Table of Contents

I. Record of Revisions .................................................. 2
II. Introduction .......................................................... 3
III. Governing Principles and Assumptions ......................... 5
IV. Communications and Community Education Plan ............. 7
V. Campus Repopulation Plan ......................................... 8
V. Monitoring Plan ..................................................... 14
VI. Containment Plan .................................................. 17
VII. Shutdown Plan ..................................................... 19
Attachment A: Return to Campus Protocols for Employees .... 23
Attachment B: The Kenyon Commitment .......................... 28
Attachment C: Student Testing, Quarantine and Isolation Protocols 29
Attachment D: Glossary of Terms .................................. 32
Attachment E: Alert Status and Response Chart ................. 37
I. Record of Revisions

Revision 1  8/17/2020
add Record of Revisions

incorporate review comments provided by the OSU College of Public Health

incorporate review comments provided by Knox Public Health

revise gating factors and otherwise revise to incorporate legal counsel’s advice

reflect 7/13/20 changes in on-campus student population and academic calendar

reflect Ohio governor’s order of 7/23/2020 requiring face coverings

revise testing plan to reflect changed vendor arrangements

add details for shutdown plan

include updated Return to Campus Plan for employees, dated 8/3/20

add Attachment B: The Kenyon Commitment

add Attachment D: Glossary of Terms

Revision 2  8/26/2020
revise dining operations to reflect changes made 8/21/2020

revise isolation and quarantine protocol to reflect changes identified during 8/20/2020 simulation exercise conducted with local government partners
II. Introduction

Significant, invaluable guidance and insights have been provided in the development of this plan by the Knox County, Ohio Department of Health and the Ohio State University College of Public Health.

Kenyon College intends to open its campus for education for the fall 2020 semester. As it prepares, the college recognizes that its plans must consider and successfully address the ongoing, extended period of global pandemic disease. This plan defines and describes Kenyon College’s approach to operating its residential campus and associated activities under these conditions, while acknowledging that risk of infection or even an outbreak cannot be completely eliminated. The college will maintain its ongoing commitment to seek guidance from public health experts at the local, state and national levels. As this guidance is updated, plans and activities will be revised accordingly. Revised plans and procedures will be shared with the Kenyon community via the college’s COVID-19 website and email, along with social media if that can be arranged so as to enhance the effectiveness of the overall communications effort.

This plan is not a detailed operational plan for departmental or lower level operations. It describes the college’s guiding principles and general approaches for resuming and continuing fully residential education under pandemic conditions. Departmental and lower level operational plans are being developed within the framework and requirements described herein. Intended audiences are college employees, students and parents, along with public health and other local and Ohio state government officials.

Timeframe for operations under this plan is August 2020 through the point in time when an effective vaccine for the COVID-19 coronavirus becomes widely available. This is assumed to mean that at least the entire 2020-21 academic year will be governed by this plan and possibly well into the summer of 2021 or even the 2021-22 academic year.

This plan is organized along the lines of Reopen Connecticut – Report of the Higher Education Subcommittee, dated 5/6/2020 and available for review at the following URL:

The overall plan is structured as five, interrelated sub-plans, following the Reopen Connecticut plan structure with the addition of a statement of governing principles and assumptions and a communications and community education plan:

III. Governing Principles and Assumptions

IV. Communications and Community Education Plan

V. Campus Repopulation Plan

VI. Monitoring Plan

VII. Containment Plan

VIII. Shutdown Plan
III. Governing Principles and Assumptions

The planning and implementation of operations under pandemic conditions will be informed by the following principles:

1. Protecting the health and safety of Kenyon’s internal and surrounding communities, especially those most at risk, is our paramount concern.

2. It is not possible to reduce the risk of infection or outbreak to zero. Regardless, every reasonable effort must be made to achieve and maintain a campus free of the COVID-19 virus and to contain it should it gain a foothold in the community.

3. All pandemic-related campus operations must be informed and guided by the best available guidance from local, state and national public health authorities, recognizing that this guidance may evolve as more is learned about the tactics for confronting the managing the spread of the virus.

4. All members of the Kenyon community have a responsibility to each other to act and to communicate in ways that minimize the risk of spreading infection on campus and in the surrounding communities.

5. The desire to hold one another accountable for our actions under these conditions must be tempered with kindness, understanding and grace towards those who may be struggling with newly-reconfigured campus life.

6. Prevention efforts are a primary concern, and must be planned and executed while also acknowledging that monitoring and containment must also receive our best thinking and efforts. The planning effort has been conducted under the following assumptions:

7. The individual and group experiences of working and living on campus will be noticeably different in many ways until one or more of the following conditions occur: (1) an effective vaccine is widely available; (2) a rapidly effective treatment is widely available; or (3) in the event that we learn that prior infection provides a protective effect, there is a sufficient percentage of immune individuals on campus and in the surrounding communities to confer at least a localized “herd immunity.”

8. Risk of COVID-19 infection and illness stemming from campus operations for Kenyon can be managed to maintain acceptable risk levels for all involved.
9. Many of the gating factors detailed in the Campus Repopulation Plan can be met prior to an assumed, late August 2020 start of an on-campus fall semester, prior to an early February start to the spring 2021 semester and continuously during both semesters.

10. Students, faculty and staff will cooperate with both the spirit and letter of plan requirements.
IV. Communications and Community Education Plan

Both internal and external communications will be managed and coordinated by the college’s Office of Communications. For the purposes of this plan, internal communications refers to those messages distributed generally to all or major subsets of faculty, staff, students or alumni via all media.

Community education efforts will be a joint endeavor between the campus health center, residence life, Provost, human resources and communications offices, with significant input and guidance from local, state and national public health authorities. The college will work with the KPH Office of Promotions to identify suitable materials and public service announcements that have already been developed by local authorities. Planning for these activities is already underway, with communications begun in late June 2020. Educational activities will transition to a more active phase as the dates approach for faculty, staff and students returns to campus begin. Education will be a continuous process during the active fall and spring semesters, with an emphasis on fostering a community that upholds a shared commitment to the health and safety of all of its members.

The community will be provided with regular updates on the COVID-19 infection status of its members (in aggregate). Information coming out of testing, monitoring and containment efforts will be shared with local and state authorities as required by those authorities or as necessary in the spirit of cooperative response to pandemic status in accordance with federal and state privacy laws (HIPAA, CLERY, etc.).

The college has a robust emergency alert system in place, with the capacity to communicate via text, email and telephone with all members of its community.

The college has also developed an Alert Status and Response chart (Attachment E to this plan) that identifies and summarizes the primary decision-making factors. The chart is based upon three alert levels framework as applied to on-campus operations:

- **Green**: normal operations
- **Yellow**: modified / reduced operations
- **Red**: minimal operations

This chart will be shared with the Kenyon community during the opening phase of fall semester 2020.
V. Campus Repopulation Plan

This plan covers the anticipated, 2020-21 fall and spring semesters. If ongoing pandemic conditions dictate, it will be updated as necessary for summer 2021 and 2021-22 academic year operations.

