

# CMIS COVID-19 PROTOCOLS

Date Updated: August 3, 2022

## PERSONAL PREVENTION PROTOCOL

The personal prevention protocols continue to be our best defense from COVID-19 and we must all continue to maintain a high standard, which is inline with all Ministry of Education and International Schools Association of Thailand guidelines and and Thailand's COVID-19 situation from the Center for COVID-19 Situation Administration (CCSA) and the Chiang Mai Communicable Disease Committee. This guiding document will be updated regularly as new government information and updated school data become available.





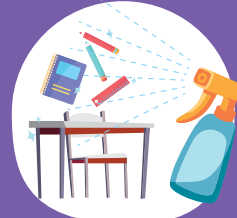
Masks on



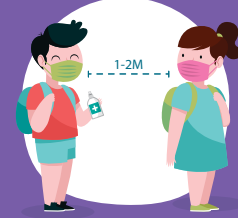
Hand washing  
or sanitizing



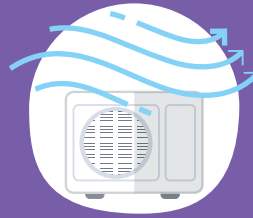
Personal  
water bottles



Regular cleaning  
and disinfection



Distancing



Airflow and  
Circulation

## SCHOOL BASED PREVENTION PROTOCOL

The following apply to all students, faculty, and staff on campus:

- Wearing a well- fitting face mask must be worn at all time in the classroom, when poorly ventilated places and if can not keep a distance of at least 1 meter from each other.
  - All students, faculty, and staff must wear a face mask (no vents). It is recommended that they have a spare mask with them. Masks are to be worn at all times other than when eating/drinking. Neck straps are advised to avoid loss of face masks when they are removed.
- Frequent hand washing or sanitizing will be required.
  - Hand washing stations are easily accessible.
    - Wash hands upon arrival to campus.
    - Wash hands after breaks.
    - Wash hands before and after lunch.
    - Wash hands after using the toilet.
- Students should bring their own water bottles.
- Chairs/desks will be sanitized by the MS/HS students at the end of each class.
- All students, faculty, and staff will practice distancing measures on campus. Seating in classrooms and the cafeteria has been adjusted to help students remain at a safe distance from one another.
- Our dedicated cleaning staff will adhere to strict cleaning schedules through out the day.
- Air purifiers (HEPA) will be on inside the classrooms and workspaces, while students are on campus.

# ENTRANCE AND EXIT PROTOCOLS

In an attempt to minimize the risk of COVID-19 exposure, prior to bringing your child to school each day, please screen for symptoms of COVID-19.

