

Nestucca Valley School District

Nestucca Valley Junior / Senior High School
Parkway Drive • Cloverdale, Oregon 97112 • (503) 392-4892

Board of Director's Meeting

AUGUST 10, 2020

6:30 pm - Public Session

AGENDA

The Nestucca Valley School Board encourages public input. Persons wishing to address the Board on school related issues, are invited to do so, either when the item is presented on the agenda, or under the "Public Comments" section. In the interest of time and order, presentations from the public are limited to three (3) minutes per person, and the total time for individual agenda items shall not exceed twenty (20) minutes. An individual speaker's allotted time may not be increased by a donation of time from members of the public in attendance. If you wish to speak under Public Comments, please complete a Public Comment Form and turn it in to the Assistant to the Superintendent. The Board requests complaints or charges against an employee be held in Executive Session. Individuals who require disability-related accommodations or modifications to participate in the Board meeting should contact the Superintendent in writing prior to the meeting.

Topic: NVSD Board of Directors August 2020 Meeting

Time: Aug 10, 2020 06:30 PM Pacific Time (US and Canada)

Join Zoom Meeting

<https://us02web.zoom.us/j/84752348765?pwd=cHRncm1MT01qVUxtTnZBdnIzM1I1Zz09>

Meeting ID: 847 5234 8765

Passcode: kjyr71

One tap mobile

+13462487799,,84752348765#,,,,,0#,,074733# US (Houston)

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Dial by your location

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+1 301 715 8592 US (Germantown)

Meeting ID: 847 5234 8765

Passcode: 074733

1.0 OPENING OF PUBLIC SESSION— VIA ZOOM and TBCC South Classroom—6:30 pm

1.1 Public Session Call To Order

1.2 Flag Salute

1.3 Attendance:

___ Annis Leslie

___ Emily Hurliman

___ Diane Boisa

___ Bill Hagerty Vice-Chair

___ Evan Carver, Chair

___ Misty Wharton, Superintendent

___ Ken Richwine, Secondary Principal

___ Megan Kellow, Special Programs Administrator

___ Chad Holloway, Elementary Principal

Approval of Agenda –AUGUST 10, 2020

Recommendation: Approval of Agenda

MOTION: _____ 2nd: _____ AYES: _____ NOES: _____ ABSTAIN: _____

2.0 COMMUNITY/SCHOOL PRESENTATIONS

3.0 PUBLIC COMMENT

***Opportunity for Citizens to address items not on the Agenda. Persons wishing to address the Board on any school related issue not listed elsewhere on the agenda are invited to do so now. Board Members are limited, but not required, to give a brief response to public statements or questions regarding non-agenda items.*

4.0 CONSENT AGENDA—consolidated motion

***The purpose of the Consent Agenda is to expedite action on routine agenda items. These items will be acted upon with one motion, second and approval of the Board, unless a member of the board or public wishes to pull the item for individual discussion and action. All matters listed under Consent Agenda are those on which the board has previously deliberated or can be classified as routine items of business. **There will be no separate discussion of these items prior to the vote by the Board unless members of the Board, staff, or public request specific items to be discussed or pulled from the Consent Agenda.** Members of the public who wish to speak on an item must first fill out a public comment card.*

4.1 Board Minutes from July 13, 2020 (Attachment 4.1)

4.2 July 2020 Financial Report (Attachment 4.2)

4.3 Ratification of Employment (Attachment 4.3)

MOTION: _____ 2nd: _____ AYES: _____ NOES: _____ ABSTAIN: _____

5.0 ACTION /DISCUSSION

5.1 Recommendation: Approve the adoption of the Nestucca Valley School District pandemic plan (Attachment 5.1)

Explanation- This plan would be used in response to a COVID 19 outbreak on district facilities

MOTION: _____ 2nd: _____ AYES: _____ NOES: _____ ABSTAIN: _____

5.2 Recommendation: Approve the adoption of the Nestucca Valley School District Fall 2020 blueprint (Attachment 5.2)

Explanation- At this time the State of Oregon metrics for opening to in person schooling is not met, meaning there is to high of COVID 19 infection rate. Launching the school year with a distance learning model is our only option to operate safely and allows our educators to focus on improving the distance learning offering for our families.

MOTION: _____ 2nd: _____ AYES: _____ NOES: _____ ABSTAIN: _____

5.3 Recommendation: Approve- The list of NVSD items, surplus goods (Attachment 5.3)

Explanation- Reference attachment for list of materials that are recommended as surplus

MOTION: _____ 2nd: _____ AYES: _____ NOES: _____ ABSTAIN: _____

5.4 Recommendation: Approve- Delay the start of the academic school year until September 21, 2020

Explanation- This allows our educators increased time for professional development and the scheduling of individualized parent teacher conferences (Pre-k-12) prior to the launch of academics. Teachers will work with families- training them on the new CANVAS and Acellus platforms. The district will still begin food service delivery on September 8, 2020.

MOTION: _____ 2nd: _____ AYES: _____ NOES: _____ ABSTAIN: _____

6 INFORMATION/ DIRECTOR QUESTIONS

- 6.1 Admin Reports (Attachment 1)
- 6.2 Board of Directors Updates
- 6.3 COVID 19 Planning
- 6.4 NVASI Update

7 FURTHER BUSINESS

8 ADJOURNMENT

Any documents that are public records and are provided attachments to public session items on this agenda are accessible to the public on the District's Website, with the exception of documents provided at the time of the meeting. Documents that are public records, and are provided at the time of the meeting to a majority of the Board regarding a public session item, will be made available for public inspection upon request to the Superintendent's Assistant.

41.1

Nestucca Valley School District

Board of Director's Meeting

Minutes-July 13, 2020

Opening of Public Session

The Public session was called to order by Board Chair, Evan Carver, at 6:31 pm. Director Carver leads the pledge of Allegiance.

Attendance:

X – Annis Leslie

X – Emily Hurliman

X – Diane Boisa

X – Evan Carver, Board Chair

X – Bill Hagerty, Vice Chair

X – Misty Wharton, Superintendent

X – Ken Richwine, Junior-Senior High Principal

X – Chad Holloway, Elementary Principal

X – Megan Kellow, Special Programs Administrator

– Roger Johnson, NWRESL Liaison-Not present

Patrons, Students and Staff: Tim Hirsch, Tami Flinter, Amy Gianella, Tevin Gianella, Bill Wilkenson, Diane Wilkenson, Ben Owens, Kenny Hurliman, Tim Foster, Shane Stuart, Andre Schellhaas (ESD)

Approval of Agenda- July 13, 2020

MOTION: Diane Boisa 2nd: Bill Hagerty AYES: 5 NOES: 0 ABSTAIN: 0

Community/School Presentations:

None

Public Comment:

None

Consent Agenda:

- Board Minutes from June 8, 2020.
- June 2020 Financial Report

MOTION: Annis Leslie 2nd: Diane Boisa **AYES: 5 NOES: 0 ABSTAIN: 0**

Action/Discussion:

Recommendation: Approve the Election of the Nestucca Valley School Board Chair.

- Diane Boisa moves to nominate Evan Carver for Board Chair.

MOTION: Diane Boisa 2nd: Emily Hurliman **AYES: 5 NOES: 0 ABSTAIN: 0**

Recommendation: Approve the Election of the Nestucca Valley School District Board Vice Chair.

- Diane Boisa moves to nominate Bill Hagerty for Board Vice Chair.

MOTION: Diane Boisa 2nd: Annis Leslie **AYES: 5 NOES: 0 ABSTAIN: 0**

Recommendation: Approve items 5.3 through 5.11

- Board Chair Carver goes over each designation.