On-campus student population will be reduced to approximately 1,000 individuals for fall semester 2020. This reduced on-campus student number may also be extended to spring semester 2021 should conditions warrant such an extension.

The reduced student population will allow all students to be housed in single bedrooms, while setting aside dedicated living space for quarantine or isolation purposes. To that end, the college has leased the Mount Vernon Comfort Inn (57 single bedrooms each with its own bathroom) and has set aside fourteen of the college-owned McIlvaine Apartments in Gambier for a total of 70 beds. The college has also made plans to dedicate the college-owned Kenyon Inn (30 bedrooms each with its own bathroom) for use as a last-resort quarantine and/or isolation facility. Including the Kenyon Inn, the college has set aside or made plans to use up to 100 beds for this purpose.

Fall semester classes on campus are planned to run 12 1/2 consecutive weeks with no breaks from Monday, August 31, 2020 through the Tuesday of Thanksgiving week (November 24th). Classes will continue online from that point. There will be online final examinations during the third week of December.

There will be an extended winter break from the conclusion of final examinations on or about December 18th into early February 2021. Spring semester may begin as early as February 1, 2021 and run fourteen consecutive weeks with no breaks, concluding in mid-May 2021. The final decision on the spring semester 2021 start date will be made and announced based upon the status of the gating factors as they may be later during fall semester.

Repopulating the campus with students, faculty and staff and conducting in-person education on campus will be guided by the eight gating factors summarized below. Each factor will be reviewed both in advance of repopulation and continuously during campus operations. Five of the eight gating conditions factors are outside of the college’s control, an indication of the highly interdependent nature of both planning and acting under global pandemic conditions.
<table>
<thead>
<tr>
<th>Gating factors</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Conditions outside of the college’s control</strong></td>
<td></td>
</tr>
<tr>
<td>1. Maximum permitted gathering limit increased substantially</td>
<td>8/3/20 update: Responsible Restart Ohio - Institutions of Higher Education program documentation provides the necessary authorization.</td>
</tr>
<tr>
<td>2. Rate of new hospitalizations per new case: low and non-increasing rate in Knox County</td>
<td>This data is available from the Knox Public Health office. Interpretation of this factor to be guided by KPH leadership.</td>
</tr>
<tr>
<td>3. Local health care facility surge capacity: must be adequate</td>
<td>Adequacy to be determined by KPH leadership.</td>
</tr>
<tr>
<td>4. State-provided safe harbor from liability: to be in place</td>
<td>Safe harbor would consist of an Executive Order (or legislation, if required) and should offer immunity from claims as long as the college follows the provisions of this plan. As this factor is not related directly to public health considerations, it is included for information only.</td>
</tr>
<tr>
<td>5. Specific, state-sponsored public health guidelines: provided by State of Ohio or Knox County</td>
<td>Guidelines available to cover PPE, physical distancing, the density of dormitories, dining halls, and classrooms, and disinfection standards.</td>
</tr>
</tbody>
</table>
### Conditions partially or entirely within the college’s control

<table>
<thead>
<tr>
<th><strong>6. Viral diagnostic testing:</strong> adequate supply and capability to administer tests to all students upon arrival, and faculty and student-facing staff shortly before student arrival; and to test both groups as may be needed thereafter in accordance with public health officials’ guidance</th>
<th>Sufficient packing, shipping and laboratory processing capability will return results quickly enough to allow containment efforts to prevent an incipient outbreak. Would need approximately 1,600 test kits for one round of testing of both students and employees.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>7. Contact tracing:</strong> adequate capacity available</td>
<td>The Knox County public health system, potentially augmented by trained Kenyon College or local volunteers, must have the capacity to trace the contacts of those testing positive for infection and be authorized to do so, including ‘surge capacity’ to undertake contact tracing for a campus outbreak.</td>
</tr>
<tr>
<td><strong>8. PPE supply inventory and supply chain reliability</strong></td>
<td>Items to keep in inventory will be determined by #5 above; alternative supply sources identified. PPE available from Knox County Emergency Management Agency should that become necessary.</td>
</tr>
</tbody>
</table>

Assuming that the college’s review of these factors indicates that proceeding with or resuming on-campus operations is warranted, the college’s residential, teaching, athletics and other extracurricular activities will be conducted as summarized below.

**General**

Students will be strongly encouraged to remain in Knox County, except for unavoidable personal travel needs such as medical care or family emergencies. Even travel to Mount Vernon will be discouraged, other than for trips to Kenyon facilities or medical needs. Faculty and staff will
work from home when practicable; otherwise, commuting patterns are expected to stay the same with reduced daily traffic.

The college’s instructions to employees for returning to work are attached to this plan: Kenyon College Return to Campus Protocols for Employees.

Residential
Kenyon is 100% residential, and therefore does not normally have the ability to increase the number of students living off-campus.

We are configuring our student residences to provide single bedrooms for each student who will live and study on campus. We are also providing students who live within a reasonable radius of campus the chance to petition for an exemption from our eight-semester residential requirement.

For quarantine or isolation spaces, we have designated the Mount Vernon Comfort Inn, the college-owned McIlvaine Apartments, and as a last resort, the Kenyon Inn for these purposes. The Comfort Inn will be the first priority for these purposes, since it has been leased by the college for the entire 2020-21 academic year. The McIlvaine Apartments followed by the Kenyon Inn will be considered backup sites for these purposes, should needs exceed the Comfort Inn’s 57 single bedroom capacity. Combined, these three facilities provide bed capacity equivalent to 10% of the planned, on-campus student population of approximately 1,000.

Dining
Kenyon has one dining facility on campus, Peirce Dining Hall, which will be restricted to students only (no faculty/staff/visitor groups). Other modifications include the following:

- Meals will be available in pre-packaged containers. Considerations will be made for vegetarian, vegan, gluten-free allergies, and for food variety.
- Students will not be allowed to dine in Peirce until after the “quiet period,” which concludes on September 4. All tables will have plexiglass dividers installed to promote social distancing and reduced seating.
- Disposable products will be adopted. Salt and pepper shakers eliminated from tables
- Seating will be spaced out with the following seating capacities: (520 TOTAL)
  - Great Hall - 72
  - Thomas - 128
  - Pub - 96
  - ADR
  - Alumni - 60
  - Leach - 32
  - Ramser - 8
  - Marriott - 8
  - Chadeayne - 16
  - Patio seating (weather dependent)
  - Modular tents to be erected for North Peirce lot seating: 100 total seats; 6 separate 20’x30’ tents with lighting - side walls added later in fall; Handicapped accessible spots to be relocated to College Park Street
- Appropriate signage implemented before entering servery
Additional hand sanitizer stations have been installed throughout Peirce

