School-Level COVID-19 Management Plan

School Year 2022-23



School/District/Program Information

District or Education Service District Name and ID: Eugene School District 4J –2082

School or Program Name: Family School

Contact Name and Title: Principal Teresa Martindale

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Table 1.

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School District Communicable Disease Management Plan OAR 581-022-2220

Exclusion Measures Exclusion of students and staff who are diagnosed with certain communicable diseases OAR 333-019-0010

Policies, protocols, procedures and plans already in place

Provide hyperlinks to any documents or other resources currently utilized in your school/district. Consider adding a brief description about how each is used within your school.

https://www.4j.lane.edu/covid-19_communicablediseaseplan_2022-23_1-0_august2022/

Students and staff must be excluded from school and work, at times, to reduce the spread of communicable diseases including COVID-19. The following protocols apply to staff and students, regardless of their vaccination status.

Administrators will exclude from schools, and supervisors will exclude from the district worksite, all persons diagnosed with, or presumed to have, COVID-19, consistent with <u>OAR 333-19-0010</u> and the <u>Communicable Disease Guidance</u> published by the Oregon Department of Education and Oregon Health Authority.

Students and staff who do not feel well should stay home. If they have any primary symptoms of COVID-19, they are encouraged to seek viral testing. If they have non-primary symptoms that persist for more than one day, they should consider consulting their healthcare provider who can determine if viral testing is advised.

Students who report or develop symptoms of an undiagnosed illness at school will be assessed. Students with multiple primary COVID-19 symptoms or a diagnosed case of COVID will be isolated in the designated isolation area in the school, with adequate space and staff supervision and symptom monitoring by a school nurse, other school-based health care provider, or other school staff. Students will remain in the isolation area until a parent, guardian or emergency contact arrives to take them home.

Persons who have COVID-19 are to follow all instructions from the district point of contact with Lane County Public Health. The district point of contact will consult with LCPH as needed. In general, the person should isolate until at least 5 days after their symptom onset or positive test, 24 hours after any fever has resolved without the use of fever-reducing medicine, and other symptoms are improving.

For more detailed information, see page 9 of <u>OHA and ODE's Communicable Disease Guidance for Schools</u> and page 16 of the same document, linked here: <u>ODE's COVID-19 Exclusion Summary Guidance Chart</u>.

Policies, protocols, procedures and plans already in place
Provide hyperlinks to any documents or other resources currently utilized in your school/district. Consider adding a brief description about how each is used within your school.
Each school has a dedicated care room for isolation of individuals exhibiting COVID-19 symptoms during the school day. Symptomatic students will remain in the care room (isolation area), with supervision by healthcare or school staff, until an authorized adult can pick them up. Refer to the 4J COVID-19 Communicable Disease Management Plan for more information.
Vaccination Required for Employees, Volunteers and Contractors
Consistent with state law (OAR 333-019-1030), all district employees, and all volunteers and contractors who provide services at a school requiring direct or indirect contact with students, must be fully vaccinated against COVID-19. "Fully vaccinated" means 14 days have passed since an individual received the final dose of a 2-dose COVID-19 vaccine or 1 dose of a single-dose vaccine. Requests for an exception to the vaccination requirement will be processed as provided by Human Resources.
Board Policy EBC/EBCA, Emergency Procedures and Disaster Plan.
See OHA's School and School-Based Programs Vaccine Rule FAQs for additional information.



Table 2.

SECTION 1. Clarifying Roles and Responsibilities

Identifying roles central to communicable disease management. Clarifying responsibilities related to communicable disease response is a first step in keeping communities healthy and safe. In general, decisions of school health and safety reside with school and district officials. Together with local public health officials, school/district administrators should consult a variety of individuals when making decisions about health and safety in school.