MOTION: Bill Hagerty 2nd: Annis Leslie **AYES: 5 NOES: 0 ABSTAIN: 0**

Information/Director Questions:

- Administrator Reports:
 1. Ms. Wharton and Mr. Holloway go over updates in the construction process.
 2. Work on the K-8 building, as well as the Junior-Senior High retrofit is on time and on budget.
 3. Ms. Wharton reports that the playground at the K-8 is going up with new equipment for our students.
 4. Ms. Wharton would like to schedule a time for Board Members to tour the K-8 building.
 5. The summer work crew is doing a great job. Ms. Wharton credits Mr. Gianella's leadership and his crew.
 6. CTE Grant has been fully funded. Ms. Wharton is planning upcoming meetings to discuss.
 7. Preschool Promise: We have received 460,000 dollars to support our preschool students. We are the fiscal agents, but this funding will support Tillamook and NKN as well.
 8. Internet capacity in S. Tillamook County: Ms. Wharton has been working with a private internet provider (Oregon Coast Wireless) to ensure we are able to provide internet service to all of our students.
 9. Ms. Wharton has been attending weekly meeting with the other Superintendents in the county to "share out" ideas. The pandemic plans are due to ODE on August 15, 2020. We will be putting out a survey to families in order to collect data regarding what the beginning of the school year will look like and concerns. That said, we will follow what the state recommends.
 10. District has offered a job to a nurse. This position will be funded out of the general fund.
- Bond Activity update:
 1. The Bond Oversight Committee continues to meet to monitor the financial component of the K-8 Bond project.
- OSBA Fall Conference has been cancelled.
- Updates on fall sports should be out soon.
- NVASI: Initial designs is now in the hands of landscape and civil engineers.
- Board Questions:
 1. Diane Boisa asks how if we know how long until we are able to provide internet services for our students. Ms. Wharton replies she hopes we will be able to do this by the 4th week of August 2020.
 2. Diane Boisa asks if food services will be the same as it was in the spring. Ms. Wharton believes it will be similar, but likely with some additional rules. The district is looking for ways to provide meals daily to students.

Further Business:

With no further business, Board Chair Carver adjourned the meeting at 6:58 pm.

Nestucca Valley School District
 Financial Report
 2020-21

41.2

For Period Ending July 31, 2020

General Fund - Revenue & Expenditures by Object Code

	Budget	Actual	Encumbrances	Variance
Revenue:				
1111 Current Taxes	\$ 5,918,000	\$ -	\$ -	(5,918,000)
1112 Prior Taxes	150,000	-	-	(150,000)
1114 PILOT	-	-	-	-
1190 Interest on Taxes	7,500	-	-	(7,500)
1411 Transportation Fees/Other	-	-	-	-
1510 Interest	62,000	1,773	-	(60,227)
1790 Extra Curricular Activities	-	-	-	-
1920 Contributions & Donations	2,500	-	-	(2,500)
1960 Recovery of Expenditures	10,000	-	-	(10,000)
1990 Miscellaneous Revenue	30,000	-	-	(30,000)
1991 E-Rate Reimbursement	-	-	-	-
Total Local Revenue	6,180,000	1,773	-	(6,178,227)
2101 County School Fund	500,000	-	-	(500,000)
Total Intermediate Revenue	500,000	-	-	(500,000)
3103 Common School Fund	45,000	-	-	(45,000)
3104 State Timber Revenue	300,000	-	-	(300,000)
3199 Unrestricted Revenue	30,000	-	-	(30,000)
3204 Driver Education	-	-	-	-
3299 Other Restricted Grants in Aid	-	-	-	-
Total State Revenue	375,000	-	-	(375,000)
4300/4500 Federal Revenue	-	-	-	-
Total Federal Revenue	-	-	-	-
5400 Beginning Fund Balance*	2,300,000	-	-	(2,300,000)
Total Other Sources	2,300,000	-	-	(2,300,000)
Total Revenues	\$ 9,355,000	\$ 1,773	\$ -	(9,353,227)
Expenditures:				
100 - Salaries	\$ 3,566,257	\$ 86,300	\$ 2,780,798	\$ 699,159
200 - Benefits	2,564,347	49,329	2,072,319	442,699
300 - Purchased Services	705,594	20,268	351,391	333,935
400 - Supplies & Materials	416,887	15,869	155,934	245,084
500 - Capital Outlay	-	-	-	-
600 - Other Objects	276,915	5,909	18,041	252,965
700 - Transfers	625,000	-	-	625,000
800 - Operating Contingency	600,000	-	-	600,000
800 - Unappropriated EFB	600,000	-	-	600,000
Total Expenditures	\$ 9,355,000	\$ 177,675	\$ 5,378,483	\$ 3,798,842

*Pending audit completion

Nestucca Valley School District
 Financial Report
 2020-21

For Period Ending July 31, 2020

Special Revenue Funds - Revenue & Expenditures by Object Code

Revenue:	Budget	Actual	Encumbrances	Variance
Local Revenue	\$ 440,000	\$ -	\$ -	\$ (440,000)
State Revenue	1,728,709	-	-	(1,728,709)
Federal Revenue	1,111,143	-	-	(1,111,143)
Interfund Transfers	625,000	-	625,000	-
Beginning Fund Balance*	200,000	-	-	(200,000)
Total Revenues	\$ 4,104,852	\$ -	\$ 625,000	\$ (3,479,852)
Expenditures:				
100 - Salaries	\$ 869,411	\$ 14,953	\$ 474,636	\$ 379,822
200 - Benefits	674,329	9,797	345,849	318,683
300 - Purchased Services	390,775	152	1,094	389,529
400 - Supplies & Materials	1,083,998	95,250	218,418	770,330
500 & 600 - Capital & Other Objects	300,000	-	2,810	297,190
700 - Transits	730,000	-	-	730,000
800 - Reserved for Next Yr	56,339	-	-	56,339
Total Expenditures	\$ 4,104,852	\$ 120,152	\$ 1,042,807	\$ 2,941,893

*Pending audit completion

Nestucca Valley School District
 Financial Report
 2020-21

For Period Ending July 31, 2020

General Fund - Revenue & Expenditures by Function Code

	Budget	Actual	Encumbrances	% Remaining	Variance
Revenue:					
Local Revenue	\$ 6,180,000	\$ 1,773	\$ -	99.97%	\$ (6,178,227)
Intermediate Revenue	500,000	-	-	100.00%	(500,000)
State Revenue	375,000	-	-	100.00%	(375,000)
Federal Revenue	-	-	-	0.00%	-
Transfers	-	-	-	0.00%	-
Beginning Fund Balance*	2,300,000	-	-	100.00%	(2,300,000)
Total Revenues	\$ 9,355,000	\$ 1,773	\$ -	99.98%	\$ (9,353,227)
Expenditures:					
1000- Instruction	\$ 3,866,897	\$ 636	\$ 2,749,675	28.88%	\$ 1,116,586
2000- Support Services	3,540,688	175,798	2,615,152	21.17%	749,738
5100- Debt Service	122,415	1,241	13,656	87.83%	107,518
5200- Transfers	625,000	-	-	100.00%	625,000
6100- Operating Contingency	600,000	-	-	100.00%	600,000
7000- Unappropriated EFB	600,000	-	-	100.00%	600,000
Total Expenditures	\$ 9,355,000	\$ 177,675	\$ 5,378,483	40.61%	\$ 3,798,842

For Period Ending July 31, 2020

Special Revenue Funds - Revenue & Expenditures by Function Code

	Budget	Actual	Encumbrances	% Remaining	Variance
Revenue:					
Local Revenue	\$ 440,000	\$ -	\$ -	100.00%	\$ (440,000)
State Revenue	1,728,709	-	-	100.00%	(1,728,709)
Federal Revenue	1,111,143	-	-	100.00%	(1,111,143)
Interfund Transfers	625,000	-	625,000	0.00%	-
Beginning Fund Balance*	200,000	-	-	100.00%	(200,000)
Total Revenues	\$ 4,104,852	\$ -	\$ 625,000	84.77%	\$ (3,479,852)
Expenditures:					
1000- Instruction	\$ 1,243,499	\$ 2,258	\$ 489,007	60.49%	\$ 752,234
2000- Support Services	1,080,418	70,509	143,456	80.20%	866,453
3000- Community Services	1,050,935	47,385	410,344	56.45%	593,206
5300- Transits	-	-	-	0.00%	-
Total Expenditures	\$ 3,374,852	\$ 120,152	\$ 1,042,807	65.54%	\$ 2,211,893

