiritually, and intellectually. Our faculty has engaged in additional personal and professional development around the topic of social and emotional programming in schools to further enhance their capacity to offset the profound impact the pandemic is having on the emotional health of our global community.

We encourage members of the community (including staff and students) to take breaks from watching, reading, or listening to news stories about COVID-19, including social media if you are feeling overwhelmed or distressed. We also encourage everyone to take care by eating healthy, exercising, getting sleep, and finding time to unwind. If you need support, please reach out [Margery Bank](#), Head of School.

COMMUNITY EXPECTATIONS

A productive school-parent partnership is essential for a positive school experience for our students. Never has this been more important. We all have an obligation to our community's well-being. Every individual member of our community – be it student, parent, faculty, or staff member – is responsible for our collective safety.

By adhering to public health guidance both on and off campus, we can better protect our individual and collective safety. We are asking the community to commit to:

- While outside our homes, we will abide by CDC recommendations and local Maryland law with regard to face coverings.
- We will wash and disinfect hands frequently, and mind physical distancing norms.
- We will follow self-screening guidelines for symptoms of illness and refrain from coming to campus when symptomatic.

It is important to remember that these are based on best practices, public health guidance, and current conditions. We want to emphasize that these plans may change as new information becomes available. We will keep you updated on any changes to our plans in the interim.

If we work together, we can ensure that our students thrive. Our community is resilient, dedicated, and aligned in our mission. While I know there will be challenging times ahead, I am confident in our ability to navigate these uncertain times together.

PROTOCOLS FOR THE DAILY OPERATIONS OF THE SCHOOL

EVERYONE TAKING RESPONSIBILITY FOR A CLEAN FACILITY – *GOOD HOUSEKEEPING*

While the Operations staff will be aggressively cleaning, we need **all members of the community** – students, faculty, and staff – to do their part to protect us all.

- **Teachers**

- In order to facilitate cleaning in classrooms, common spaces, and all other spaces that will be visited by students, we ask teachers to remove or put away all items on their desks and other furniture, including papers, binders, and other personal items so that disinfectants can be applied as needed;
- If students or faculty/staff will be rotating through a space during the day, we ask each occupant to spray and wipe down desks and chairs before and after use.

- **Students**

- We will continue to engage students in the cleaning process as they start and finish activities.
- We will provide students with cleaning materials to clean their own desk during the school day.

HEALTH PROTOCOLS

In the event that your child(ren) becomes sick at school, our Certified Medication Tech (CMT) staff will follow [Maryland Department of Health Decision Aid flow chart](#) to determine the course of action.

The School may periodically check the temperatures of students on campus. STJES is following the CDC-recommended 100.4 or higher threshold. See the Family Handbook for additional school health guidelines.