School planning team members	Responsibilities:	Primary Contact (Name/Title):	Alternative Contact:
Building Lead / Administrator	 Educates staff, families, and students on policies regarding visitors and volunteers, ensuring health and safety are being maintained. In consultation with district leadership and LPHA staff, determines the level and type of response that is required/necessary. Acts as key spokesperson to communicate health-related matters within school community members, health partners, and other local partners. 	Teresa Martindale, Principal	Dawn Strong, COVID Administrator Heather Stein, COVID Administrator
School Safety Team Representative (or staff member knowledgeable about risks within a school, emergency response, or operations planning)	 Trains staff at the start of the academic year and at periodic intervals on communicable disease management procedures. Leads debrief of communicable disease event, informing continuous improvement of the planning, prevention, response, and recovery system. 	Teresa Martindale, Principal	Dawn Strong, COVID Administrator Heather Stein, COVID Administrator

Roles and Responsibilities

School planning team members	Responsibilities:	Primary Contact (Name/Title):	Alternative Contact:
Health Representative (health aid, administrator, school/district nurse, ESD support)	 Supports building lead/administrator in determining the level and type of response that is necessary. Reports to the LPHA any cluster of illness among staff or students. Provides requested logs and information to the LPHA in a timely manner. 	Dawn Strong, COVID Administrator Heather Stein, COVID Administrator	Joy Maxwell, Student HealthServices Supervisor
School Support Staff as needed (transportation, food service, maintenance/custodial)	 Advises on prevention/response procedures that are required to maintain student services. 	Dawn Strong, COVID Administrator Heather Stein, COVID Administrator	Joy Maxwell, Student HealthServices Supervisor
Communications Lead (staff member responsible for ensuring internal/external messaging is completed)	 Ensures accurate, clear, and timely information is communicated including those who may have been exposed, a description of how the school is responding, and action community members can take to protect their health. Shares communications in all languages relevant to school community. 	Dawn Strong, COVID Administrator	Jenna McCulley, Communications Director
District Level Leadership Support (staff member in which to consult surrounding a communicable disease event)	 Has responsibility over COVID-19 response during periods of high transmission. May act as school level support to Building lead/Administrator activating a scaled response. Responds to media inquiries during the communicable disease event and ensures that those responsible for communication are designated speakers. 	Dawn Strong, COVID Administrator Heather Stein, COVID Administrator Jenna McCulley, Communications Director	Joy Maxwell, Student Health Services Supervisor

School planning team members	Responsibilities:	Primary Contact (Name/Title):	Alternative Contact:
Main Contact within Local Public Health Authority (LPHA)	 Notifies Building Lead/Administrator of communicable disease outbreak and offers recommendations for appropriate response. Key spokesperson to communicate on health-related matters with community members, health facility staff, and other local community partners. 	Kate Blair, Lane County Public Health Jason Davis, Lane County Public Health	Jenna McCulley, Communications Director
Others as identified by team			



Section 2. Equity and Mental Health

Preparing a plan that centers equity and supports mental health

Preparing a school to manage COVID-19 requires an inclusive and holistic approach to protect access to in-person learning for all students. In this section suggested resources are offered to help prepare for COVID-19 management while centering an equitable and caring response.

Centering Equity

Identify existing district or school plans and tools that can be utilized when centering equity in prevention, response, and recovery from incidents of COVID-19 (e.g., district or school equity plans/stances/lenses/decision tools, Equity Committee or Team protocols, district or school systems for including student voice, existing agreements or community engagement or consultation models, Tribal Consultation¹, etc.)

¹ Tribal Consultation is a separate process from stakeholder engagement; consultation recognizes and affirms tribal rights of self-government and tribal sovereignty, and mandates state government to work with American Indian nations on a government-to-government basis.

*High schools and middle schools provide affinity discussion groups for BIPOC and LGBTQ+ students to process their feelings and connect with peers socially. The affinity spaces also allow for students to create and lead schoolwide projects focused on wellbeing and mental health. These programs are supported by school and district-level staff.

*The district equity committee is being reconstituted to provide opportunities for high school student membership. Student members will have the opportunity to address a multitude of issues, including and not limited to inequities caused by mental health. Some or all students that participate on the equity committee are part of an affinity group, including BIPOC and LGBTQ+.