- Student traffic flows in through the main doorway, separated by a strap for in/out
  - Students will be greeted by a checker in the front lobby who advises of lines in Great Hall vs. Thomas. 6-foot/3-foot floor markers designated for waiting lines.
  - Flow through Great Hall/Thomas doorways counter-clockwise, also marked for in/out
  - Allergy sensitive meals addressed in Atrium by chefs
  - Extra drinks and coffee also in Atrium (and in each meal line)
  - Students exit via main door

- Meal times will be spaced out:
  - Breakfast: 7:30am - 9:30am Monday-Saturday
  - Lunch: 11:00am - 2:00pm Monday-Saturday
  - Sunday Brunch: 10:30am - 2:00pm
  - Dinner: 4:30pm - 8:00pm (7:00pm on Saturday)
  - Late Night (Sun-Thurs): 8:30 - 11:00 pm

- There will be limited catered food service for campus events. There will be a limited catering menu that is boxed for breakfast or lunch drop off. These will be provided as "drop and go" rather than exposing food services staff to gatherings of any size. Food service efforts will focus primarily upon feeding students, including isolation and quarantine meal deliveries.

**Teaching**

We recognize that students choose Kenyon for the intensive learning experience the College offers. That includes dynamic classes with much opportunity for students’ active participation and one-on-one learning experiences such as our summer research programs and individual studies. We will strive to retain as much of those experiences as we can in the coming year.

A faculty and staff working group has determined how we will have to adjust seating arrangements in classrooms and other aspects of classroom layouts in order to provide a safe environment in which to offer in-person classes and seminars. The State of Ohio recommends that we apply a 6-foot distance between seats. The State of Ohio also suggests that we require masks in classrooms, laboratories, and studios, which accords with our mask policy on campus. We have rescheduled some courses to alternative meeting times and have repurposed some larger spaces that have not been classrooms before in order to offer our full schedule of courses in rooms large enough to allow for 6-foot distancing. The Registrar’s office, our classroom support personnel in Library and Information Services, and maintenance workers have made the adjustments to the course schedule and to classroom layouts that are necessary to meet our safe distancing guidelines. Building entry and circulation corridors and commons spaces will be modified to allow separation of arriving and departing students during class change periods. Administrative controls will also be implemented, such as building entry/exit designation and timing of building entry and exit periods. Students in each class will be enlisted to help at the end of each class session to wipe down the seating area and in-class touchpoints using supplies provided by the college for this purpose. These modifications include both signage and one-way designation of buildings entries. All of this will be done in compliance with emergency egress codes.
Students may have to be isolated or quarantined for a time if they or someone with whom they had significant interaction tests positive for the virus. Faculty are preparing their courses so that they can make allowances for a student who is in quarantine or isolation, whether that be by recording lectures/discussions, bringing the student into a seminar discussion using a remote camera or computer, or making other arrangements (depending, of course, on whether the student is mildly symptomatic or asymptomatic; anyone who becomes seriously ill will not be expected to keep up with classwork during the illness).

**Athletics**
Fall semester intercollegiate and club sport athletic competitions have been entirely suspended through December 31, 2020. Teams are allowed to practice and hold intra-squad scrimmages. The college will consider resumption of athletic competitions for 2021, taking into consideration college and NCAC conference directives.

**Extracurricular**
We have engaged students in the work of reimagining dining, recreation and social gatherings within the realities of a COVID-19 world. Lectures, concerts, etc. will be significantly curtailed. Students, faculty and staff will individually review the Kenyon Commitment (Attachment B) to indicate their agreement to follow the College’s expectations for social distancing, etc.

**Visitors**
Kenyon intends to limit the numbers and shape the itineraries of planned visitors, including but not limited to admissions, athletics, special events and job applicants. These intentional contacts with the outside world are both unavoidable and represent potential for communicating COVID-19 infection.

Planned visitors will be provided with specific guidance on community expectations and procedures, beginning with their first contact with the college in the planning stages of their visit and continuing through their visit experiences. This guidance will parallel that provided to college employees and students, such as pre-visit self monitoring for symptoms.

The campus offices involved with visitors will be outfitted with welcome kits that include infection control / hygiene items such as hand sanitizer and disposable masks. Those Kenyon community members responsible for greeting and escorting visitors will be trained so that they can inform, guide and direct visitors on the college’s infection control measures.

Some level of drop-in visits will be unavoidable. These visitors will be guided by signage and if necessary conversation with Campus Safety or other college employees who may come across them.

Should the pandemic situation result in directives from local, state or federal authorities that impact the college’s ability to receive visitors, then protocols and communications with visitors will be revised accordingly.
V. Monitoring Plan

Objectives of this plan include definition and creation of a system that will provide timely, critical feedback on the status of COVID-19 infection within the Kenyon College community. This feedback will drive containment activities, further monitoring and potentially the shutdown of on-campus operations should that become necessary. Monitoring activities will continue under the Green, Yellow and Red alert levels defined in Attachment E.

*Individual and group testing*

Kenyon College will be contracting its COVID-19 diagnostic testing services. The college will implement nasal, nasopharyngeal and/or oropharyngeal swabs collection and the contracted laboratory services companies, principally Everlywell, will be responsible for sample analysis and reporting. For students, these tests will be overseen by members of the campus Health Services team and collaborating partners (i.e. Knox Technical Center- Practical Nursing Program and Knox Public Health). Specimens will be collected on campus and delivered for testing analysis. Some employee groups for whom it will be a convenience to collect their tests on campus will self-administer their tests, have them collected and prepared for shipping on campus. Everlywell testing kits for other employees will be sent to their homes with detailed instructions for administering, packaging, and shipping the tests.

Test results will be communicated back to Kenyon College, along with KPH, in two to three business days (information as of August 14th). Positive student COVID test results will result in directives from KPH to the campus Health Center for action to initiate isolation housing for students and remote learning, if applicable. Positive faculty/staff COVID test results for Knox County residents will result in KPH taking the lead to initiate isolation. For faculty/staff residing outside of Knox County, the corresponding public health officials from their home county will take the lead. It will be up to the college to decide on work-from-home and remote operations for affected employees.

Initial campus testing will be required of all faculty, staff, and students expecting to reside, study or work on campus. Student testing protocols are described in Attachment C to this plan.

Faculty and staff testing will utilize the same testing services provider as for students. The initial round of testing will be completed concurrent with student arrival testing, for those individuals who will be on campus as of the week of August 17-21, 2020. Employees who are currently working remotely and expect to return to campus at some point during the academic year will be required to complete testing before returning. They must do this so that their results are available prior to their first day of on-campus work. Test results and associated data for all employee testing will be handled the same as for students, see above.
To prevent the spread of COVID-19 beyond Gambier and Knox County, the college will consult with KPH on a testing protocol to be implemented prior to Thanksgiving Break. This plan will need to include special considerations for timing of implementation and potential travel restrictions of sick individuals.