## DAILY SELF-SCREENING CHECKLIST



Fever



Sore throat



Cough



Difficulty breathing



Loss of taste or smell



Vomiting or diarrhea

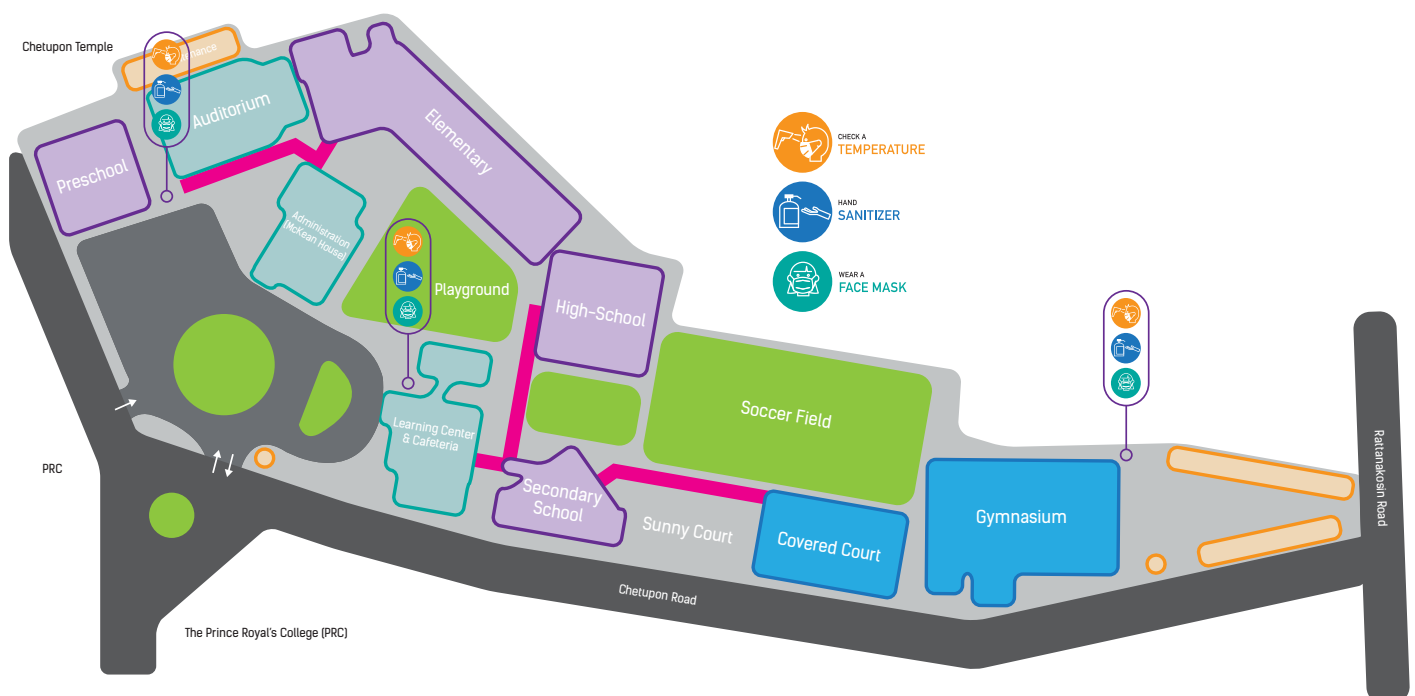


Undiagnosed rash or sores

### MORNING DROP OFF : 7:00 - 7:40 AM

When dropping off of students, parents are to remain in their vehicle.

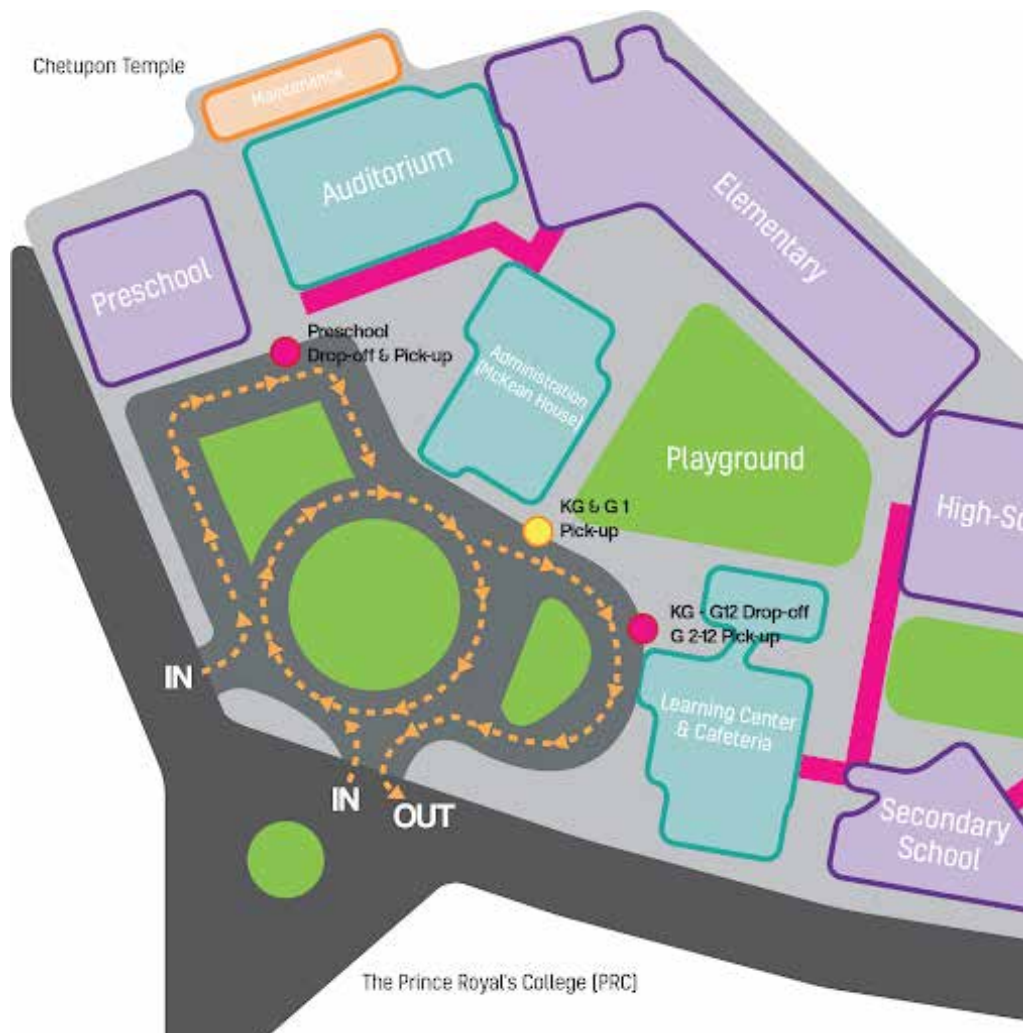
- Students will have access to campus no earlier than 7:00 am.
- All students must wear a mask in the classroom.
- PreK students will be dropped off near the auditorium.
- All other students are to be dropped off at the entrance near the cafeteria.
- Temperatures will be checked and hands will be sanitized before entering the school.
- Students who arrive by foot or by bicycle will have their temperature checked and hands sanitized at the gate near the cafeteria.
- Students will go to designated areas when they arrive after 7:00 am.
  - PreK - G5: Playground and Mounds
  - MS: Astroturf or Grass field
  - HS: Covered Court and S Building