*High School Regional Equity Youth Educators or EYEs Programs works with students and adults to keep a fair and equitable school environment; help make safe spaces at school where all students can come and talk; and model and encourage honest, respectful communication with the district Equity Advisory Committee.

<u>(</u> 2) 2	Sugges	Suggested Resources:	
2 , 2 ,	1. Equity Decision Tools for School Leaders		
* *	2.	Oregon Data for Decisions Guide	
	3.	Oregon's COVID-19 Data Dashboards by Oregon Health Authority COVID-19	
	4.	Data for Decisions Dashboard	
	5.	Community Engagement Toolkit	
	6.	Tribal Consultation Toolkit	

Table 3.	Centering Equity
OHA/ODE Recommendation(s)	Response:
Describe how you identify those in your school setting that are disproportionately impacted by COVID-19 and which students and families may need differentiated or additional support.	The district's wraparound program provides students and families with a multitude of supports, including and not limited to learning opportunities in multiple languages, workshops, food and basic needs.
Describe the process by which the school will implement a differentiated plan for those that are disproportionately impacted, historically underserved or at higher risk of negative impacts or complications related to COVID-19.	Key district communications including public health communications are delivered to families in their home language of English or Spanish. The district has added staffing to support timely translation of key district communications. 4J's wraparound services team is available to provide additional individual outreach to Spanish- speaking families.
What support, training or logistics need to be in place to ensure that the named strategies are understood, implemented, and monitored successfully.	Information is provided to families and community in both English and Spanish. When needed a district nurse fluent in Spanish is available to meet with parents, students and families. A proactive response by 4J's wraparound services team to educate Spanish-speaking families regarding the services available to them. In some cases the team makes contact with agencies who can support individual needs.

Mental Health Supports

Schools are encouraged to continue to prioritize cultivating care, connection, and community to support the mental, emotional, and social health and well-being of students, families, staff, and administrators.

Identify existing district or school plans and tools that can be utilized in supporting student and staff wellbeing and mental health during prevention, response, and recovery from incidents of COVID-19 (e.g., counseling services; partnerships with community mental and behavioral health providers; school district suicide prevention, intervention, and postvention plan; School Based Health Center resources; tribal resources, etc.)

- District contracted with Care Solace to support students families and staff connecting with counseling resources as quickly as possible.
- In an effort to increase the number of counselors available for students, the district contracted with Roseburg Therapy to provide immediate counseling during school time at the school building.

4J partnered with the following providers to increase our ability to support mental health needs: Hoots, Looking Glass, Peace Health (School based health centers), Lines for Life and Lane County Mental Health.

Suggested Resources:

- 1. ODE Mental Health Toolkit
- 2. Care and Connection Program
- 3. Statewide interactive map of Care and Connection examples
- 4. Care and Connection District Examples
- 5. Oregon Health Authority Youth Suicide Prevention

Table 4.

Mental Health Supports

OHA/ODE Recommendation(s)	Response:
Describe how you will devote time for students and staff to connect and build relationships.	The district incorporates WEB (Where Everyone Belongs) and LINK Crew as student-led initiatives supporting climate and wellbeing at each secondary school. Orientations for 6th and 9th grade students are led by older peers from 8th grade and 12th grade, to support the social-emotional transition at each level.

OHA/ODE Recommendation(s)	Response:
Describe how you will ensure class time, and individual time if needed, for creative opportunities that allow students and staff to explore and process their experiences.	At the Elementary Level, the district financial supported Art Spark which is a program designed to allow each grade school to offer art classes throughout the school year. Secondary schools incorporated a break in the day for students to have a nutrition break and/or a rest from a rigid daily schedule.
Describe how you will link staff, students and families with culturally relevant health and mental health services and supports.	Additional staffing has been added in mental health, school counseling, school psychology and wraparound services, although filling some positions continues to be a challenge. Schools help students and families connect with health and mental health support services provided by our partners, some of which provide services on-site in our schools. The district has contracted with a mental health care coordination and referral service to provide free care connections to available mental health and substance abuse providers for students, staff, and their families.
Describe how you will foster peer/student lead initiatives on wellbeing and mental health.	The district is exploring incorporating Sources of Strength as another tool to help with prevention and postvention work. The Sources of Strength system is designed to support staff, students and families. This initiative encompasses a peer led group to help students process, reflect and share experiences.