As of the date of this draft plan, Kenyon does not intend to conduct antibody testing as part of its monitoring regime.

Decisions to be driven by testing results would include medical isolation as directed by KPH, quarantine of individuals based upon contact tracing and KPH direction, and potentially some level of campus shutdown in cooperation with KPH. In addition, test results may drive specific, situational containment measures to be developed and possibly implemented in collaboration with KPH.

**Wastewater testing**

Wastewater testing has been implemented in order to provide advance warning of infected individuals in the community as a complement to individual testing. The mechanism by which wastewater provides this warning is that infected individuals have been found to shed virus particles through their digestive tracts well in advance of becoming symptomatic. Expected advance warning would be on the order of three to five days, depending upon overnight sample shipping and typical laboratory turnaround times.

Working cooperatively with the Village of Gambier and its wastewater treatment plant (WWTP) operator, the college has arranged for collection and analysis of wastewater samples at the inflow point of the Village’s WWTP. Sample results will indicate presence and concentration of COVID-19 virus particles in the municipal sewer system. Eight samples taken over four weeks from June 10 through July 10, 2020 were used to determine a baseline. This time period was ideal, as the campus is virtually uninhabited due to cancellation of summer programs while the Village population remained steady. Wastewater sampling has continued since the baseline on at least weekly frequency.

College biology faculty with expertise in virology are reviewing available research and guidance on interpretation of the resulting data. Their goal is to recreate similar models developed for correlating lab analysis results with the number of infected individuals in the Village / campus combined population. It is hoped that this modeling will be able to provide sufficient resolution to discern an infected Village / campus population of only a few persons. Based on actual results during the baseline sampling period through August 3, 2020, it appears that this capability is real. Laboratory analysis of the wastewater sampling results to date have corresponded with the cases and their timing documented by KPH in the Village.
Should wastewater sampling indicate one of the following conditions, individual testing numbers and/or frequency may be increased accordingly:

1. a sudden, significant rise in virus particle concentration coincident with or shortly after initial repopulation of campus, indicating that onboarding students or employees have brought the virus with them; or

2. a sudden rise in virus particle concentration during the semester, indicating that the virus has been introduced within the campus or Village populations and may be spreading.
VI. Containment Plan

This plan defines the processes through which the college will react to monitoring information that indicates that COVID-19 infection is imminent or ongoing within the campus community of students, faculty and staff, or in the surrounding community. It is by necessity closely linked with the monitoring plan. Successful containment efforts will also depend heavily upon both public health infrastructure put in place by the repopulation plan and effective implementation of the communications and community education plan. Containment activities will continue under the Green, Yellow and Red alert levels defined in Attachment E.

This containment plan describes reactive measures such as quarantine, all of which would be implemented in response to feedback generated by the monitoring plan.

Reactive containment measures will be coordinated by Knox Public Health (KPH) and the Cox Health and Counseling Center on Kenyon’s campus. There will be consultation with the college’s senior staff, as needed. A Kenyon College working group has been in regular communication with local public health authorities, meeting weekly as of the date of this revised plan. These meetings have included detailed discussions of the following topics:

- Contact tracing: KPH will take the lead on Kenyon’s contract tracing. The college remains hopeful that the public health prevention measures will maintain a low number of active infections. If additional support is needed, KPH will coordinate the use of college employees or local community volunteers to augment the available KPH contact tracing capacity. In either case, these additional contact tracers would be trained, directed and overseen by KPH.

- Quarantine/ Isolation (Q/I): While KPH has off-site Q/I housing options, Kenyon College has reserved 100 beds (10% of planned fall semester student population) located in the Mount Vernon Comfort Inn leased for this purpose and the college-owned McIlvaine apartments, with the Kenyon Inn considered as a last resort. Keeping students in college-controlled Q/I housing will assist their emotional health, keep them close to academic activities (even via remote learning), and increase the comfort level of parents/guardians in a stressful situation.
  - While in quarantine, students will typically remain in their assigned quarantine housing (whether their campus residence or another space assigned for this purpose) and not interact with other members of the campus community. Student Affairs staff will coordinate meal deliveries of meals provided by the college’s food services provider, AVI. Medical oversight and surveillance to ensure that quarantined students are following requirements will be the college’s responsibility. Eligibility for exit from quarantine will be determined by the college in consultation with KPH.
If a student tests positive, they will be moved immediately from their assigned space on campus to an isolation housing location, with a private bedroom and bathroom. Kenyon will coordinate meal deliveries, while KPH will monitor their health symptoms and coordinate their overall care. The student would need to be cleared by KPH in order to exit isolation housing and return to their assigned residential space on campus.

- Monitor and provide medical care to infected persons: Per Ohio revised statute, KPH is responsible for monitoring and providing medical care to infected persons. Should their capacity be overextended, Cox Health and Counseling Center health services staff could assist as a KPH proxy. Should a student's health needs become severe and extend beyond the KPH and Cox Center scope of practice, the student would be transported to Knox Community Hospital (KCH). If KCH’s capacity has been exceeded, they will coordinate transfer/transportation to a regional medical center selected on the basis of proximity to campus and availability of required services and equipment.
VII. Shutdown Plan

This plan includes both planned shutdowns at semester endings and unplanned shutdowns due to internal or external pandemic conditions. Partial shutdown actions would be implemented as part of the Yellow alert status described in Attachment E. More extensive shutdown of on-campus operations would be part of the Red alert status.

Scheduled shutdowns: ending each semester as intended

The ending of each semester will represent an opportunity for the college to minimize the potential impacts of these planned interactions with the outside world. These impacts have already been reduced significantly by the planned reduction of fall semester student population from 1,800 to approximately 1,000 resident students. The magnitude and complexity of these transition periods will be reduced substantially by students having brought minimal items to campus with them in the first place. This minimalist approach for students will reduce issues associated with a planned shutdown, and would potentially generate even greater benefits in the event of an unplanned shutdown.

The reduction in fall semester, on-campus student population will be achieved by having primarily first- and second-year students on campus for the fall semester, followed by primarily third-year and fourth-year students in the spring semester. This arrangement will mean that campus housing must be deep-cleaned and disinfected between semesters, over the extended, eight-week winter break. This cleaning and disinfection process will be conducted in accordance with the procedures developed for the start of fall semester and including any revised recommendations from CDC or Ohio Department of Health in effect at that time.

While not all students may be able to leave, it is expected that approximately 90% (some international students, student-athletes, and emancipated students may need to remain) will be able to depart campus at the end of fall semester, and more than 95% at the end of spring semester. Due to the large proportion of students departing campus during a relatively short period of time, this process must be carefully planned and closely managed to prevent breaches of infection control practices. Load-out and departure times for departing students will be assigned as specific blocks of time to minimize close-quarters interactions in and around student residential facilities. Maintenance of proper social distancing and hygiene will be critical to preventing community spread within the departing student population that in turn affects receiving communities across the U.S. and around the world.