## AFTER SCHOOL PICK UP: 2:35 - 3:00 PM

Three places are allocated for picking up students at the end of the day. Parents are to remain in their vehicle at all times and display their students name and grade clearly in the windscreen.

- PreK – Students will be picked up near the auditorium.
- KG & Gr 1 – Students will be picked up near the Admin Building entrance.
- Gr 2 – Gr 12 – Students will be picked up near the main entrance gate, at the cafeteria. (Some secondary students will arrange to meet their parents off campus or have their own transportation arranged to get home.)
- Elementary students with older siblings can make arrangements with the homeroom teachers to collect them and meet parents off campus or make their own way home. Please communicate your pick up plan with your child and their teacher.



# ADDITIONAL PROTOCOLS ON CAMPUS

## CLASSROOMS

- Students have an assigned workspace within the class (desk and chair).
- Desks are placed to ensure physical distancing of 1 - 2 meters.
- Teachers will minimize shared items as much as possible.
- Desks and commonly touched surfaces will be sanitized morning and afternoon in elementary classrooms.
- Desks will be sanitized at the end of each class for middle school and high school classes. Commonly touched surfaces will be sanitized regularly.
- Masks require in classroom learning, and close contact activities.
- Masks aren't mandatory in PE . When students are distanced, outside or active, masks can be removed.

## STUDENT SUPPORT

- As much as possible, educators will work in sole divisions and/or will allocate collaboration methods to limit the number of people they come in contact with.
- Inclusion support will be the primary method of support, when possible.
- Protocols will be implemented to limit the number of students accessing the SST room to ensure distancing and limiting contact with students in other grades.
- Alternative work spaces will be identified for group work and/or for SST educators.

## HALLWAYS

- The hallways have been marked to designate the direction of traffic. Students will be asked to maintain distancing while moving between spaces.

## PUBLIC AREAS

- All public areas are cleaned and disinfected twice a day.

## LEARNING CENTER (LIBRARY)

- The learning center will be used for scheduled classes, independent study, and through coordination with the teacher.
- Furniture and learning spaces have been adapted to increase physical distancing (chairs removed, seats marked for class instruction, etc).
- Students using the learning center are expected to follow safety protocols as needed.

## CAFETERIA

- Breakfast will not be served, until further notice.
- Lunch will be served within the cafeteria but with staggered lunch times and safety procedures in place to isolate each division as much as possible.
- Desks and commonly touched surfaces will be sanitized morning and afternoon.

## BREAK TIMES

- The break times will proceed on their usual schedules.
- Students follow physical distancing procedures and are supervised by duty monitors.
- Masks can be removed when outside and open air.

## ASAs

- These activities will follow the same mandates as the regular day. Masks will be required for indoor activities, masks are optional for those outside, distanced, or active.

