



# PRSD Healthcare Leadership Council

October 1, 2020



# PRSD Healthcare Leadership Council #8

Gather insight and determine if consensus exists for the following:

- Forecast for late fall/winter worsening conditions;
- Conditions and Cases Should Drive Significant Changes to PRSD Hybrid;
  - Support for these two measures? Thresholds?
- Scenario E of the Mathematica Report Reflects PRSD Hybrid Benefits and narrow approach to mitigation versus “broad closure”;
- Health Office Protocol Questions (Dr. Justus and Mrs. Schonbachler)
- Gathering size input is a function of event management and the Big 3 more so than an arbitrary number;
- Communication addressed on case-by-case basis given facts and consultation with ACHD.
- Cannot project “full in-person” date since conditions evolve



# Return-to-School Continuum\*

## “Old Days”

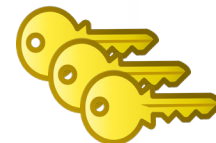
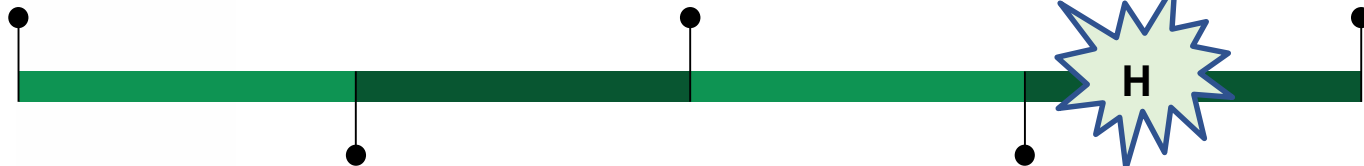
Schools operate as they did on and before March 13, 2020.

## Traditional with Significant Restrictions

Restrictions could include limiting the number of students in a class; alternative transportation options; staggered schedules, etc.

## 100% Virtual All

All students are learning remotely from home.



## Traditional with Some Restrictions

Restrictions could include spacing of desks in classrooms; direction signs in hallways; table and seating spacing in cafeterias; etc.

## Dynamic Hybrid Between Traditional and Virtual

A combination of traditional with significant restrictions and virtual instruction for some.

**\*We must expect – and not be surprised – by shifts between “H” and “V.” These shifts could happen for classroom(s), building(s) or the district. These shifts could range from days to weeks.**



# PDE/PADOH Model Guidance

Criteria	7.31.20	8.7.20	8.14.20	8.21.20	8.28.20	9.4.20	9.11.20	9.18.20	9.25.20	10.2.20
Incidence Rate Per 100,000	86.7	50.1	42.7	38.0	29.4	39.0	33.6	37.8	29.7	
PCR Positivity Percentage	6.4%	4.7%	4.3%	3.9%	3.1%	3.7%	4.1%	3.8%	2.9%	

Guidelines  
Not Magic  
Numbers



Low = Green = < 10 Cases **and** < 5%

Moderate = Yellow = 10 to < 100 Cases **or** 5% to < 10%

As noted on the next slide, both measures should be in or near the green to consider full in-person instruction for all students.



# PDE/PADOH Model Guidance

Level of Community Transmission in the County	Incidence Rate per 100,000 Residents (Most Recent 7 Days)	AND/OR	PCR Percent Positivity (Most Recent 7 Days)	Recommended Instructional Models
Low	<10	AND	<5% 	Full in-person Model  OR  Blended Learning Model
Moderate	10 to <100 	OR	5% to <10%	Blended Learning Model  OR  Full Remote Learning Model
Substantial	≥100	OR	≥10%	Full Remote Learning Model

When can we shift further left on the continuum toward a five-day in-person option for most students?

Guidelines Not Magic Numbers

Safe and Sustainable



Conditions Closely Approximate Both Low Measures



Cases Remain Rare with Longer Sample Size of Time/Weeks



Physical Distancing Can Be Shifted To Less Than 6'



# Mathematica Report ([Link](#))

## Operating Schools in a Pandemic: Predicted Effects of Opening, Quarantining, and Closing Strategies

**Publisher:** Princeton, NJ: Mathematica

Sep 16, 2020

**Authors**

Brian P. Gill, Ravi Goyal, and John Hotchkiss

### Key Findings:

- Precautions such as requiring masks can measurably reduce infection spread in schools.
- Infection rates in elementary schools are likely to be lower than in secondary schools employing the same operating strategies.
- Hybrid approaches where smaller groups of students wearing masks attend in person part-time dramatically reduce the total number of likely infections in a school. The models suggest that under a hybrid approach with precautions, most infections coming from outside the school will produce zero additional infections in the school.
- In schools where all students are attending in person daily, temporary closures in response to known cases are far less effective in reducing infection spread than using a hybrid operating strategy from the start, and they increase the disruption to school schedules.