*Pending audit completion

Ratification of Employment**8.10.2020**

<u>Name</u>	<u>Site</u>	<u>Position</u>	<u>Action</u>
Aaron Pearn	Jr/Sr High	HS CTE Teacher	Hired
Tim Foster	Jr/Sr High	HS Teacher	Resigned
Lynn Foster	Elementary	ES Special Ed Instructional Assistant	Resigned
Ebony Black	Early Learning Center	Preschool Instructor	Hired
Ashlee Buxton Sears	Early Learning Center	Preschool Instructor	Hired
Natasha Durgan	Early Learning Center	Instructional Assistant	Hired
Autum Marsh	Early Learning Center	Preschool Instructor	Hired
Cynthia Marshall	Early Learning Center	Instructional Assistant	Hired
Debbie Swanson	Early Learning Center	Head Cook	Hired
Haley Wright	Early Learning Center	Instructional Assistant	Hired

<i>Salary</i>	<i>Effective Date</i>
\$40,866/yr	8.31.2020
\$60,847/yr	7.28.2020
\$16.19/yr	7.29.2020
\$20.11/hr	8.3.2020
\$19.62/hr	8.3.2020
\$14.87/hr	8.3.2020
\$20.11/hr	8.3.2020
\$14.87/hr	8.3.2020
\$17.26/hr	8.3.2020
\$14.48/hr	8.3.2020

Nestucca Valley School District 2020 Pandemic Plan

Introduction

Seasonal Respiratory Illness and Seasonal Influenza

Seasonal Respiratory Illness

There are several viruses that routinely circulate in the community to cause upper viral respiratory illnesses. These viruses include rhinoviruses, coronaviruses, adenoviruses, enteroviruses, respiratory syncytial virus, human metapneumovirus, and parainfluenza. The “common cold” is caused by rhinoviruses, adenoviruses, and coronaviruses. The symptoms of these seasonal illnesses may vary in severity but include cough, low-grade fever, sore throat (SDDH, 2019; Weatherspoon, 2019).



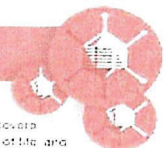
Seasonal Influenza

Influenza (flu) is a contagious respiratory illness caused by influenza viruses. There are two main types of influenza (flu) virus: Types A and B. The influenza A and B viruses that routinely spread in people (human influenza viruses) are responsible for seasonal flu epidemics each year. Influenza can cause mild to severe illness. Serious outcomes of flu infection can result in hospitalization or death. Some people, such as older people, very young children, and people with underlying health conditions or weak immune systems, are at high risk of severe flu complications. Routine symptoms associated with flu include fever, cough, sore throat, runny nose, muscle aches, headaches, fatigue, and sometimes vomiting (CDC, 2020).

Novel, Variant and Pandemic Viruses

Novel viruses refer to those not previously identified. A novel virus may be a new strain or a strain that has not previously infected human hosts. When a virus that has historically infected animals begins to infect humans, this is referred to as a variant virus. Pandemic refers to the global circulation of a novel or variant strain of respiratory viruses. The most common viruses associated with novel and pandemic outbreaks are influenza A and human coronavirus. A flu pandemic occurs when a new virus that is different from seasonal viruses emerges and spreads quickly between people, causing illness worldwide. Most people will lack immunity to these viruses. Pandemic flu can be more severe, causing more deaths than seasonal flu. Because it is a new virus, a vaccine may not be available right away. A pandemic could, therefore, overwhelm normal operations in educational settings (CDC, 2016). (Image: CDC)

Differences between seasonal flu and pandemic flu:

Seasonal Flu	Mild to Moderate Pandemic	Severe Pandemic
		
THE VIRUS <ul style="list-style-type: none">• Caused by influenza viruses that are closely related to viruses that have previously circulated; most people will have some immunity to it.• Symptoms include fever, cough, runny nose, and muscle pain.• Complications such as pneumonia are most common in the very young and very old and may result in death.• Vaccines are produced each season to protect people from the three influenza strains predicted to be most likely to cause illness.	THE VIRUS <ul style="list-style-type: none">• Caused by a new influenza virus that has naturally, but only slightly, altered another people and that can't easily spread.• Because most people will have no immunity to the new virus, it will likely cause illness in high numbers of people and more severe illness and deaths than seasonal influenza.• Symptoms are similar to seasonal flu but may be more severe and have more frequent serious complications.• Healthy adults may be at increased risk for serious complications.	THE VIRUS <ul style="list-style-type: none">• A severe strain causes more severe illness, results in greater loss of life, and has a greater impact on society.• During the peak of a severe pandemic, work and absenteeism could reach up to 40% due to people being ill themselves or caring for family members.
IMPACT ON THE COMMUNITY <ul style="list-style-type: none">• Seasonal flu kills about 36,000 Americans each year and hospitalizes more than 200,000 children and adults.	IMPACT ON THE COMMUNITY <ul style="list-style-type: none">• May cause a moderate impact on society (e.g., some short-term school closings, encouragement of people who are sick to stay home).	IMPACT ON THE COMMUNITY <ul style="list-style-type: none">• Schools and day care/child care facilities may be closed.• Public and social gatherings will be discouraged.• The patterns of daily life could be changed for some time with basic services and access to supplies possibly disrupted.

Purpose

The purpose of this document is to provide a guidance process to non-pharmaceutical interventions (NPIs) and their use during a novel viral respiratory pandemic. NPIs are actions, apart from getting vaccinated and taking antiviral medications, if applicable, that people and communities can take to help slow the spread of respiratory illnesses such as pandemic flu or novel coronaviruses. NPI's, specifically in regards to pandemic planning, are control measures that are incrementally implemented based on the level of threat to a community. This document should be used as a contingency plan that is modified with a response planning team based on the current level of pandemic threat.

Control Measures

While prophylactic vaccine and antiviral medication are appropriate interventions in some viral respiratory conditions, specifically seasonal influenza. These are not always accessible for novel strains. Non-pharmaceutical interventions (NPI's) are essential actions that can aid in the reduction of disease transmission. It is important to note that disease that is widely spread in the community has many options for transmission beyond the school setting, and the school district can only account for NPI's in the school setting and at school-sponsored events (CDC, 2017).



Personal NPIs are everyday preventive actions that can help keep people from getting and/or spreading flu. These actions include staying home when you are sick, covering your coughs and sneezes with a tissue, and washing your hands often with soap and water.



Community NPIs are strategies that organizations and community leaders can use to help limit face-to-face contact. These strategies may include increasing space between students in classrooms, making attendance and sick-leave policies more flexible, canceling large school events, and temporarily dismissing schools.



Environmental NPIs are surface cleaning measures that remove germs from frequently touched surfaces and objects.

(Image: CDC)

Everyday Measures

Control measures to limit the spread of communicable diseases should be an active part of the school comprehensive and preventative health services plan. Routine control measures include:

- Hand hygiene (washing your hands for 20 seconds with soap and water with appropriate friction).
- Respiratory etiquette (cover your coughs and sneezes and throw the tissue in the garbage each use)
- Routine sanitizing of shared areas and flat surfaces
- Stay home when you are sick and until 24 hours fever free, without the use of fever-reducing medication.