# TESTING AND CASE RESPONSE PLAN

## SUSPECTED/CONFIRMED POSITIVE CASE

**All decisions regarding the isolation process are dependent upon the discretion of the government. COVID-19 positive patients receive free treatment at registered hospitals, depending on their medical benefits. For Thai citizen the 1330 hotline and universal Coverage Emergency for Patient Scheme is in place, please use the 1669 hotline assessing their eligibility.**

If a person becomes sick during the day with suspected symptoms of COVID-19:

- The school has identified, and trained, a COVID-19 response team.
- A temporary isolation area is set up in the school for suspected cases if needed. CMIS has requested Home Isolation as its first line of support.
- If a person displays any symptoms (fever, cough, congestion) of COVID-19:
  - They will be taken to the isolation area and examined and tested by the school nurse.
  - The school nurse will contact the parents or guardian immediately to facilitate the following procedures:
    - **The parents will pick up the student and any family members at school and they must consult a doctor immediately.**
    - If COVID-19 is suspected, then the student will need to obtain an ATK test and submit the results and medical report to the school immediately.
    - If a person is an ATK tested and RT-PCR tested for COVID-19 and tests positive, they must alert the school immediately (CMIS would also notify the local Chiang Mai government).
    - If there is a possible case (displaying symptoms) - Individuals will be conducted the ATK test or sent to the Acute Respiratory Infection (ARI) clinic to go through the Patient Under Investigation (PUI) screening process (normally a free screening).
      - If positive, the hospital will alert the government.
      - Then the patient is transferred to an available hospital.
        - If they are at a green / yellow /risk level, they will be OPD cases and Home Isolation. Families are responsible for all medical expenses based on their medical benefits.

Please note that in almost every instance these symptoms have been noticed before the individual comes to school, this protocol has been done through the home/family with support from the Health Office.

If the health office is notified of a positive ATK or RT-PCR test, the health office will conduct an investigation to determine individuals that are high risk, low risk, no risk. If students need to go home to isolate, take an ATK test, or provide time for cleaning the COVID team will notify families and communicate with the student.

CMIS is required to notify the Ministry of Education of any positive cases.



## CONTACT TRACING PROTOCOLS

If a person becomes sick with symptoms of COVID-19 or has been in contact with a confirmed case, they are required to reach out to the CMIS health office to undergo the PUI (person under investigation) process. The health office will interview the family to review the history, movement, and symptoms.

# COVID-19 PROCEDURE CARD

01



WHAT SHOULD I DO IF I HAVE FLU-LIKE SYMPTOMS AND/OR HAVE BEEN IN CLOSE CONTACT WITH A COVID-19 INFECTED PERSON?

- ▶ Self- isolate
- ▶ Do an ATK test **immediately**

02



WHAT TO DO NEXT?

Contact **Nurse Siam 089-635-4978**  
or **Nurse Bank 095-665-1792**  
as soon as possible.

03



WHAT DO I NEED TO REPORT TO THE SCHOOL NURSE?

- ▶ Your name and position,
- ▶ **When** did you take the **ATK test?**
- ▶ **When** did you **start feeling sick?**
- ▶ **When and where and who** you might have contracted the disease from?
- ▶ **How long** were you in contact with them?
- ▶ **List of people** you were in **close contact with?**

The Health office will conduct COVID-19 case investigations, contact tracing as well as notify those who were exposed **within 24 hours.**

**You will only hear from the Health office, if you are categorized as a high-risk close contact group.**

**“THE HEALTH OFFICE MIGHT (ONLY IF NECESSARY) LATER ANNOUNCE TO THE COMMUNITY”**

FROM THAT INFORMATION, THE INDIVIDUAL'S RISK LEVEL WILL BE ASSESSED:

	CONDITION	RECOMMENDATIONS
NO RISK	<ul style="list-style-type: none"> <li>● IF individuals were exposed to low risk close contact.</li> <li>● IF individuals were NOT exposed to COVID-19 person.</li> </ul>	<ul style="list-style-type: none"> <li>● Follow universal prevention DMHTA               <ul style="list-style-type: none"> <li>○ Distancing</li> <li>○ Mask</li> <li>○ Hand washing</li> <li>○ Temperature check</li> <li>○ (Self)-Assessment</li> </ul> </li> </ul>
LOW RISK	<ul style="list-style-type: none"> <li>● IF individuals were exposed to COVID-19 and had confirmed COVID-19 within the past 90 days.</li> <li>● IF individuals were exposed to high risk close contact*.</li> </ul>	<ul style="list-style-type: none"> <li>● No quarantine.</li> <li>● Self-ATK test <b>when developed symptoms</b></li> <li>● Self-monitor for signs and symptoms for 10 days after exposure.</li> </ul>
MODERATE RISK	<ul style="list-style-type: none"> <li>● IF individuals were exposed to COVID-19 and are up to date on COVID-19 vaccinations, NOT develop symptoms.</li> <li>● IF individuals were exposed to COVID-19 in the household OR stay overnight and are up to date on COVID-19 vaccinations.</li> </ul>	<ul style="list-style-type: none"> <li>● No quarantine.</li> <li>● Self-ATK test <b>when developed symptoms</b></li> <li>● Self-monitor for signs and symptoms for 10 days after exposure.</li> </ul> <p><b>* if complete home isolation IS possible, including isolation from family members in the same household.</b></p>

Source: Center for Disease Control and Prevention; Quarantine and Isolation (CDC), Center for COVID-19 Situation Administration (CCSA), Department of Disease Control, Ministry of public Health, Chiang Mai Communi-cable Disease Comittee.