Section 3. COVID-19 Outbreak Prevention, Response & Recovery:

Implementing mitigation activities, responding to periods of increased transmission, resuming baseline level mitigation, and debriefing actions to improve the process

Planning for and implementing proactive health and safety mitigation measures assists schools in reducing COVID-19 transmission within the school environment for students, staff, and community members. COVID-19 will continue to circulate in our communities and our schools for the indefinite future. Schools will utilize different mitigation measures based on COVID-19 transmission within their facilities and communities. In the following section, teams will document their school's approach to the CDC, OHA and ODE advised health and safety measures at baseline, during increased COVID-19 transmission, and as they roll back the increased mitigating measures, incorporating lessons learned.

Suggested Resources:

- 1. CDC Guidance for COVID-19 Prevention in K-12 Schools
- 2. <u>Communicable Disease Guidance for Schools</u> which includes information regarding
 - Symptom-Based Exclusion Guidelines (pages 8-12)
 - Transmission Routes (pages 29-32)
 - Prevention or Mitigation Measures (pages 5-6)
 - School Attendance Restrictions and Reporting (page 33)
- 3. COVID-19 Investigative Guidelines
- 4. Planning for COVID-19 Scenarios in School
- 5. CDC COVID-19 Community Levels
- 6. <u>Supports for Continuity of Services</u>

Table 5.	COVID-19 Mitigating Measures
OHA/ODE Recommendation(s) Layered Health and Safety Measures	BASELINE MEASURES: describe what mitigating measures will the school implement all of the time, each and every day of the school year to reduce the spread of COVID-19 and protect in-person instruction?
	Consistent with state law (<u>OAR 333-019-1030</u>), all district employees, and all volunteers and contractors who provide services at a school requiring direct or indirect contact with students, must be fully vaccinated against COVID-19. "Fully vaccinated" means 14 days have passed since an individual received the final dose of a 2-dose COVID-19 vaccine or 1 dose of a single-dose vaccine. See <u>OHA's</u> <u>School and School-Based Programs Vaccine Rule FAQs</u> for additional information.
COVID-19 Vaccination	The district encourages students and families who are eligible to be vaccinated, to protect their health and reduce the risk of spreading the virus at school, to families, and in the community.
	COVID-19 vaccines are available through local pharmacies, doctor offices, Lane County Public Health, etc. The district is not organizing vaccine clinics to be held in our buildings.
	Effective March 12, 2022, face coverings are optional for students, volunteers and fully vaccinated contractors and employees, with limited exceptions such as in healthcare settings.
	Any staff or contractors who are not fully vaccinated and are permitted to be on campus with an approved religious or medical exception, based upon approved HR accommodations, may be required to wear face masks indoors.
Face Coverings	A staff member who has had a positive case of COVID-19 is required to wear a well-fitting face mask for 5 additional days following their 5-day isolation period.
	Individuals may choose to mask based on their individual risk assessment (e.g., increased risk for severe disease or family or community members at increased risk for severe disease). The district will provide a mask to any staff, student, volunteer or visitor upon request.
Isolation	Students and staff must be excluded from school and work, at times, to reduce the spread of communicable diseases including COVID-19. The following protocols apply to staff and students, regardless of their vaccination status.