Faculty and staff will be reminded to be especially mindful of whatever may be the recommended distancing, hygiene and work-from-home practices for the period just before and during the end of fall semester, and similarly for the end of spring semester.

 Unscheduled shutdowns: dictated by circumstances
While it is hoped that this plan never has to be implemented, its development completes the overall planning for a full range of possibilities. Developing it before it is needed eliminates potential sources of error or miscalculation in what would be extremely challenging circumstances.

A senior staff-level steering committee will frequently evaluate the local, state and national pandemic situation in light of the gating factors, consult with KPH leadership, and make recommendations in real time. These recommendations will be considered by the President of the College in rendering a final decision.

Should the on-campus situation appear to require consideration of a shutdown, the college will consult immediately with KPH. In the event of a shutdown order issuing from any level of government, that will also mean immediate consultation with KPH. Similarly, external conditions that appear to be headed towards a problematic situation would also trigger an immediate consultation with KPH. In any of these cases, consultation topics will include whether or not it is advisable for students to return home en masse versus full or partial quarantine / isolation of the student body on campus for some period of time. Discussions would also include actions to be taken by the college or KPH with respect to employees.

The college in collaboration with KPH and the Knox County Emergency Management Agency (EMA), will conduct a joint, interactive planning and response exercise prior to the arrival of the main body of returning students for fall semester. These exercises will include potential scenarios that could result in modification or redirection of the college’s planned “COVID normal” operations or a partial or full shutdown of on-campus operations.

**Triggering data sources**

The following data sources regarding the presence of asymptomatic and symptomatic cases will be monitored, analyzed and interpreted daily:

1. symptomatic individuals self-reporting to campus health center, Residence Life staff, Campus Safety, Human Resources or other college employees;
2. information provided by KPH or testing laboratories regarding diagnostic test results;
3. results of contact tracing;
4. smart thermometer aggregated data;
5. wastewater testing results; and
6. unsolicited observations by community members of individuals displaying symptoms.

This monitoring will support decision-making regarding initiation of operational changes, up to and including unscheduled shutdown.

**Information flows**
A list of possible and confirmed cases within the Kenyon student and employee populations, including documented connections between cases, will be established and maintained by the college. For students, this data will be managed by the Director of Campus Health Services or their designee (Director). For employees, the Human Resources Director or designee (HR) will manage the data. Confirmed information from all of the data sources listed above will be incorporated into the list by the Director / HR, on a daily basis.

Both the student and employee lists will be maintained as cumulative data compilations for the duration of the pandemic. They will be retained as archival documents, subject to any legal requirements or limitations on the retention of such data.

Access to this full listing will be limited to those approved by the Director / HR. The list will also be available in a summary form including only aggregated or non-personally identifying information such as test result date, gender, isolation status and recovery date. These non-personally identifying characteristics will match what is provided on the KPH public dashboard website. Anyone having access to the college’s website will have access to the summary list.

For symptomatic individual self-reporting, the party receiving the report directly will forward the report to either the Director (students) or HR (employees). The Director or HR will then confirm the validity of the case and enter the appropriate data in both the full and summary case lists.

Appropriate, positive case-confirming data from KPH or testing laboratory reports will be entered by the Director or HR as appropriate onto the two lists described above.

Contact tracing results will be generated, maintained and acted upon by KPH.

Wastewater testing results will be processed, analyzed and reported by designated, subject matter expert members of the college’s faculty. The resulting data is being shared with a collective formed for this purpose in the state of Ohio, again under the supervision of college faculty.

Smart thermometer aggregated data will be shared with the campus health center via the smartphone application associated with the smart thermometers. This data will include both temperature and the results of the application’s included daily symptoms checklist. Individuals with temperatures of 100.4 degrees Fahrenheit or higher or with problematic responses to the symptom checklist will be instructed to contact the Director (students) or HR (employees).

Follow-up for unsolicited community observations will begin with the person receiving the observation reporting it to the campus health center. The Director (for students) or HR (for employees) will first check to see if the reported individual is already on the list of known, active cases. If they are not already on that list, then the Director or HR, as appropriate will then determine if the report seems credible and if so, assign a qualified college employee to contact the reportedly symptomatic individual.
Attachment A: Return to Campus Protocols for Employees

Updated August 3, 2020

Kenyon College is committed to lowering the risk of COVID-19 transmission and illness and working to protect the health and safety of our employees, students and guests. In accordance with state and federal orders and recommendations, including the Responsible Restart Ohio Plan and guidance from the Ohio Department of Health (ODH), all employees are required to follow our Return to Campus Protocols (“RTCP”).

Employee Responsibilities

The support of our employees is critical to the successful implementation of our RTCP. Below are the steps employees are required to take until the College deems the RTCP no longer necessary. We encourage the continuation of telework arrangements wherever possible. By agreement with their supervisor, employees who have been performing their duties successfully via telework may continue to do so until further notice.

Mandatory Daily Health Assessment

All employees are required to complete a daily health assessment, described below, prior to reporting to work on campus. All employees must also follow the reporting instructions that follow depending on the results of their health assessment.

- **Daily Temperature Checks:** Take your temperature each day before reporting to work.
- **Daily Symptom Checks:** Consider whether you are experiencing any symptoms associated with COVID-19. Employees are responsible for checking the CDC website for the most up-to-date list of symptoms. As of July 24, 2020, the Centers for Disease Control (CDC) has identified the following symptoms of COVID-19:
  - Cough
  - Fever or chills
  - 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
  - Diarrhea
- **Daily Exposure Checks:** Consider whether you have been exposed to someone with confirmed COVID-19 within the last 14 days.
- **Take Action:** If you have a temperature of 100.4 degrees Fahrenheit or higher, are experiencing symptoms, have been exposed to someone with confirmed COVID-19, or are subject to or living with someone subject to a quarantine or isolation order, follow the reporting instructions below.
Reporting Instructions For Symptomatic and Potentially Exposed Employees

- If you have a temperature of 100.4 degrees Fahrenheit or higher, or if you are experiencing any of the above COVID-19 symptoms:
  - Do not report to work;
  - Immediately notify your supervisor and the Office of Human Resources;
  - Monitor your symptoms and call a doctor or use telemedicine if your symptoms concern you; and
  - Return to work only when all three of the following are true: (1) you’ve had no fever above 100.4 degrees Fahrenheit for at least three full days without taking medication to reduce fever, (2) there is improvement in your respiratory symptoms, if any, for three full days, and (3) at least ten days have passed since your symptoms began.