Control Measures for Novel or Variant Viruses

Control measures associated with novel or variant viruses are based on the severity of the specific virus. Some novel viruses are so mild they may go undetected, while others may present with more transmissibility or severity. Since new viruses have no historical context, public health guidance evolves as increased numbers of cases are identified, and patterns and risks are identified, and thus the guidance is unique to each specific event, respectively.

That being said, historical pandemic responses have provided a baseline set of evidence-based guides to create a framework for a response plan for such events in the school setting.

Control measures are incremental based on the current situation. The current situation will be defined by the public health entities based on the severity, the incidence and the proximity to the school setting leading to level-based responses.

When cases of novel viruses are identified globally

When the novel disease is identified, it is the due diligence of school health services personnel and school administration to pay close attention to trends. When a novel strain is identified, routine control and exclusion measures should continue. Other situations that may arise, including foreign travel by students or staff, which may result in extended absenteeism. In cases where student or staff travel is restricted secondary to pandemic events, it is the staff and parent’s responsibility to communicate this restriction to the school district. Routine infection control and communication should continue.

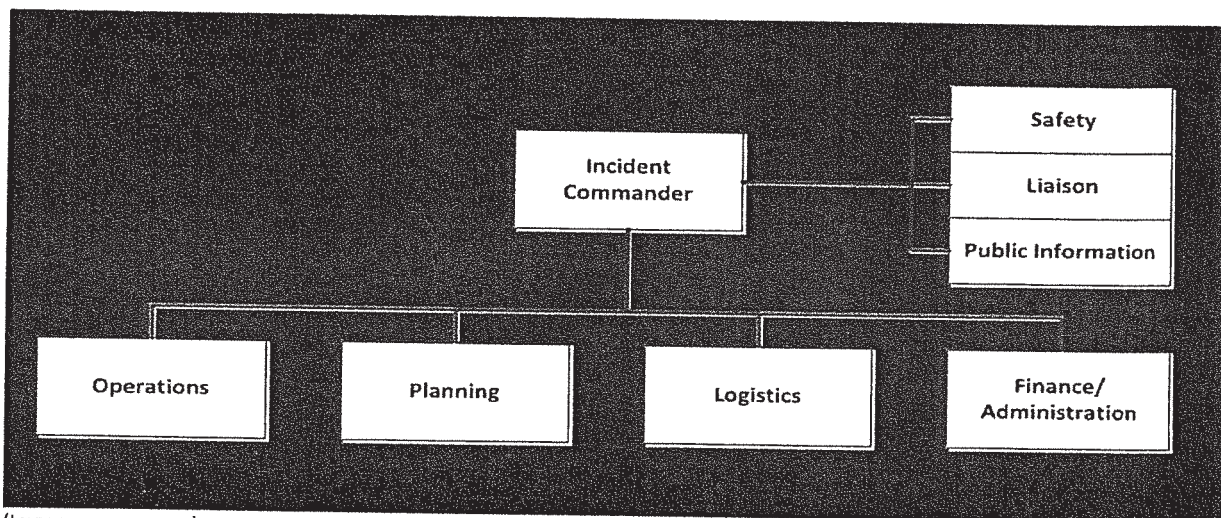
ROUTINE PRACTICES

Personal NPI’s	Community NPI’s	Environmental NPI’s	Communication
<ul style="list-style-type: none"> • Routine hand hygiene. • Respiratory Etiquette • Stay home when ill. 	<ul style="list-style-type: none"> • Routine illness exclusion (Appendix A) 	<ul style="list-style-type: none"> • Routine sanitizing. 	<ul style="list-style-type: none"> • Routine seasonal illness prevention and exclusion communication.

When cases of novel viruses are identified regionally or nationally

When the novel disease is identified in the U.S., it is important to identify the geographical location and the specific public health messaging and direction. The Centers for Disease Control and Prevention (CDC) will have current guidance. When novel viruses emerge in the state, the Oregon Health Authority (OHA) will provide direct guidance. OHA will have an alert for pandemic specific content that can be subscribed to for updates. An individual within the district should be subscribed to this alert to keep the team updated. If the region impacted is in Tillamook County, the Local Health Department (LHD) will provide school-centered communication and will potentially host conference calls. When cases are identified in the local region, a response team should be assembled within the district and responsibilities assigned within the school district.

Response team should consist of individuals who can fulfill roles with expertise in district policy and administration, clinical information, human resources, building-level management, risk management, and facilities at minimum to meet the general structure of Incident Command.



(Image: prepare.gov)

When public health has deemed a novel virus a pandemic threat, defer to the [CDC checklist for schools](#) (Appendix B) in order to establish a specific emergency response framework with key stakeholders. During this time, planning will need to be initiated on the continuity of education in the event of school closure. The response team should hold regular meetings.

Stage	Response Stage	Stages	Tillamook SD Pandemic Plan
0	New domestic animal outbreak in at-risk country	0-1	Preparedness
1	Suspected human outbreak overseas		
2	Confirmed human outbreak overseas		
3	Widespread human outbreaks in multiple locations overseas	2-7	Response
4	First human case in North America		
5	Spread throughout United States		
6	Suspected cases in Tillamook County		
7	Confirmed cases in Tillamook County	8	Recovery
8	Recovery & preparation for subsequent waves		

The NESTUCCA Pandemic Plan considered:

School and District Impact and Issues

- Potential for school closings
- Large numbers of staff absent, difficult to maintain school operations
- Loss of services from suppliers (e.g. food services and transportation)
- Student absenteeism elevated above normal trends
- Parents who choose to keep children at home
- Loss of ability to continue operations in support departments

Community Impacts

- Large percentages of the population may be unable to work for days to weeks during the pandemic
- Significant numbers of people and expertise would be unavailable
- Emergency and essential services such as fire, police, and medical would be diminished
- School operations could be affected
- Financial and social impacts of prolonged schools' closures
- Methods of continued instruction should schools' close

Basic Goals in Pandemic Planning

- Limit illness, the spread of illness, and emotional trauma
- Preserve continuity of essential functions
- Minimize social and educational disruption
- Minimize instructional loss

Access Control

- Follow visitor and volunteer policies that enables school administrators to control access to the buildings.
- Each school should have a plan to lock out certain entrances and exits and to monitor others, if necessary.
- Identify a main entrance and an indoor screening area where students and staff will be screened prior to moving to classrooms or other areas of the building for each school.

Federal, State, local, tribal, and territorial laws, regulations, and policies regarding student dismissal from schools, school closures, funding mechanisms, and educational requirements should be taken into account in pandemic planning.

Concept of Operations

Action Steps:

1. Identify a staff person to be responsible for surveillance and infection control. This should be done in conjunction with the local health department.
2. Increase emphasis on good health habits to stop transmission, especially handwashing, respiratory etiquette, and avoiding touching the eyes, nose, and mouth.
 - a. Make soap dispensers or hand soap available in all employee and student restrooms.
 - b. Custodial staff will institute a schedule to ensure that soap dispensers are refilled regularly.
 - c. Provide education to employees, students and parents on hand hygiene, respiratory etiquette, avoiding touching the eyes, nose, and mouth.
 - d. Assure that employees, students and visitors can wash their hands when entering and leaving the facility.
3. Emphasize frequent cleaning and disinfection of high touch areas, i.e., door knobs, keys, telephones, etc.
 - a. Remind staff annually of opportunity to replace classroom/office cleaning bottle and microfiber towel.
4. Identify resources for influenza surveillance and control.
 - a. Track international, national, regional, and local trends, utilizing the local health department resources.
 - b. Identify public health department contacts (including 24/7 contact information – See Appendix).
 - c. Communicate with your local health department and discuss collaboration on pandemic preparedness.
 - d. Identify any local or state reporting requirements for pandemic.
5. Begin tracking and reporting trends by conducting contact tracing.
6. Establish procedures for screening to be utilized with pandemic.
7. Identify administrative measures to accomplish “social distancing.”
8. Identify areas within the school facility that can be used for isolation and quarantine.
9. Provide routine training about transmission and prevention and control measures.