OHA/ODE Recommendation(s) Layered Health and Safety Measures	BASELINE MEASURES: describe what mitigating measures will the school implement all of the time, each and every day of the school year to reduce the spread of COVID-19 and protect in-person instruction?
	Administrators will exclude from schools, and supervisors will exclude from the district worksite, all persons diagnosed with, or presumed to have, COVID-19, consistent with <u>OAR 333-19-0010</u> and the <u>Communicable Disease Guidance</u> published by the Oregon Department of Education and Oregon Health Authority.
	Students and staff who do not feel well should stay home. If they have any primary symptoms of COVID- 19, they are encouraged to seek viral testing. If they have non-primary symptoms that persist for more than one day, they should consider consulting their healthcare provider who can determine if viral testing is advised.
	Students who report or develop symptoms of an undiagnosed illness at school will be assessed. Students with multiple primary COVID-19 symptoms or a diagnosed case of COVID will be isolated in the designated isolation area in the school, with adequate space and staff supervision and symptom monitoring by a school nurse, other school-based health care provider, or other school staff. Students will remain in the isolation area until a parent, guardian or emergency contact arrives to take them home.
	Persons who have COVID-19 are to follow all instructions from the district point of contact with Lane County Public Health. The district point of contact will consult with LCPH as needed. In general, the person should isolate until at least 5 days after their symptom onset or positive test, 24 hours after any fever has resolved without the use of fever-reducing medicine, and other symptoms are improving.
	For more detailed information, see page 9 of <u>OHA and ODE's Communicable Disease Guidance for</u> <u>Schools</u> and page 16 of the same document, linked here: <u>ODE's COVID-19 Exclusion Summary Guidance</u> <u>Chart</u> .
	Staff and students who do not feel well should stay home.
Symptom Screening	Staff and students may return to school and work after being ill consistent with the <u>guidelines</u> published by the Oregon Department of Education and Oregon Health Authority.

OHA/ODE Recommendation(s) Layered Health and Safety Measures	BASELINE MEASURES: describe what mitigating measures will the school implement all of the time, each and every day of the school year to reduce the spread of COVID-19 and protect in-person instruction?
	If an individual has any primary COVID symptoms as described below, they should follow the procedures outlined below in <u>Section IV. COVID Case Response Protocols</u> and <u>OHA and ODE's</u> <u>Communicable Disease Guidance for Schools</u> (pages 9-11, Symptom-Based Exclusion Guidelines).
	Primary COVID-19 Symptoms *Temperature of 100.4° F or higher or chills *Cough
	*Shortness of breath or difficulty breathing *New loss of taste or loss of smell
COVID-19 Testing	The district will provide both <u>diagnostic and screening testing programs</u> to students and their families.
	Air circulation and filtration are helpful factors in reducing airborne viruses. The district and its schools will operate ventilation systems properly and will consider and implement ways to increase circulation of outdoor air as much as possible, including by:
	*Setting ventilation systems to increase air exchanges, increase the amount of outside air where possible, and minimize recirculation of indoor air;
	*Enhancing building ventilation and filtration systems where feasible, following current guidance; and/or
Airflow and Circulation	*Opening windows and doors while keeping student safety and school security in mind.
	Air purifying devices have been installed in the ventilation systems in all 4J buildings to help neutralize and remove viruses and other particles from the air without producing ozone or other harmful byproducts. <u>These</u> units are installed and operating in every building. They are not visible from inside classrooms, as they are installed in the building's HVAC system. The devices use a technology called bipolar ionization (BPI) that is in use in schools, office buildings, airports, hospitals and other community buildings around the world. Information regarding the BPI units can be found here: <u>https://www.4j.lane.edu/2021/01/ventilation-system-upgrades/</u>

OHA/ODE Recommendation(s) Layered Health and Safety Measures	BASELINE MEASURES: describe what mitigating measures will the school implement all of the time, each and every day of the school year to reduce the spread of COVID-19 and protect in-person instruction?
	During the pandemic, 4J buildings will operate exhaust fans 24 hours a day, five days a week, to increase air exchanges within the building. Specific procedures may vary in older buildings but all the ventilation system run times have been increased districtwide.
	*Programmable ventilation systems will provide up to 100% outside air when air quality and temperatures allow.
	*Kitchens or cooking areas' local exhaust ventilation systems will be operated when these spaces are occupied. Kitchen exhaust ventilation may be operated even when these spaces are not occupied to supplement ventilation for other areas of the building.
	*Restroom exhaust fans will be operated when the building is occupied.
	Ventilation systems will be checked and maintained by maintenance staff on a regular basis. The district will consider modifications or enhancements of building ventilation and filtration systems where feasible, following current guidance.
	Fans can be an effective way to increase the circulation of outdoor air.
	*Consideration will be given to using fans or box fans positioned in open windows to draw fresh outdoor air into the classroom via one window, and flush indoor air out of the classroom via another window.
	*Fans will not be used in rooms with closed windows and doors, as the fans would be recirculating the classroom air and not providing circulation of fresh air.
	*Fans will not be used if it is determined that they pose a safety or health risk, such as increasing exposure to smoke, pollen or other allergens or exacerbating asthma symptoms.
	The district will consider the need for increased ventilation in areas where students with special healthcare needs receive medication or treatments.
	When feasible, bus windows will be kept open in order to improve air ventilation. Even partially opened windows will improve fresh air circulation on the bus.
	Schools are encouraged to conduct some activities and classes outside when reasonable.