**FROM THAT INFORMATION, THE INDIVIDUAL'S RISK LEVEL WILL BE ASSESSED:**

	CONDITION	RECOMMENDATIONS
<b>HIGH RISK</b>	<ul style="list-style-type: none"> <li>● IF individuals were exposed to COVID-19 and are NOT up to date on COVID-19 vaccinations.</li> <li>● IF individuals were exposed to COVID-19 in the household OR stay overnight with an infected person, unless up to date on COVID-19 vaccinations.</li> <li>● IF individuals were exposed to COVID-19 and developed symptoms.</li> </ul>	<ul style="list-style-type: none"> <li>● Wearing well-fitting face mask all time in the classroom or when in poorly ventilated place.</li> <li>● Self-monitor for signs and symptoms for 10 days after exposure.</li> <li>● Self- ATK test <b>when developed symptoms.</b></li> </ul> <div style="border: 1px solid #ccc; border-radius: 15px; padding: 10px; background-color: #fff; margin: 10px 0;"> <p><b>Take ATK test on day 0.</b></p> <ul style="list-style-type: none"> <li>○ If the ATK test <b>positive</b> :           <ul style="list-style-type: none"> <li>◆ Stay home and quarantine for 7 days.</li> <li>◆ Take ATK test on day 7 before returning back to school.</li> </ul> </li> <li>○ If the ATK test <b>negative</b> :           <ul style="list-style-type: none"> <li>◆ Follow sickness policy; 24 hrs free symptoms.</li> </ul> </li> </ul> </div> <p><b>* if complete home isolation is NOT possible, including isolation from family members in the same household.</b></p>
<b>COVID POSITIVE</b>	<ul style="list-style-type: none"> <li>● IF individuals tested positive for COVID-19 or have symptoms, regardless of vaccination status.</li> </ul>	<ul style="list-style-type: none"> <li>● Stay home for 7 days and isolate from others in their home.</li> <li>● Take ATK test on day 7 before returning back to school.</li> <li>● End isolation after 7 days if they are fever-free for 24 hours (without the use of fever-reducing medication) and their symptoms are improving.</li> <li>● Self-monitor for signs and symptoms for 10 days after exposure.</li> </ul>

Source: Center for Disease Control and Prevention; Quarantine and Isolation (CDC), Center for COVID-19 Situation Administration (CCSA), Department of Disease Control, Ministry of public Health, Chiang Mai Communitable Disease Committee.

## COVID-19 RESPONSE TEAM

The team will be responsible for managing the situation if a COVID-19 case outbreak occurs on campus. They will isolate those that are possibly infected and provide care (mental health as well as basic needs) while also contacting the local government and parents.

- School Nurses
- Ex-Co (Executive Committee)
- Counselors
- Maintenance
- Registrar (home/school committee)

If there is a possible cluster identified on campus (this scenario will result in a 7 day campus closure and return to MLP):

- The school will notify the parents of students within the cluster.
- The school will contact the local health officials to inspect and determine the next steps.
- The school will be dismissed and parents will be notified to pick up their children.
- The local health officials will determine if a government-mandated field hospital needs to be established and, if so, they will manage and oversee the care and dismissal of individuals within the cluster.
- Parents will be informed of further instructions.

## COMMUNITY EXPOSURE

- In the case of a potential exposure in the community, students and families will be expected to self-isolate at home. Students will be able to access their classes through the MLP format. Students can log into their classes following their assigned schedule to attend their classes in real time.

## DEFINITION OF TERMS

- **Person Under Investigation (PUI)** is defined as an individual with acute respiratory infection with or without fever with a history of traveling to/ living in a foreign country in the past 14 days before the onset of illness. See "[https://ddc.moph.go.th/viralpneumonia/eng/file/guidelines/g\\_surveillance\\_230620.pdf](https://ddc.moph.go.th/viralpneumonia/eng/file/guidelines/g_surveillance_230620.pdf)"
- **Close contact** is defined as a person who has had interactions with a confirmed or probable case of COVID-19. This can be divided into two groups.