Preparedness Phase Standard Operating Procedures

Communication Department
Distribute communication on hand washing and infection control to schools, facilities and on school and district websites.
Provide information to schools, parents, and staff about how to stop the spread of flu and cold, cough and sneeze etiquette, signs and symptoms of influenza.
Provide information to staff and parents on emergency readiness.
Encourage parents to have alternative child-care plans.
Human Resources Department
Coordinate multiple flu shot clinics across the district and share dates and times with staff.
Review staff contracts and Board policy regarding staff reporting expectations.
Encourage staff to have alternative child-care plans.

School Nurses

Provide information to staff and parents on pandemic planning for families.

Provide information to schools, parents, and staff about hand sanitizers, cough and sneeze etiquette, signs and symptoms of influenza.

Develop and maintain absenteeism tracking tools.

Nurses should check their district issued first aid kits for personal protective equipment.

Technology Department

Develop and maintain system for reporting daily attendance by school and district wide.

Develop and maintain tools for tracking annual average daily attendance for schools and district.

Teaching and Learning and Information Technology

Develop and share alternative delivery options: Online learning resources / Virtual assignments

Develop a plan for continuation of education. Hire a Virtual Instruction Coordinator for TSD9.

Custodial Services

Ensure custodial staff has an appropriate plan for proper cleaning and disinfecting teaching, learning, shared spaces and play areas.

Ensure schools and departments have adequate supplies (soaps, bottles, microfiber cloths, hand sanitizers, and paper towels).

District Office

Provide information to schools, parents, and staff about hand sanitizers, cough and sneeze etiquette, signs and symptoms of influenza.

Ensure custodial staff has appropriate training on proper cleaning and disinfecting work and play areas.

Ensure schools and departments have adequate supplies (soaps, hand sanitizers, and paper towels).

Establish and test emergency communication protocol.

Provide information to staff and parents on pandemic planning for families.

Develop Incident Command Center protocol, location, equipment and assign staff.

Develop plans for operating with staff workforce reduction.

Develop plans to secure buildings, information technology, and finance.

Encourage employees to use Direct Deposit.

Encourage parents to have alternative child care plans.

Develop plans for educational continuity if schools close.

Find out if vendors in the supply chain have a pandemic or emergency plan for continuity or recovery of supply deliveries.

Plan for a full school closure or a partial school closure (i.e., some but not all schools are closed, or students are dismissed but staff works with local agencies to assist families).

Develop a plan to record temperatures of employees daily.

Superintendent should establish a command structure in the event that he or she is unable to continue work during the pandemic event or is unable to return to work during the recovery phase; develop District office teleconferencing protocol in the event that schools are closed. If the superintendent is unable to direct the command center the Grant Writer-Communication Director will become in charge of incident command.

Develop plans to conduct table-top exercises to practice and refine the pandemic plan.

Apply all plans and procedures to after-school programs.

Response (Response Stages 2-7)

Begin when there are confirmed human outbreaks of a pandemic anywhere in the world:

1. Reinforce education regarding influenza infection control. Emphasize a triad of good health habits: hand hygiene, respiratory etiquette, and not touching the eyes, nose and mouth.
2. Increase environmental cleaning of "high touch" surfaces, e.g., door knobs, keys, telephones. Identify these areas as "red dot" areas.
3. Educate employees and visitors not to come to the facility if they have influenza-like symptoms.
4. Assess adequacy of infection-control supplies and review distribution plan.
5. Initiate screening for influenza-like illness at main office entries.
6. Conduct active surveillance to look for influenza cases (i.e., review temperature logs, triage/sick call, hospitalizations, staff absences, unexplained deaths, etc.). Interview influenza-like illness cases for pandemic risk factors.
7. Review possible measures to increase "social distancing."
8. Review/revise the list of designated influenza isolation and quarantine rooms.
9. Begin reviewing workforce reduction plan.
10. Begin reviewing distance learning plan.
11. Begin reviewing substitute teacher pool list.

Response Phase Standard Operating Procedure for pandemic outbreak

This Phase calls for activation of the Incident Command Structure (to include the Incident Command Center) and pre-stage 24/7 manning of Center; bring in extra phones (and cell phones) and computers; meet with Incident Command Center staff to prepare for rapid escalation of outbreak to North America; remind staff of roles and responsibilities and importance of access at any time. Also, activate daily direct link to local health department and, if possible, to the State Emergency Operations Center and/or State Health Division via local agencies.

District Office
Conduct meeting/briefing with Incident Command Center staff to pre-stage full activation of Center.
Maintain daily link to local health department and, if possible, to the State Emergency Operations Center and/or State Health Division via local agencies.
Prepare for conference call from the State School Superintendent and/or staff.
Human Resources reports to the Incident Command Center when any school, service, or support absences escalate.
Pre-stage partial closure (student dismissal) and full closure.
Provide ongoing communication to key staff on their roles and responsibilities.
Alert all principals of Response Plan Activation and remind them that the Event Level may escalate rapidly to the next Level or Levels.
Monitor student and staff attendance daily as needed.
Do not enroll any students without appropriate immunization records, based on immunization and other health guidelines provided by the local health department, the Oregon Division of Public Health and/or the United States Department of Health and Human Services.
Develop continuous direct link to local health department; make plans with the local health department to establish daily communications if a widespread outbreak occurs overseas.
Activate procedures to isolate students and staff that present influenza-like symptoms; encourage parents to keep their children at home if they have influenza-like symptoms and to let the school know about their child's symptoms; encourage staff to remain at home if they have influenza-like symptoms and to report these symptoms to the school.
Remind staff, students, and parents of good hygiene practices.

Ensure that all out-of-country field trips have been cancelled or called back to the district.
Review all out-of-state (in-country) field trips and be prepared to cancel all out-of-state field trips.
Apply all procedures to after-school programs.
Pre-stage Crisis Management Team to discuss updated pandemic information and possible timeline for activation of the Team.
Prohibit congregation in hall ways and lunchrooms; if possible, serve box lunches in classrooms to avoid gathering of students in the cafeteria; stagger class changes to avoid large groups of students in the hallway; stagger dismissal for the same reason; cancel gym class, choir or other school activities that place individuals in close proximity. Develop cohorts for students within the school system.

School Front Office
Monitor student and staff attendance daily.
Do not enroll any students without appropriate immunization records, based on immunization and other health guidelines provided by the local health department, the Tillamook Division of Public Health and/or the United States Department of Health and Human Services.
Do not allow students or staff into school who are presenting influenza-like symptoms; monitor students and staff closely for influenza-like symptoms.
Restrict school visitors to parents and vendors; be alert to parents or vendors with influenza-like symptoms.

Teachers
Do not allow students or staff into school who are presenting influenza-like symptoms; monitor students and staff closely for influenza-like symptoms.
Restrict school visitors to parents and vendors; be alert to parents or vendors with influenza-like symptoms.
Prohibit congregation in hall ways and lunchrooms; if possible, serve box lunches in classrooms to avoid gathering of students in the cafeteria; stagger class changes to avoid large groups of students in the hallway; stagger dismissal for the same reason; cancel gym class, choir or other school activities that place individuals in close proximity.
Separate student desks as much as possible.
Regularly wipe down high touch areas including desks, door knobs, counter tops, etc. with school supplied resources and spray.

School Based Administration
Do not enroll any students without appropriate immunization records, based on immunization and other health guidelines provided by the local health department, the Tillamook Division of Public Health and/or the United States Department of Health and Human Services.
Isolate and send home staff or students with influenza-like symptoms, utilizing supervised isolation areas in the school; access to this room should be strictly limited and monitored (i.e., parents picking up their ill children should be escorted to and from the isolation area); a carefully monitored student checkout system should be activated.