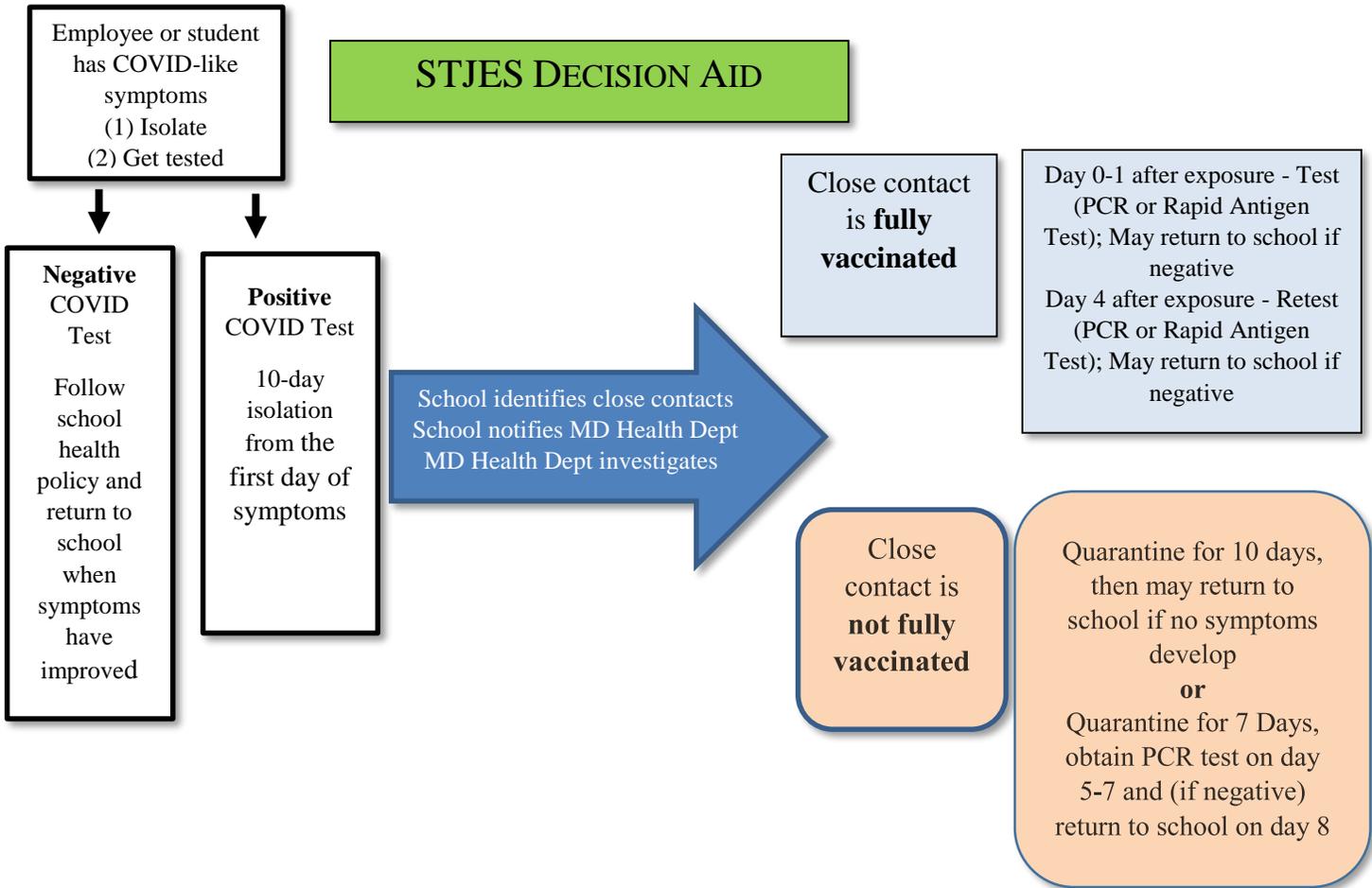
Located in the main office, wellness Rooms are designed for non-Covid related needs and staffed by trained CMT's;

Quarantine Rooms are:

- Designed for COVID-related symptoms.
- Equipped with Personal Protective Equipment. The staff will be required to wear protective eye gear and gloves, and may wear additional personal protective equipment, such as gowns, as necessary and appropriate under the circumstances. All PPE items will be provided by STJES.
- Disinfected with electrostatic sprayer equipment & properly ventilated.

COVID-19 Symptoms: Fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, and/or diarrhea.

STJES DECISION AID



Notes to the Decision Aid:

Testing: Unless otherwise specified, either rapid antigen or PCR testing for COVID is acceptable; however, if rapid antigen test is negative, must confirm with PCR. May return to school without a test if a medical provider’s note identifies an alternate diagnosis.

In all cases, return to school is contingent upon (1) improving symptoms, (2) fever free (without medication) for 24 hours, & (3) otherwise following the school health policy.