# PDE/PADOH Guidance



Level of Community Transmission in the County	Number of Cases of COVID-19 Within a 14-day period:	Number of Cases of COVID-19 Within a 14-day period:	Number of Cases of COVID-19 Within a 14-day period:
	1 student or 1 staff	2-4 students/staff in same school building <b>OR</b> <5% of total number of students/staff in a school building are cases <b>OR</b> Multiple school buildings with individual cases who are not household contacts	5+ students/staff in same school building <b>OR</b> ≥5% of total number of students/ staff in a school building are cases <b>OR</b> Multiple school buildings with 2-4 cases who are not household contacts



<b>Low</b>	<ul style="list-style-type: none"> <li>School does not need to close</li> <li>Clean area(s) where case spent time</li> <li>Public health staff will direct close contacts to quarantine</li> </ul>	<ul style="list-style-type: none"> <li>Close school(s) for 3-5 days*</li> <li>Clean area(s) where cases spent time</li> <li>Public health staff will direct close contacts to quarantine</li> </ul>	<ul style="list-style-type: none"> <li>Close school(s) for 14 days*</li> <li>Clean entire school(s)</li> <li>Public health staff will direct close contacts to quarantine</li> </ul>
<b>Moderate</b>	<ul style="list-style-type: none"> <li>School does not need to close</li> <li>Clean area(s) where case spent time</li> <li>Public health staff will direct close contacts to quarantine</li> </ul>	<ul style="list-style-type: none"> <li>Close school(s) for 5-7 days*</li> <li>Clean area(s) where cases spent time</li> <li>Public health staff will direct close contacts to quarantine</li> </ul>	<ul style="list-style-type: none"> <li>Close school(s) for 14 days*</li> <li>Clean entire school(s)</li> <li>Public health staff will direct close contacts to quarantine</li> </ul>

Guidelines Not Magic Numbers Given PRSD Hybrid



# Public Health Forecast

- Public health experts forecast worsening conditions in the fall and winter as seasonal flu and other respiratory illnesses co-mingle with COVID-19 and people generally shift towards indoor environments (CDC Director Redfield, NIAID Director Fauci and NIH Director Collins).
- The CDC estimates of annual CDC deaths in the United States since 2010 is between 12,000 - 61,000. For COVID-19, the United States number of current deaths recently passed the 200,000 mark with IHME modeling of approximately 370,000 by January 1, 2021.
- While optimism of a vaccine by late 2020/early 2021 exists, the likely rate of vaccine effectiveness may be around 70%. It will take months - after a proven vaccine - for the high volume production and strengthening of the vaccination deployment infrastructure.
- When operating under normal conditions with traditional attendance, schools are densely populated. Hallway transitions, cafeteria, buses and other aspects of the school day make physical distancing difficult or impossible to address.





# Cases and Communication

- Some members of the staff and community would like increased levels of communication about confirmed or probable cases of COVID-19. Given design of our hybrid model, communication related to confirmed cases and/or potential exposure to a confirmed case via “close contact” will be addressed on a case-by-case basis.
- In consultation with ACHD, this approach is based on the district’s responsibility to **balance public awareness with individual privacy rights**. This is true for both students, staff and families. In certain circumstances, more specific information may violate individual rights.
- If any individuals (students or staff) are impacted by a situation, he/she would receive direct communication. That communication would not include the individual name of the person. If a person has not received direct communication, there is nothing required other than continued implementation of the “Big 3.” In essence, “no news is good news.”
- A COVID-19 tracker system has potential value and potential concerns:
  - Value – General Awareness at Aggregate Level; Potential Driver of Short-term Closure (i.e., if “X” at Building then Closure)
  - Concerns – Not Aligned with Action; Increases Desire for Personal Information/Rumor; Discourage Disclosure (i.e., Stigma)
- The PRSD Hybrid Model protects against the need for closure. Working with ACHD, we are able to provide more focused mitigation based on “close contact(s).”