Communications Department
Keep staff and parents current with updates through communication channels; make certain that health-related information and pandemic updates have been verified for accuracy by the local health department.
Keep relevant groups informed (as appropriate) through e-mails, newsletters, fact sheets, social media, text alerts, on-demand phone system, and websites.
Meet with hot-line information staff to review possible activation of the hot-line information based on events occurring overseas at this time.
Expand hotline staff and update hotline information, website information, and provide media updates; provide updates from the public health department, from the district superintendent, and, if necessary, from local law

enforcement and public utilities and services; encourage parents to keep ill children at home and encourage ill staff to remain at home.

School Nurses

Maintain infection control precautionary measures.

Continue surveillance of staff, students, school visitors, and other personnel to help the local health department to monitor influenza-like symptoms; it would be helpful to local health departments if these reports at this level could be provided on a daily basis.

Continue surveillance of staff, students, school visitors, and other personnel to help the local health department to monitor influenza-like symptoms; it would be helpful to local health departments if these reports at this level could be provided on a daily basis.

Activate procedures to isolate students and staff that present influenza-like symptoms; encourage parents to keep their children at home if they have symptoms and to let the school know about their child's symptoms; encourage staff to remain at home if they have influenza-like symptoms and to report these symptoms to the school.

Continue surveillance of staff, students, school visitors, and other personnel to help the local health department to monitor influenza-like symptoms; it would be helpful to local health departments if these reports at this level could be provided on a daily basis.

Health Services Supervisor, not individual nurses, will serve as a direct link to the local health department or Incident Command staff. Nurses should channel questions to the Health Services Supervisor or designee.

If a person warrants medical evaluation, health services staff should alert the appropriate medical resources (i.e., public health) that a suspect case needs evaluation so that the referral center can make arrangements for a health assessment.

Transportation

Sanitize schools and buses daily, or as per local health department guidelines; implement sanitizing verification process.

Monitor students getting off buses and out of vehicles for signs of influenza-like symptoms; do not accept students or staff with influenza-like symptoms, or quickly isolate students and staff with influenza-like symptoms.

Custodial Services

Ensure that sanitation procedures are in conjunction with public health advisories.

Expand school cleaning routines by custodial staff.

Disinfect all work areas, counters, restrooms, door knobs, and stair railings several times daily; use other staff to assist, if necessary (specialized cleaning solutions are not essential; standard cleaning products can disinfect surfaces; the frequency of cleaning is most important).

The school health office and holding areas for ill children and staff should be cleaned several times each day.

Maintenance/Facilities

During the day, where operationally possible, increase ventilation to the facility to decrease spread of disease. Following each school day, the school should be thoroughly ventilated and cleaned: opening all doors and windows or turning the air conditioning/heating systems up.

Campus Safety/Security

<p>Provide security to limit access to the school building; persons presenting influenza-like symptoms will not be allowed into the building; if a parent is at school to pick up his or her child before normal dismissal, the student will be brought to the parent outside the building; each person cleared to enter the building will be given something to indicate that they are free to enter the building (e.g. a sticker, a card, a stamp on their hand).</p> <p>If a person warrants medical evaluation, notify health services staff.</p>

Begin after a suspected pandemic case is diagnosed in Tillamook County:

1. Immediately isolate (or cohort) staff or students with influenza-like illness.
 - a. Reinforce staff education on infection control procedures when caring for flu patients.
 - b. Ensure adequate infection-control supplies and personal protective equipment is available.
2. Perform triage to rapidly identify students with influenza-like symptoms and implement procedures for separating the sick from the well.
3. Conduct contact investigations of the initial cases that have been identified, and quarantine contacts according to public health guidelines.

Note: contact investigations and quarantine may be inappropriate and abandoned as a strategy if there are multiple pandemic cases in multiple classrooms.
4. Implement measures to increase social distancing (including school closure, if necessary).
5. Continue staff, parent and student training on infection control.
6. Monitor adherence to infection control guidelines.
7. Contact Human Resources and coordinate social distancing, workforce limitations issues, health insurance issues and any other pertinent issues.
8. Implement distance learning plan (if appropriate).

Response Phase Standard Operating Procedure of Outbreak

Based on a decision by the Nestucca Valley School Board in consultation with local or state public health authorities, the superintendent orders a **partial** closure of schools.

OR

Based on a decision by the Nestucca Valley School Board, in consultation with local or state public health authorities, the superintendent closes **all** school building units and other department building units of the school district; the closure applies to all after-school programs, also (it is possible that the first order is to close only those schools with high absences – be prepared for partial school closures).

School Nurses
If a person warrants medical evaluation, health services staff should alert the appropriate medical resources (i.e., public health) that a suspect case needs evaluation so that the referral center can make arrangements for a health assessment.

District Office
Confirm closure with the Oregon Department of Education.
Inform the public and school district employees using appropriate communication channels; coordinate news release with public health and the Oregon Department of Education.
If possible, maintain Incident Command Center operations and essential services; if not possible, District office staff should maintain telephone contact on a regular basis with the superintendent, such as daily conference calls.
Maintain communications with the local health department through superintendent or communication specialist.
Determine Essential Personnel.

Activate Educational Continuity Plan.

Cancel all extra-curricular activities.

Mental Health

When possible, collaborate with local agencies to assist families.

Teachers

Refer to Educational Continuity Plan.

Front Office

Communicate with District Office about staffing needs.

Custodial Services

Communicate with District Office about staffing needs.

Food Service

All perishable food items should be disposed of unless the cafeteria remains open.

Communicate with District Office about staffing needs.

Maintenance/Facilities

Assist campus safety personnel in securing all buildings.

During the day, where operationally possible, increase ventilation to the facility to decrease spread of disease.

Following each school day, the school should be thoroughly ventilated and cleaned: opening all doors and windows or turning the air conditioning/heating systems up.

Communicate with District Office about staffing needs.

Communications Department

Inform the public and school district employees using appropriate communication channels; coordinate news release with public health and the IMESD.

Communicate with District Office about staffing needs.

Campus Safety/Security

Secure all buildings.

Check all buildings and establish periodic patrols during the school closure period.

Check all alarm and surveillance systems.

Communicate with District Office about staffing needs.

Transportation

Secure all school buses and service vehicles.

Communicate with District Office about staffing needs.

Information Technology
Secure information technology system and integrity.
Communicate with District Office about staffing needs.

Recovery (Response Stage 8)

Previous pandemics have been associated with subsequent "waves" of influenza-like illnesses after an initial wave resolve. After an initial pandemic outbreak, subsequent outbreaks are likely. The recovery period will involve both recovering from the pandemic emergency, evaluating the response to it and preparing for subsequent waves of pandemic flu.

1. Maintain surveillance for influenza-like symptoms (to detect subsequent waves of pandemic influenza).
2. Maintain communication with local public health officials.
3. Evaluate the effectiveness of surveillance and infection-control measures during the pandemic flu and summarize observations.
4. Evaluate the adequacy of infection control supplies and the need for restocking.
5. Restock infection control supplies.
6. Revise plan if necessary.

Recovery Phase Standard Operating Procedures

Based on communication with public health and the local board of education authorization to start the process of recovery, the school district will begin the initial stages of preparations for the re-opening of schools.