Each case is reviewed and may be altered by Montgomery Health Department or Medical Advisory Board, guidelines are subject to change

Quarantine of class or cohort is not automatic, but evaluated by MHD or Medical Advisory Board in conjunction with the head of school

Fully vaccinated is defined as 14 days following receipt of the 2nd dose of Pfizer or Moderna vaccines, or 2 weeks following receipt of the Johnson & Johnson vaccine

NOTE: Because individuals with COVID-19 can shed viral particles for up to 90 days (leading to a false positive test), individuals diagnosed with COVID-19 should not test again for COVID-19 until 90 days have elapsed since the development of symptoms (if symptomatic) or positive test (if asymptomatic). As long as they remain without symptoms, these individuals are not required to test or quarantine if identified as a close contact.

CDC Definition of a Close Contact:

⁴CDC defines a close contact as: someone who was within 6 feet of an infected person (laboratory-confirmed or a clinically compatible illness) for a cumulative total of 15 minutes or more over a 24-hour period (for example, three individual 5-minute exposures for a total of 15 minutes). An infected person can spread COVID starting from 2 days before they have any symptoms (or, for asymptomatic patients, 2 days before the positive specimen collection date), until they meet criteria for discontinuing home isolation. Masks are irrelevant when determining close contacts. *Exception:* In the K–12 indoor classroom setting, the close contact definition excludes students who were within 3 to 6 feet of an infected student (laboratory-confirmed or a clinically compatible illness) if both the infected student and the exposed student(s) correctly and consistently wore well-fitting masks the entire time. This exception does not apply to teachers, staff, or other adults in the indoor classroom setting.

WHEN TO STAY HOME

Students who have a temperature as indicated above or are experiencing symptoms of COVID-19 may not come to campus. In addition, any student who has been in close contact in the previous fourteen (14) days with a person who has tested positive for or is showing symptoms of COVID-19 must notify Margery Bank at Margery.Bank@Stjes.org and consult a health care provider. Students experiencing symptoms of COVID-19 or who have been exposed to someone who has tested positive for COVID-19 must be tested for COVID-19 prior to returning to campus if requested by the School

RETURN TO SCHOOL AFTER COVID-19 EXPOSURE, SYMPTOMS OR DIAGNOSIS

Community members who contract COVID-19 or experience symptoms consistent with COVID-19, or who otherwise are exposed to COVID-19, may be permitted to return to campus when at least 7 days have elapsed since the start of symptoms and the School determines, in consultation with appropriate public health officials and/or health and medical experts, that the individual does not pose a risk of transmission to the School community. Continued symptoms of COVID-19 are common even after the risk of transmission has been eliminated, and these symptoms should not continue to disqualify a student or staff member from returning to campus. However, depending on the circumstances, the School may require the community member to provide a negative COVID-19 test before returning to school.

QUARANTINE

Close contacts of a person with COVID-19 who was in the school or child care building should be identified for the purpose of making quarantine recommendations.

Close contacts who are not fully vaccinated should not attend, work in or visit a school or childcare program until completing quarantine. A quarantine period of 14 days remains the safest option for close contacts of persons with COVID-19 who are not fully vaccinated. Based on guidance from the CDC, the following options to shorten quarantine may be an acceptable alternative depending upon local circumstances and resources:

- Quarantine can end after Day 10 if **NO symptoms have been reported** during daily monitoring; OR
- Quarantine can end after Day 7 if **a diagnostic specimen (collected on Day 5 or later) tests negative and if**

NO symptoms have been reported during daily monitoring. The specimen may be collected and tested within 48 hours before the time of planned quarantine discontinuation, but quarantine cannot be discontinued earlier than after Day 7.

When a person meets these criteria and quarantine is ended early, all of the following must be implemented:

- Daily symptom monitoring continues through Day 14; AND
- Persons are counseled regarding the need to adhere strictly to all recommended mitigation strategies including **correct and consistent face mask use, physical distancing, and self-monitoring for symptoms of COVID- 19 through Day 14; AND**
- Persons are advised that if any new symptoms develop, they should immediately self-isolate and contact a health care provider to determine if they need to be tested and how long they should be excluded from work or school/child care.