- If you have been exposed to someone with confirmed COVID-19:
  - Do not come to campus or report to work on campus;
  - Immediately notify your supervisor and the Office of Human Resources;
  - If you are not experiencing symptoms, you may return to work 10 days after the time you were exposed; and
  - If you are experiencing symptoms, you may not return to work on campus for at least 14 days after the time you were exposed. Once this 14-day period has passed, you may return to work when a doctor confirms that the cause of your symptoms is not COVID-19 and approves your return to work, or all three of the following are true: (1) you’ve had no fever above 100.4 degrees Fahrenheit for at least three full days without taking medication to reduce fever, (2) there is improvement in your respiratory symptoms, if any, for three full days, and (3) at least ten days have passed since your symptoms began.

Confidentiality: Any medical information you share with your supervisor or Human Resources will be kept confidential. While we have an obligation to notify employees of their potential exposure to someone who is confirmed or suspected to have COVID-19, our policy is to not reveal the identity of the individual with confirmed or suspected COVID-19.

Pay and Time-Reporting for Staff for COVID-19 Quarantine or Illness

By reporting to on-campus work you are certifying that you are fit for duty and do not have an elevated temperature or symptoms of COVID-19 and have not been exposed to someone who has COVID-19. (Employees who, by agreement with their supervisor, are able to continue to telework, please do so until further notice.) If you are unable to report to on-campus work based on the results of your daily health assessment; have been exposed to someone with confirmed COVID-19 and will be in quarantine; or are diagnosed with COVID-19, Kenyon will provide paid COVID-19 Health Leave. This paid leave will apply to all benefit-eligible staff; can only be utilized for COVID related illness and is in addition to paid leave (SPF, Vacation) already provided. Part-time or on-call non-benefit-eligible employees will also receive paid COVID-19 Health Leave but will only be paid for the hours they were already scheduled during the
quarantine or illness period. Hourly, non-exempt employees using the COVID-19 Health Leave should use the “COVID” pay code when entering the applicable hours. Please contact the Office of Human Resources for more information.

**Mandatory Testing**

To protect the health and safety of all employees and students, employees may be required to undergo mandatory COVID-19 testing. In the event of mandatory COVID-19 testing, employees are still required to observe infection control practices, such as social distancing, regular handwashing, and mask wearing.

**Masks or Facial Coverings**

Employees are required to wear a mask or facial covering while on campus unless otherwise instructed by the department head or the employee’s doctor. At a minimum, facial coverings should be cloth/fabric and cover the individual’s nose, mouth and chin. The print of facial coverings must be in good taste and professional.

All employees are required to wear masks or facial coverings, except for the following reasons:

- Masks or facial coverings are not advisable for health reasons;
- The employee works alone in an assigned work area (office or cubicle where social distancing of at least six feet is possible);
- Masks or facial coverings are in violation of documented industry standards or Ohio Rules or Regulations.
- There is a functional (practical) reason for the employee not to wear a mask or facial covering when performing their job duties and the supervisor has given the employee written permission to opt-out of wearing a mask while completing certain tasks.

Employees who qualify for this exception will be notified.

Employees must provide written justification, upon request, explaining why they are not required to wear a mask or facial covering while on campus for any of the listed reasons. The College will need to provide this written justification if/when questioned by the Department of Health.

**Social Distancing Requirements**

- Maintain a distance of at least six feet from other individuals whenever possible.
- Maintain social distancing when waiting for an elevator or on an elevator.
- Do not gather or congregate in groups while on lunch or rest breaks.
- Remove shared candy dishes from desks and avoid other communal foods.
- Limit the number of people in common areas (work/copy center, copy rooms, conference rooms, collaboration space) to ensure appropriate social distancing.
- Movement through hallways should be done with social distancing considerations.
- Conduct meetings via telephone or videoconference whenever possible. If telephonic or electronic meetings are not possible, attendees should maintain a distance of six feet during the meeting.
- Limit the number of individuals in kitchens and break areas to ensure social distancing.
• Individuals using kitchens are to wipe down all items before and after use.
• Use of drinking fountains will be prohibited and ice machines will be turned off.

**Hand Washing and Hygiene**

• Employees should frequently wash their hands with soap and water for at least 20 seconds or use hand sanitizer when hand washing is not possible.
• Employees who need to cough or sneeze should do so into a tissue (and then quickly and properly dispose of the tissue) or into their elbow or sleeve if a tissue is not readily available, and then wash or sanitize their hands.

**Environmental Cleaning and Disinfection**

• All frequently touched surfaces in the workplace, such as workstations, keyboards, telephones, handrails and doorknobs, will be routinely cleaned and disinfected.
• Employees are encouraged to refrain from using others’ phones, desks, offices, or other work tools and equipment, when possible. If necessary, clean and disinfect these items before and after use.
• Disposable wipes will be provided so that commonly used surfaces (for example, doorknobs, keyboards, remote controls, desks, other work tools and equipment) can be wiped down by employees before each use.
• If a sick employee is suspected or confirmed to have COVID-19, maintenance and facilities staff will follow CDC cleaning and disinfecting guidelines.

**Meetings and Gatherings**

• Carefully consider whether travel is necessary.
• Consider using videoconferencing or teleconferencing when possible for work-related meetings and gatherings.
• Consider canceling, adjusting, or postponing large work-related meetings or gatherings that can only occur in-person.
• Consider taking lunch and rest breaks alone.
• When videoconferencing or teleconferencing is not possible, hold meetings in open, well-ventilated spaces.

**Travel**

Anyone traveling out of state must notify their supervisor in advance of their travel and may be asked to quarantine (working from home if possible) for a period of 14 days upon their return. Currently, Ohio implemented a COVID-19 travel advisory where those entering Ohio after travel to states reporting positive testing rates of 15% or higher for COVID-19 are advised to self-quarantine for 14 days. Employees are responsible for checking the Ohio Department of Health COVID-19 Travel Advisory website for an up-to-date list of states.
Accommodation or Variance Request

The Ohio Department of Health recommends that those who consider themselves to be in the Vulnerable Individuals classification should continue to stay in their residence to the extent possible. Vulnerable Individuals as defined by the CDC are: 1) older adults, and 2) people with certain health conditions including but not limited to: cancer, chronic kidney disease, COPD (chronic obstructive pulmonary disease) immunocompromised state (weakened immune system) from solid organ transplant, obesity (body mass index [BMI] of 30 or higher), serious heart conditions, sickle cell disease and type 2 diabetes mellitus. Please check the CDC website for the most up-to-date list of those who are considered at an increased risk for severe illness.

Employees who need an accommodation or variance from any workplace requirement (that has not already been met by teleworking or other arrangement approved by the supervisor) should reach out to the Office of Human Resources (staff) or the Office of the Provost (faculty) to make a request. The request must be submitted in writing and employees will be required to provide written documentation to support their request. All requests, including requests for work from home and teleworking arrangements, will be evaluated in accordance with federal and state laws and College policies.