OHA/ODE Recommendation(s) Layered Health and Safety Measures	BASELINE MEASURES: describe what mitigating measures will the school implement all of the time, each and every day of the school year to reduce the spread of COVID-19 and protect in-person instruction?
Cohorting	The district no longer practices cohorting.
Physical Distancing	While new guidance eliminates the requirement to maintain physical distance, it is still recommended that individuals at high risk for severe illness avoid crowds.
	Regular handwashing is one of the best ways to remove germs and prevent illness. All individuals should clean their hands frequently with handwashing for at least 20 seconds or alcohol-based hand sanitizer with 60–96% alcohol. There are key times when you are likely to get and spread germs, and handwashing after these times is essential:
	1. Before, during and after preparing food.
	2. Before and after eating food.
	3. Before and after using a hand-operated water fountain.
	 Before and after caring for someone at home who is sick with COVID-19 symptoms, vomiting or diarrhea.
	5. Before and after treating a cut or wound.
Hand Washing	6. After using the toilet.
	7. After changing diapers or cleaning up a child who has used the toilet.
	8. After coughing, sneezing or blowing nose.
	9. After touching an animal, animal feed, or animal waste.
	10. After handling pet food or pet treats.
	11. After touching garbage.
	All individuals should avoid touching their eyes, nose, or mouth with gloves or unwashed hands.
	Schools will teach and support hand hygiene and respiratory etiquette.
	The district requires routine, systematic cleaning and/or disinfection of classrooms, work spaces,
Cleaning and Disinfection	bathrooms, and activity areas.

OHA/ODE Recommendation(s) Layered Health and Safety Measures	BASELINE MEASURES: describe what mitigating measures will the school implement all of the time, each and every day of the school year to reduce the spread of COVID-19 and protect in-person instruction?
	Custodial staff will have primary responsibility for daily cleaning and/or disinfection as outlined in <u>COVID-19 Cleaning & Disinfection Protocol</u> .
	Custodial staff will perform cleaning and/or disinfecting of all high touchpoints throughout the buildings at least once per day, including but not limited to restrooms, common areas, door knobs, light switches, and shared student desks throughout the building.
	Disinfectant spray and towels or disinfectant wipes, with use instructions, will be made available in each classroom. Staff may use these to periodically disinfect common touchpoints within the classroom.
	Disinfectant spray and towels or wipes will be supplied in all staff-designated areas to be used throughout the day as needed or desired.
Training and Public Health Education	Written documents will be posted on the district website and information with be emailed to parents and staff in both English and Spanish.

Table 6.

OHA/ODE Recommendation(s) Layered Health and Safety Measures	MEASURES DURING PERIODS OF HIGH TRANSMISSION*: describe what mitigating measures the school will implement during periods of high transmission to reduce the spread of COVID-19 and protect in- person learning? *Within the community, high transmission is defined at the county level through <u>CDC COVID-19</u> <u>Community Levels</u> . Within a school, high transmission may be defined as high absenteeism or unusual spread within a cohort (e.g., a large outbreak in a classroom).
COVID-19 Vaccination	Please see recommendations in Table 5. Baseline Measures, beginning on page 12.
Face Coverings	Please see recommendations in Table 5. Baseline Measures, beginning on page 12.
Isolation	Please see recommendations in Table 5. Baseline Measures, beginning on page 12.
Symptom Screening	Please see recommendations in Table 5. Baseline Measures, beginning on page 12.
COVID-19 Testing	Please see recommendations in Table 5. Baseline Measures, beginning on page 12.
Airflow and Circulation	Please see recommendations in Table 5. Baseline Measures, beginning on page 12.
Cohorting ²	The school will notify Lane County Public Health if it experiences absenteeism \geq 30%, with at least 10 students and staff absent.
Physical Distancing	Please see recommendations in Table 5. Baseline Measures, beginning on page 12.