Note: For persons that are unable to comply with correct and consistent face mask use such as young children and persons with a disability or medical condition that makes wearing a mask unsafe, a shorter quarantine option may NOT be used and these persons must quarantine for a full 14 days.

Fully vaccinated persons who have come into close contact with someone with COVID-19 should be tested 3-5 days following the date of their last exposure and wear a mask in public indoor settings for 14 days or until they receive a negative test result. If they remain asymptomatic and can correctly and consistently wear a mask, they may attend school or child care unless they test positive.

It is important to note an exception to the CDC's close contact definition which applies specifically to K-12 schools, and states that students who maintain 3-6 feet distance from an infected student need not quarantine if both the infected student and the exposed student correctly and consistently wore well- fitting masks during the entire exposure. This exception does not apply to adults, who must continue to maintain at least a 6 foot distance from other adults and students to avoid both infection with the virus and quarantine after designation as a close contact.

CONTACT TRACING

The School will seek to note and track all information regarding students and employees who have been exposed to someone diagnosed with COVID-19, are suspected to have COVID-19, or have tested positive for COVID-19, and may communicate this information with and follow all directives from the Maryland Department of Health. Student and employee health information relating to COVID-19 will be kept confidential to the extent practicable, in accordance with applicable state and federal privacy laws.

In the event of a positive test or suspected diagnosis, it may be necessary to report this event to other members of the School community, so that the School can implement additional precautions and other members of the community can also be tested. This is particularly true where a student or faculty member has been in classes with a small group of other students on a daily basis. While the individual student or faculty member's name identity may not be affirmatively disclosed to other members of the School community, the identity of such individual may be readily discernible to other members of the community due to context cues.

Where a case of COVID-19 is confirmed, exposure tracing may commence and members of the School

community with high-risk of exposure to the infected individual (whether on or off campus) may be instructed to quarantine and get tested in accordance with CDC guidelines. Students and employees are advised that they may be asked to quarantine themselves for a period of days or weeks before they are able to be meaningfully and effectively tested for COVID-19.

SHARED RESPONSIBILITY

Every individual member of our community – be it student, parent, faculty, or staff member – is responsible for our collective safety. We are counting on each of us to follow public health guidance consistently, while on campus and off.

Each of us commits that:

- We will obtain all jurisdiction-required vaccinations prior to the beginning of the 2021-2022 school year to avoid the risk of another disease outbreak on campus.
- While outside our homes we will wear masks, wash and disinfect hands frequently, and mind physical distancing norms
- We will follow self-screening guidelines for symptoms of illness and refrain from coming to campus when symptomatic; and
- We will comply with self-quarantine rules regarding exposure to COVID-19 and recent travel overseas or to domestic hot zones.

While it may be tempting to resume normal activity once students return to school, we need to remember that these mitigating practices need to be followed outside of school as well. If students have play dates, sleep overs or otherwise congregate together outside of school, or if adults relax their social distancing practices, that will undermine all the efforts we are making to limit transmission of the virus. Please be mindful of your responsibility to the whole school community. Failure to meet the School's expectations may result in appropriate consequences, as determined by the School.

COVID-19 POINTS OF CONTACT FOR QUESTIONS

In addition to the Medical Advisory Board, we have a delegated nurse who serves as medical point of contact for the school and we are in communication with her about best practices and will communicate with our community any recommendations she brings to the Administration.

For all other COVID-19 Health and Protocol related questions please email Health@stjes.org. Questions will be answered by a member of our Medical Advisory Board or CMT.

To report a COVID-19 positive test please email Margery Bank, Head of School at Margery.Bank@Stjes.org

This plan provides an overview so that all members of our community know what to expect. The plans shared in this document are based on the most current public health assessment. We ask that you continue to be flexible as we work diligently to stay abreast of new information and plans accordingly.