Compliance

Failure to comply with this RTCP could endanger your co-workers, our students and the public and may result in discipline, up to and including termination.

Questions?

As local, state and federal guidance and requirements regarding COVID-19 continue to evolve, our directives may change. Thank you for agreeing to read these guidelines and protocols and any future updates in their entirety. Any questions or concerns should be directed to your supervisor, the Office of Human Resources (staff) or the Office of the Provost (faculty).
Attachment B: The Kenyon Commitment

Kenyon Commitment

As a member of the Kenyon College community, I support a culture in which I contribute to the well-being of others while I also care for myself. I am aware that my individual decisions may greatly impact the health of fellow community members and contribute to the success of the 2020-2021 academic year. In recognition of this interconnectedness:

I am committed to:

Ensuring the overall health and safety of the Kenyon Community. I will do this by putting the health of my community, the Kenyon community, first, and realizing that my actions have effects on others, who may be more vulnerable than I, doing my part to keep them safe.

I am committed to:

Making health-conscious decisions that will limit my exposure and exposure of others to Covid-19 including wearing a face-covering, washing or sanitizing my hands regularly, and maintaining social distancing to the best of my ability.

I am committed to:

Regularly monitoring myself for the symptoms of COVID-19. If displaying symptoms such as fever of 100.4 F (38 C) or higher, dry cough, difficulty breathing, chills, repeated shaking with chills, muscle pain, headache, sore throat or loss of taste or smell, I will immediately report to a medical professional and avoid contact with other members of the Community.

I am committed to:

Encouraging safe and sanitary behaviors in others. Options I have in encouraging such behaviors include reminding my fellow community member of community expectations and referring them to informational resources.
Attachment C: Student Testing, Quarantine and Isolation Protocols

Move-in Process
Friday, August 21: Students from international locations
Monday, August 24: Non-First-Year Students
Tuesday, August 25: Non-First-Year Students
Wednesday, August 26: First-Year Students
Thursday, August 27: First-Years and New Transfer Students

- EverlyWell PCR test administered to all students at move-in
  - Testing location: Toan Track at the KAC
  - **Testing capacity numbers**
    - 420 students (max) tested per day, 5 hours per day
      - 14 testing stations
      - Approximately 5-10 minutes per student
      - Students will be provided 5-hour (9am-2pm) time slots to be tested
      - Students to receive their “check-in” confirmed stickers, residence hall key, welcome kits and other information
      - Students move-in to their assigned residence hall
  - Flow for testing procedure in Toan Track:
    - Students park in South Lot 2
    - Enter KAC via the Meadow Lane doors
    - Staff available to direct, check face coverings (extras on hand to provide to folks who do not have one)
    - Students and guest check-in at outdoor tents or holding area just inside the doors
    - Staff to ask health check questions, collect consent forms
  - Students self-administer the test while a staff member observes:
    - Cox Health Center staff
    - Athletics trainers
    - Other college employees
  - Staff collects completed tests and places in bin for shipping
  - Students & their guests exit the KAC and proceed to their residential space.
  - Completed test kits collected same day and shipped via UPS

- EverlyWell test results provided within 72 hours to both the student and the Cox Health & Counseling Center.
○ Student will obtain results via email and the EverlyWell tableau platform. If the test result is positive, an EverlyWell affiliated physician will attempt three times to contact the student to discuss their results.
○ All students will “self-quarantine” until test results are received:
  ■ Students will remain in their residence hall rooms as much as possible, and follow guidelines on wearing face coverings, etc.
  ■ Takeout meals will be provided in Peirce - no seating in the dining hall
  ■ Students may not attend class until they have received their NEGATIVE test results
  ■ NB: Test results may not be available over the weekend, i.e. students tested on a Friday may not receive results until at least Monday.

● Additional notes:
  ○ Students traveling from domestic locations listed on Ohio’s travel advisory will self-quarantine until test results are received.
  ○ Students are encouraged to have a “quarantine/isolation bag” ready in case they test positive and need to isolate.
  ○ Students traveling from international locations will begin arriving August 17 and plan to self-quarantine until test results are received.

First 14-Day Testing Protocols:
● In addition to being tested upon arrival, all students will be tested 2 more times within the first 14 days of arrival on campus.
● Testing location: Gund Commons Ballroom
● Follow similar protocols as above, with sign-up schedules

Isolation Protocols If a Student Tests Positive (either during move-in process or afterwards):
● EverlyWell informs Knox Public Health (KPH)
● Student is immediately transported (coordinated by Campus Safety) to one of the following locations in order (capacity listed):
  ○ Comfort Inn (56)
  ○ McIlvaine Apartments (14) - not available until early October 2020
  ○ Kenyon Inn (30) - only if necessary
  ○ Daily symptom checks will be performed virtually by KPH
  ○ AVI (Kenyon’s food service) will deliver three meals per day to each individual
  ■ Students with specific dietary needs will be accommodated - who to coordinate?
  ○ Campus Safety to coordinate transportation protocols:
  ■ Transportation staff and vehicle to be provided appropriate PPE.
- Vehicle 54 (a 12-passenger van) will be used to transport
- Driver and passengers will wear appropriate PPEs at all times
- Students are responsible for carrying necessary belongings to/from the vehicle
- Vehicles will be disinfected after each transport.
  - Students to be provided cleaning/disinfecting supplies
- Contact tracing will be performed by KPH personnel or volunteers directed by KPH
  - Based on contact tracing, and with direction from KPH, those who have come into close contact (within 6 feet for 15 minutes or more) with the isolated student(s) will be asked to self-quarantine and/or move to quarantine housing (depending on circumstances)
- KPH will determine when the student may be released from isolation and will provide the student a letter that confirms release from isolation.

Reporting
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Resources:


Attachment D: Glossary of Terms

All of the following terms are copied directly from the Texas Medical Center website (https://www.tmc.edu/news/2020/05/covid-19-crisis-catalog-a-glossary-of-terms/). Not all are used in this plan in its present form as of August 14, 2020; however, it is felt that this more general reference may prove useful.

**Acute respiratory stress syndrome (ARDS):** a condition in which fluid builds up in the air sacs of the lungs. The fluid prohibits the lungs from getting enough air, leading to a deprivation of oxygen in the bloodstream. The condition is often fatal.

**Asymptomatic:** presenting no symptoms of disease. In the case of COVID-19, this means absence of fever, dry cough, sore throat, shortness of breath and body aches, among other less common symptoms. Notably, it is recommended that individuals do not get tested unless they exhibit symptoms because of the risk of false negatives. In other words, most tests will not be accurate unless symptoms are present.

**Case fatality rate:** the ratio of deaths from COVID-19 to the total number of individuals diagnosed with the disease.

**Clinical trial:** research experiments on human participants designed to answer questions about new treatments; in the case of COVID-19 and coronaviruses, the safety and efficacy of a potential vaccine.