² Cohorting refers to establishing a consistent group of students that stay together for a significant portion of the school day. Examples include stable mealtime cohorts, classrooms, table groups, lunch bunches, and other group situations. Cohorts should be as small as feasible to minimize exposure.

OHA/ODE Recommendation(s) Layered Health and Safety Measures	MEASURES DURING PERIODS OF HIGH TRANSMISSION*: describe what mitigating measures the school will implement during periods of high transmission to reduce the spread of COVID-19 and protect in- person learning? *Within the community, high transmission is defined at the county level through <u>CDC COVID-19</u> <u>Community Levels</u> . Within a school, high transmission may be defined as high absenteeism or unusual spread within a cohort (e.g., a large outbreak in a classroom).
Hand Washing	Please see recommendations in Table 5. Baseline Measures, beginning on page 12.
Cleaning and Disinfection	Please see recommendations in Table 5. Baseline Measures, beginning on page 12.
Training and Public Health Education	Please see recommendations in Table 5. Baseline Measures, beginning on page 12.

Table 7.

COVID-19 Mitigating Measures

OHA/ODE Recommendation(s) Layered Health and Safety Measures	STEPS FOR GRADUAL RETURN TO BASELINE RESPONSE: describe how does the school will gradually return to a baseline response. Describe how the school team will decide what measure(s) should remain at an increased level which others may not, prioritizing some measure(s) over others. How does the school reduce or make permanent implementation of enhanced mitigation measures once high transmission has ended?
COVID-19 Vaccination	Please see recommendations in Table 5. Baseline Measures, beginning on page 12.
Face Coverings	Please see recommendations in Table 5. Baseline Measures, beginning on page 12.
Isolation	Please see recommendations in Table 5. Baseline Measures, beginning on page 12.
Symptom Screening	Please see recommendations in Table 5. Baseline Measures, beginning on page 12.
COVID-19 Testing	Please see recommendations in Table 5. Baseline Measures, beginning on page 12.
Airflow and Circulation	Please see recommendations in Table 5. Baseline Measures, beginning on page 12.
Cohorting	The district no longer practices cohorting.
Physical Distancing	Please see recommendations in Table 5. Baseline Measures, beginning on page 12.
Hand Washing	Please see recommendations in Table 5. Baseline Measures, beginning on page 12.

OHA/ODE Recommendation(s) Layered Health and Safety Measures	STEPS FOR GRADUAL RETURN TO BASELINE RESPONSE: describe how does the school will gradually return to a baseline response. Describe how the school team will decide what measure(s) should remain at an increased level which others may not, prioritizing some measure(s) over others. How does the school reduce or make permanent implementation of enhanced mitigation measures once high transmission has ended?
Cleaning and Disinfection	Please see recommendations in Table 5. Baseline Measures, beginning on page 12.
Training and Public Health Education	Please see recommendations in Table 5. Baseline Measures, beginning on page 12.

PRACTICING PLAN TO IMPROVE PROCESS

Training exercises are essential to preparedness ensuring individuals understand their role in a communicable disease event. Exercises can also help identify gaps in the planning, thereby building upon and strengthening the plan over time. Schools, districts, and ESDs should schedule to exercise this plan annually and when any revisions are made to update the plan. The plan, or component(s) of the plan, can be tested through conversations, practice exercises, or other activities.

https://www.4j.lane.edu/wp-content/uploads/2022/09/Family School_COVID_Management_Plan_2022.pdf

Date Last Updated: August 26, 2022

Date Last Practiced: August 16, 2022