District Office
Re-establish Incident Command Center as soon as possible.
Human Resources will begin the process of compiling communication to indicate which staff members are ready to return to work, OR establish an Employee Hotline Phone Bank so employees can call in status (name; position; work location; health status; return to work date); use a pre-determined Fitness for Duty checklist to determine if an employee is ready to return to work and under what conditions.
Human Resources will develop a status report for each staff category by school and department: teachers, administrators, custodians, bus drivers, etc.
Survey supply vendors to determine when supply chain and delivery system will be partially or fully operational; provide vendors with supply needs.
Finance department determines process for fast-tracking purchase orders for essential supplies.
Establish a timeline and staffing threshold for opening schools and other buildings for staff, based on reports from Human Resources, building and bus inspections, and the local health department; determine which schools can open and if temporary consolidation of schools is appropriate. Include other agencies in the discussion about re-opening schools, public health, mental health, Fire Marshal, law enforcement, public transportation, etc.
Begin discussions on restructuring and resuming extra-curricular activities and after-school programs.
Opening of schools should be monitored closely by Command Center staff.
Daily reports of staff and student attendance should be closely monitored.
A mental health status report, based on guidelines provided by the counselors and the Crisis Management Team, should be provided to the Command Center each day. This report should include the mental status of students and staff in order to determine if additional mental health services are needed.

Develop an instructional reconstruction checklist (base on the length of school closure; if short-term, the checklist should be focused on make-up work and reorganizing the instructional calendar, benchmarks, testing, etc.; if the closure was long-term, the checklist may require restructuring of the current and following school year instructional and operational calendar and events) to guide staff, students, and parents when school reopens. The checklist should include anticipated instructional materials and supplies, as well as possible waivers from the Oregon Department of Education.

Do not enroll new students without immunization records or approval from the local health department, based on immunization and other health guidelines provided by the local health department, the Oregon Division of Public Health and/or the United States Department of Health and Human Services.

When schools re-open, many students may need homebound instruction.

Teachers

When schools re-open activate social distancing strategies (to minimize possible infection spread):

- Gatherings of groups larger than normal class size should be cancelled and avoided (e.g. assemblies, recess).
- Student distance spacing strategies to decrease contact with students who may be infected but not exhibiting symptoms.
- Separate student desks as much as possible.
- Prohibit congregation in hall ways and lunchrooms; if possible, serve box lunches in classrooms to avoid gathering of students in the cafeteria; stagger class changes to avoid large groups of students in the hallway; stagger dismissal for the same reason; cancel gym class, choir or other school activities that place individuals in close proximity.

Mental Health

When possible, the Crisis Management Team staff will meet to activate the mental health plan for students and staff, in conjunction with local mental health services staff, including Post-Traumatic Stress Syndrome counseling.

Post information on school district website for parents regarding helping children cope with tragedies (i.e., Teaching Children How to Respond to Tragedies from the National Association of School Psychologists).

Maintenance/Facilities

Inspect all buildings, facilities, equipment, materials, etc. and determine status and needs for operations. Maintain a status update for facilities not ready for occupancy.

Inspect all school cafeterias with the assistance of the local health department.

Expand school cleaning routines by maintenance staff.

- Disinfect all work areas, counters, restrooms, door knobs, and stair railings several times daily; use other staff to assist, if necessary (specialized cleaning solutions are not essential; standard cleaning products can disinfect surfaces; the frequency of cleaning is most important).
- HVAC conditioning system filters should be cleaned and changed.
- The school should be thoroughly ventilated and cleaned: opening all doors and windows or turning the air conditioning/heating systems up.

Transportation

Inspect all buses.

Information Technology

Determine information technology status and operational needs; this will also be related to financial technology.

Front Office Personnel

Provide daily reports of staff and student attendance to Command Center.

School Nurses

Maintain unified command role with Command Staff

Compile daily health reports for the Command Center.

Work with Command Staff to develop an instructional reconstruction checklist (base on the length of school closure; if short-term, the checklist should be focused on make-up work and reorganizing the instructional calendar, benchmarks, testing, etc.; if the closure was long-term, the checklist may require restructuring of the current and following school year instructional and operational calendar and events) to guide staff, students, and parents when school reopens. The checklist should include anticipated instructional materials and supplies, as well as possible waivers from the Oregon Department of Education.

Do not enroll new students without immunization records or approval from the local health department, based on immunization and other health guidelines provided by the local health department, the Tillamook County Division of Public Health and/or the United States Department of Health and Human Services.

Food Service Personnel

Inspect all school cafeterias with the assistance of the local health department.

Custodial Services

Expand school cleaning routines by maintenance staff.

- Disinfect all work areas, counters, restrooms, door knobs, and stair railings several times daily; use other staff to assist, if necessary (specialized cleaning solutions are not essential; standard cleaning products can disinfect surfaces; the frequency of cleaning is most important).
- Air conditioning system filters should be cleaned and changed.
- The school should be thoroughly ventilated and cleaned: opening all doors and windows or turning the air conditioning/heating systems up.

Inspect all school cafeterias with the assistance of the local health department in conjunction with Food Service personnel.

School Based Administration

When schools re-open activate social distancing strategies (to minimize possible infection spread):

- Gatherings of groups larger than normal class size should be cancelled and avoided (e.g. assemblies, recess).
- Student distance spacing strategies to decrease contact with students who may be infected but not exhibiting symptoms.
- Separate student desks as much as possible.
- Prohibit congregation in hall ways and lunchrooms; if possible, serve box lunches in classrooms to avoid gathering of students in the cafeteria; stagger class changes to avoid large groups of students in the hallway; stagger dismissal for the same reason.

Communication Department

Share timeline for opening with news media and place recording on school district main phone line; also add to school district website. *Some schools may remain closed until facility and/or staffing requirements are met.

Re-activate information hot-line as soon as possible.

Post information on school district website for parents regarding helping children cope with tragedies (i.e., Teaching Children How to Respond to Tragedies from the National Association of School Psychologists).

A mental health status report, based on guidelines provided by the counselors and the Crisis Management Team, should be provided to the Command Center each day. This report should include the mental status of students and staff in order to determine if additional mental health services are needed.

According to experts, in the most severe pandemic, the duration of these public health measures could be weeks to months, which would have educational implications for students. Planning now for a prolonged period of student dismissal will allow Tillamook School District to be prepared as much as possible to provide opportunities for continued instruction and other assistance to students and staff.

If students are dismissed from school but schools remain open, school- and education-related assets, including school buildings, school kitchens, school buses, and staff, may continue to remain operational and potentially be of value to the community in many other ways. In addition, faculty and staff may be able to continue to provide lessons and other services to students by television, radio, mail, Internet, telephone, or other media.

Continued instruction is not only important for maintaining learning but also serves as a strategy to engage students in a constructive activity during the time that they are being asked to remain at home.

Finally, be prepared to activate the school district's crisis management plan for pandemic influenza that links the district's incident command system with the local and/or State health department/emergency management system's incident command system(s).

APPENDIX

SCHOOL DISTRICT (K-12) PANDEMIC INFLUENZA PLANNING CHECKLIST



Local educational agencies (LEAs) play an integral role in protecting the health and safety of their district's staff, students and their families. The Department of Health and Human Services (HHS) and the Centers for Disease Control and Prevention (CDC) have developed the following checklist to assist LEAs in developing and/or improving plans to prepare for and respond to an influenza pandemic.

Building a strong relationship with the local health department is critical for developing a meaningful plan. The key planning activities in this checklist build upon existing contingency plans recommended for school districts by the U.S. Department of Education (Practical Information on Crisis Planning: A Guide For Schools and Communities http://www.ed.gov/admins/lead/safety/emergency_plan/crisisplanning.pdf).

Further information on pandemic influenza can be found at www.pandemicflu.gov.