**Community spread:** the spread of a contagious disease in a geographic area in which there is no knowledge of how someone contracted the disease. In other words, no known contact can be traced to other infected individuals.

**Confirmed positive case:** in contrast to a presumptive positive case, this is confirmation from the Centers for Disease Control and Prevention (CDC) of a positive COVID-19 test in an individual.

**Contact tracing:** identifying and monitoring people who may have come into contact with an infectious person. In the case of COVID-19, monitoring usually involves self-quarantine as an effort to control the spread of disease.

**Contactless:** without contact; for example, “contactless delivery” would include leaving purchased items at the entryway of a home rather than handing it directly to a person.
**Containment area:** a geographical zone with limited access in or out in an effort to contain an outbreak.

**Coronavirus:** a family of viruses that include SARS (severe acute respiratory syndrome) and MERS (Middle East respiratory syndrome) as well as other respiratory illnesses. A coronaviruses, also known as a CoV, is typically spread between animals and humans—an event known as zoonotic transfer—and they are named for the term “corona”—Latin for crown—which refers to the shape of the virus when observed microscopically.

**COVID-19:** COVID-19 stands for novel coronavirus disease 2019, which refers to the year of its initial detection. COVID-19 is the illness related to the current pandemic; the illness is caused by the virus SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2).

**Epidemic:** a widespread occurrence of an infectious disease in a community or geographic area.

**Epidemic curve:** a graph or chart depicting the progression of an outbreak in a particular population.

**Epidemiology:** a branch of medicine which deals largely with public health, including the incidence, distribution, analysis and control of diseases.

**Essential business:** although this definition varies between cities and states based on individual restrictions, essential businesses are those that serve a critical purpose, such as grocery stores, pharmacies, waste collection, health care providers, gas stations, banks, transportation and agriculture services. This contrasts to non-essential businesses, which serve more recreational purposes.

**Flattening the curve:** an attempt to create a more gradual uptick of cases, rather than a steep rise, in an effort to avoid overburdening the health care system all once. Notably, “flattening the curve” does not necessarily decrease the projected number of cases, but spreads them out over a period of time.

**Herd immunity:** also known as community immunity, this is the reduction in risk of infection within a population, often because of previous exposure or vaccination.

**Hydroxychloroquine:** an oral drug used to treat malaria, rheumatoid arthritis and lupus. Its effectiveness in treating patients with COVID-19 disease is still in question.

**Immune surveillance:** the process of monitoring the immune system’s activities, which may include the detection and destruction of foreign substances, cells or tissues.
**Immunosuppressed:** an individual who experiences reduced efficacy of the immune system as a result of health conditions not related to COVID-19 disease. People who are immunosuppressed are at greater risk for hospitalization and severe sickness from the SARS-CoV-2 virus.

**Incubation period:** the time between when an individual is first exposed to the virus and the appearance of symptoms. A person’s level of contagion before symptoms arise is not known, although most experts believe people are most contagious after they begin exhibiting symptoms.

**Index case:** the first documented case of an infectious disease.

**Index patient:** the first person infected with a disease in an epidemic. Interchangeable with the term “patient zero.”

**Lockdown:** an emergency measure in which individuals are restricted from certain areas in an attempt to control exposure or transmission of disease. In a lockdown during an epidemic, individuals are encouraged to stay home.

**National emergency:** a state of emergency resulting from the global threat of the pandemic. On March 13, 2020, President Trump issued a national emergency concerning the COVID-19 outbreak, which allowed for loosened restrictions on tele-health as well as certain requirements for hospitals and health care providers to allow them to respond to the crisis.

**Novel coronavirus:** a new strain of coronavirus, or nCoV, that has never been detected in humans.

**Pandemic:** a worldwide spread of an infectious disease, with larger reach than an epidemic. Until COVID-19, the last pandemic was the H1N1 influenza outbreak in 2009.

**Patient zero:** the first individual infected with a disease during an epidemic.

**Person-to-person transmission:** when a virus is spread between people, including physical contact or coughing and sneezing. This is in contrast to when a virus is spread via animals or through contaminated objects or surfaces.

**Physical distancing:** the practice of maintaining greater space between oneself and others and/or avoiding direct contact with other people.

**PPE:** personal protective equipment, or PPE, is specialized clothing and equipment used as a safeguard against health hazards including exposure to infectious diseases through physical
contact or airborne particles. PPE is designed to protect parts of the body typically exposed in normal attire, including the nose, mouth, eyes, hands and feet. Notably, N95 respirators are considered ideal for health care workers who may be exposed to SARS-CoV-2.

**Pre-symptomatic:** an infected individual who is not yet displaying symptoms of an illness or disease.

**Presumptive positive case:** an individual who has tested positive for COVID-19 by a local public health lab, but whose results are awaiting confirmation from the CDC.

**PUI:** person under investigation, or a PUI, is an individual who is suspected of potentially having COVID-19.

**Remdesivir:** an investigational antiviral drug that is administered intravenously and inhibits viral replication. It is a promising drug for the treatment of COVID-19 disease and was first developed to treat Ebola.

**Respirator:** a device designed to protect individuals from inhaling something hazardous in the air, in this case, particulate that may be contaminated with the SARS-CoV-2 virus.

**SARS-CoV2:** the virus fully defined as “severe acute respiratory syndrome coronavirus 2” causes the disease COVID-19.

**Screening:** the act of verifying symptoms and potential exposure before testing for the virus.

**Self-isolation:** the act of separating oneself from others.

**Self-quarantine:** the act of refraining from any contact with other individuals for a period of time—in the case of COVID-19, two weeks—to observe whether any symptoms of the disease will arise after potential exposure.

**Shelter-in-place:** typically issued by local government, a shelter-in-place asks residents to remain at home and only leave to perform duties deemed essential in an effort to slow transmission of and exposure to the virus.

**Social distancing:** the act of remaining physically apart in an effort to stem transmission of COVID-19. Social distancing can include a move to remote work, the cancellation of events and remaining at least six feet away from other individuals.
**Super-spreader:** a highly contagious individual who can spread an infectious disease to a large number of uninfected people through a network of contacts.

**Symptomatic:** showing symptoms of COVID-19, which can include a fever, dry cough, shortness of breath and body aches. Health officials believe the risk of transmitting the virus is highest when an individual is symptomatic.

**Vaccine:** a biological preparation of organisms that provides immunity to a particular infectious disease. Currently, there is no vaccine for COVID-19.

**Ventilator:** a machine designed to move air in and out of the lungs for a patient who is physically unable to breathe or who is not breathing well. Because COVID-19 can cause severe lower respiratory infection, ventilators are a critical machine for patients with severe disease.
Attachment E: Alert Status and Response Chart

To be added week of September 7-11, 2020.