# Athletics, Activities and Extra-Curriculars

- Fall Athletics and Activities (Phase 1, Phase 2 and Phase 3)
- Winter/Spring Athletics and Activities (Sport-Specific Plan Design)
- Gathering Sizes (State vs. County Confusion)
- Critical connection to MVV and PR Graduate Portrait
- Physical, social and emotional benefits of sport and activity
- Different degrees of risk (e.g., golf vs. football)
- Comfortable with a deliberate and incremental approach
- **Spectators and Event Management**
- **Outside Groups and Facility Use**

Guidelines Not  
Magic Numbers



# PRSD Healthcare Leadership Council #8

Gather insight and determine if consensus exists for the following:

- Forecast for late fall/winter worsening conditions;
- Conditions and Cases Should Drive Significant Changes to PRSD Hybrid;
  - Support for these two measures? Thresholds?
- Scenario E of the Mathematica Report Reflects PRSD Hybrid Benefits and narrow approach to mitigation versus “broad closure”;
- Health Office Protocol Questions (Dr. Justus and Mrs. Schonbachler)
- Gathering size input is a function of event management and the Big 3 more so than an arbitrary number;
- Communication addressed on case-by-case basis given facts and consultation with ACHD.
- Cannot project “full in-person” date since conditions evolve



# Healthcare Leadership Council Membership

**Senior Leadership Team:** Dr. Miller (Superintendent); Dr. Pasquinelli (Asst. Superintendent); **Dr. Justus (Asst. Superintendent); Mr. Noel Hustwit (Director of Student Services & Special Education); Ms. Hathorn (Director of Communication); Mr. Brian Glickman (Director of Human Resources);** Mrs. Kirk (Director of Financial & Operational Services); Mr. Shawn Stuebener (Director of Technology)

**Administrators:** Mrs. Nancy Bowman (PRHS); **Dr. Dave Kristofic (PRMS); Mrs. Paula Giran (EHUE);** Mrs. Greta Kuzilla (HES/RES/WES); Dr. Maura Paczan (Lead Psychologist); Mr. Jeff Zimmerman (Director of Facilities); **Mr. Clayton Gruber (Custodial Supervisor);** Mr. Sean Simmons (Director of Athletics)

**Staff:** Mr. Chris Vins (PREA President); Mr. Brian DeVinney (PREA Secondary Vice-President); **Mrs. Danielle Kcehowski (PREA Elementary Vice-President); Mrs. Patti Noble (ESPA President);** Mrs. Michelle Schonbachler (School Nurse Department Chair); Mrs. Kim Charney (Transportation & Facility Use Coordinator); **Mrs. Barbara Williams (Administrative Support); Ms. Margo Kohler** and Mr. Jim Bichler (Building Level Technology Coaches)

**Governance:** Mrs. Christine Misback (PRSD School Board)

**Students: Executive Board Pres: Zeyad Amr;** Class of 2021 President: Gaby Stone.

**Key Partners: Mrs. Colleen McAndrew (STA Manager); Mr. Andy Hartman (STA Assistant Manager);** Mrs. Diane Bucknum (SODEXO Manager)

**Medical and Public Health Experts: Dr. Domenic Mantella (PRSD School Physician); Dr. Amy Cashdollar, Chief Operating Officer (AHN); Erin Colvin, CRNP (CHP); Dr. Vaughn Cooper, Professor of Microbiology Molecular Genetics (Pitt) Co-Founder of Microbial Genome Sequencing Center; Renee Dixson, RN (UPMC); Dr. Tony Farah, Executive Vice President, Chief Medical/Clinical Transformation Officer (HH);** Dr. Catherine Hrach, Emergency Physician (BHS); Dr. Jenene Hunkele, Sr. Medical Science Liaison (Alexion); Dr. Allan Klapper, CEO (AHN); Dr. Brook McHugh, Pediatrician (AHN); Dr. Tyler Quinn, Research Physiologist (NIOSH); Dr. Ryan Shields, Infectious Diseases Pharmacist/Assoc. Professor of Medicine (Pitt; UPMC)