- (1) Close contact who may be a reservoir, e.g. close contact of COVID-19 case within 14 days prior to illness onset of the case.
- (2) Close contact who may have contracted the virus from COVID-19 case, e.g. close contact of COVID19 case from the date of illness onset.

**Probable case** is defined as a PUI who has tested positive for genetic materials of SARS-CoV-2 by PCR from one (1) reference laboratory, or by genetic sequencing, or by viral culture (DDC Thailand, Feb, 2020).

**Confirmed case** is defined as a PUI who has tested positive for genetic materials of SARS-CoV-2 by PCR from two (2) reference laboratories, or by genetic sequencing, or by viral culture (DDC Thailand, Feb, 2020).

**Asymptomatic case** is defined as a person who has tested positive for genetic materials of SARS-CoV2 by PCR from two (2) reference laboratories, or by genetic sequencing, or by culture, but has shown no signs and symptoms (DDC Thailand, Feb, 2020).

**Antigen Test Kits (ATK) Self-test** means a rapid test, lateral flow immunoassay intended for the qualitative detection of SARS-CoV-2 nucleocapsid antigens from anterior nasal swabs that are self-collected by an individual aged 18 years or older or are collected by an adult from an individual younger than 18 years old.

**Antigen Test Kits (ATK) Professional use** means a rapid test, lateral flow immunoassay intended for the qualitative detection of SARS-CoV-2 nucleocapsid antigens from anterior nasal swabs that are collected by healthcare professionals.

- **Reverse Transcription Polymerase Chain Reaction (RT - PCR)** is a nuclear-derived method for detecting the presence of specific genetic material in any pathogen, including a virus, that causes diseases such as COVID-19. A sample is collected by healthcare professionals from the parts of the body, such as a person's nose or throat. This technique is highly sensitive and specific and can deliver a reliable diagnosis in as little as three hours, though laboratories take on average between six and eight hours.
- **Fully vaccinated means** the persons who are  $\geq 14$  days post-completion of the primary series of an FDA-authorized COVID-19 vaccine as follow:
  - 2 weeks after their second dose in a 2-dose series, such as Sinovac/Sinopharm/Pfizer/Moderna vaccines, or
  - 2 weeks after their second dose in a 2-dose series, such as Sinovac 1 shot + Astrazeneca 1 shot, Astrazeneca 1 shot + Pfizer/ Moderna 1 shot, or
  - 2 weeks after their booster dose, such as Sinovac/Sinopharm 2 shots + Astrazeneca 1 shot, or Sinovac/Sinopharm 2 shots + Pfizer/Moderna 1 shot, or

- 2 weeks after a single-dose vaccine, such as Johnson & Johnson's Janssen vaccine
- **Self - isolation (SI)** means staying indoors and completely avoiding contact with other people or straight away if: (1) tested positive for COVID-19 (2) classified as high-risk close contact person.
- **Self - quarantine (SQ)** is for people who had close contact with a person with a confirmed case of COVID-19 but are not experiencing symptoms. Contact your local health department or medical provider if you are unsure if you should self-quarantine.
- **Self - monitoring (SM)** is for those that may have been exposed to a person with COVID-19. Self-monitoring means people should monitor themselves for fever by taking their temperatures twice a day and remain alert for cough or difficulty breathing. If they develop symptoms during the self-monitoring period, they should self-isolate, limit contact with others, and seek medical advice by telephone.
- **Community isolation (CI)** means the provision of public health services at home when the patient has been diagnosed with COVID-19 (by RT-PCR) and if the care physician of a competent hospital service unit has assessed that the patient can be properly and safely quarantined within his community. Community isolation can apply to both patients who are waiting for treatment as inpatient in a hospital or patients who return home from hospital for further care. **Community isolation is arranged by providing an isolated area in the community with the consent of the patient and the facility owner.** The area must be prepared to allow the patient to receive proper care in accordance with the rules and guidelines prescribed by the Ministry of Public Health.
- **Home isolation (HI)** means the provision of public health services at home when the patient has been diagnosed with COVID-19 (by RT-PCR) and if the care physician of a competent hospital service unit has assessed that the patient can be properly and safely quarantined in his place of residency.
- **Home isolation requires the consent of both the patient and the owner of the facility.** Home isolation includes the cases when the patient has been treated in a hospital service unit and returns home to isolate himself until the quarantine expiration date, in accordance with the rules and guidelines set by the Ministry of Public Health.