1. Planning and Coordination:

Completed	In Progress	Not Started	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Identify the authority responsible for declaring a public health emergency at the state and local levels and for officially activating the district's pandemic influenza response plan.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Identify for all stakeholders the legal authorities responsible for executing the community operational plan, especially those authorities responsible for case identification, isolation, quarantine, movement restriction, healthcare services, emergency care, and mutual aid.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As part of the district's crisis management plan, address pandemic influenza preparedness, involving all relevant stakeholders in the district (e.g., lead emergency response agency, district administrators, local public health representatives, school health and mental health professionals, teachers, food services director, and parent representatives). This committee is accountable for articulating strategic priorities and overseeing the development of the district's operational pandemic plan.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Work with local and/or state health departments and other community partners to establish organizational structures, such as the Incident Command System, to manage the execution of the district's pandemic flu plan. An Incident Command System, or ICS, is a standardized organization structure that establishes a line of authority and common terminology and procedures to be followed in response to an incident. Ensure compatibility between the district's established ICS and the local/state health department's and state education department's ICS.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Define accountability and responsibility as well as resources for key stakeholders engaged in planning and executing specific components of the operational plan. Assure that the plan includes timelines, deliverables, and performance measures.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Work with your local and/or state health department and state education agencies to coordinate with their pandemic plans. Assure that pandemic planning is coordinated with the community's pandemic plan as well as the state department of education's plan.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Test the linkages between the district's Incident Command System and the local/state health department's and state education department's Incident Command System.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Contribute to the local health department's operational plan for surge capacity of healthcare and other services to meet the needs of the community (e.g., schools designated as contingency hospitals, schools feeding vulnerable populations, community utilizing LEA's healthcare and mental health staff). In an affected community, at least two pandemic disease waves (about 6-8 weeks each) are likely over several months.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Incorporate into the pandemic influenza plan the requirements of students with special needs (e.g., low-income students who rely on the school food service for daily meals), those in special facilities (e.g., juvenile justice facilities) as well as those who do not speak English as their first language.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Participate in exercises of the community's pandemic plan.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Work with the local health department to address provision of psychosocial support services for the staff, students and their families during and after a pandemic.

1. Planning and Coordination (cont.):

Completed	In Progress	Not Started	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consider developing in concert with the local health department a surveillance system that would alert the local health department to a substantial increase in absenteeism among students.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Implement an exercise/drill to test your pandemic plan and revise it periodically.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Share what you have learned from developing your preparedness and response plan with other LEAs as well as private schools within the community to improve community response efforts.

2. Continuity of Student Learning and Core Operations:

Completed	In Progress	Not Started	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Develop scenarios describing the potential impact of a pandemic on student learning (e.g., student and staff absences), school closings, and extracurricular activities based on having various levels of illness among students and staff.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Develop alternative procedures to assure continuity of instruction (e.g., web-based distance instruction, telephone trees, mailed lessons and assignments, instruction via local radio or television stations) in the event of district school closures.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Develop a continuity of operations plan for essential central office functions including payroll and ongoing communication with students and parents.

3. Infection Control Policies and Procedures:

Completed	In Progress	Not Started	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Work with the local health department to implement effective infection prevention policies and procedures that help limit the spread of influenza at schools in the district (e.g. promotion of hand hygiene, cough/sneeze etiquette). Make good hygiene a habit now in order to help protect children from many infectious diseases such as flu.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Provide sufficient and accessible infection prevention supplies, such as soap, alcohol-based/waterless hand hygiene products (containing at least 60% alcohol), tissues, and receptacles for their disposal.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Establish policies and procedures for students and staff sick leave absences unique to a pandemic influenza (e.g., non-punitive, liberal leave).
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Establish sick leave policies for staff and students suspected to be ill or who become ill at school. Staff and students with known or suspected pandemic influenza should not remain at school and should return only after their symptoms resolve and they are physically ready to return to school.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Establish policies for transporting ill students.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Assure that the LEA pandemic plan for school-based health facilities conforms to those recommended for health care settings (Refer to www.hhs.gov/pandemicflu/plan).

4. Communications Planning:

Completed	In Progress	Not Started	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Assess readiness to meet communication needs in preparation for an influenza pandemic, including regular review, testing, and updating of communication plans.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Develop a dissemination plan for communication with staff, students, and families, including lead spokespersons and links to other communication networks.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ensure language, culture and reading level appropriateness in communications by including community leaders representing different language and/or ethnic groups on the planning committee, asking for their participation both in document planning and the dissemination of public health messages within their communities.

4. Communications Planning (cont.):

Completed	In Progress	Not Started	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Develop and test platforms (e.g., hotlines, telephone trees, dedicated websites, and local radio or TV stations) for communicating pandemic status and actions to school district staff, students, and families.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Develop and maintain up-to-date communications contacts of key public health and education stakeholders and use the network to provide regular updates as the influenza pandemic unfolds.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Assure the provision of redundant communication systems/channels that allow for the expedited transmission and receipt of information.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Advise district staff, students and families where to find up-to-date and reliable pandemic information from federal, state and local public health sources.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Disseminate information about the LEA's pandemic influenza preparedness and response plan (e.g., continuity of instruction, community containment measures).
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Disseminate information from public health sources covering routine infection control (e.g., hand hygiene, cough/sneeze etiquette), pandemic influenza fundamentals (e.g., signs and symptoms of influenza, modes of transmission) as well as personal and family protection and response strategies (e.g., guidance for the at-home care of ill students and family members).
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Anticipate the potential fear and anxiety of staff, students, and families as a result of rumors and misinformation and plan communications accordingly.





OPERATIONAL BLUEPRINT FOR SCHOOL REENTRY 2020-21

Updated 7/29/2020

Under ODE's *Ready Schools, Safe Learners* guidance, each school¹ has been directed to submit a plan to the district² in order to provide on-site and/or hybrid instruction. Districts must submit each school's plan to the local school board and make the plans available to the public. This form is to be used to document a district's, school's or program's plan to ensure students can return for the 2020-21 school year, in some form, in accordance with Executive Order 20-25(10). Schools must use the *Ready Schools, Safe Learners* guidance document as they complete their Operational Blueprint for Reentry. ODE recommends plan development be inclusive of, but not limited to school-based administrators, teachers and school staff, health and nursing staff, association leadership, nutrition services, transportation services, tribal consultation,³ parents and others for purposes of providing expertise, developing broad understanding of the health protocols and carrying out plan implementation.

1. Please fill out information:

SCHOOL/DISTRICT/PROGRAM INFORMATION	
Name of School, District or Program	Nestucca Valley School District
Key Contact Person for this Plan	Misty Wharton
Phone Number of this Person	503-392-3194 Ext. 404
Email Address of this Person	mistyw@nestucca.k12.or.us
Sectors and position titles of those who informed the plan	Misty Wharton, Superintendent Ken Richwine, Jr./Sr. High Principal Chad Holloway, Elementary Principal Megan Kellow, Special Programs Administrator
Local public health office(s) or officers(s)	Tillamook County Health Department
Name of person Designated to Establish, Implement and Enforce Physical Distancing Requirements	Misty Wharton, Superintendent
Intended Effective Dates for this Plan	August 15, 2020-June 30, 2021
ESD Region	Northwest Regional ESD

2. Please list efforts you have made to engage your community (public health information sharing, taking feedback on planning, etc.) in preparing for school in 2020-21. Include information on engagement with communities often underserved and marginalized and those communities disproportionately impacted by COVID-19.

We have collected data and feedback (via online survey) regarding Distance Learning successes and struggles, technology availability/needs for next school year and the preference of parents and students for the structuring of the 2020-21 school year. Surveys were provided in each family's native language.

¹ For the purposes of this guidance: "school" refers to all public schools, including public charter schools, public virtual charter schools, alternative education programs, private schools and the Oregon School for the Deaf. For ease of readability, "school" will be used inclusively to reference all of these settings.

² For the purposes of this guidance: "district" refers to a school district, education service district, public charter school sponsoring district, virtual public charter school sponsoring district, state sponsored public charter school, alternative education programs, private schools, and the Oregon School for the Deaf.

³ 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.

3. Indicate which instructional model will be used.

Select One:

On-Site Learning Hybrid Learning Comprehensive Distance Learning

4. If you selected Comprehensive Distance Learning, you only have to fill out the green portion of the Operational Blueprint for Reentry (i.e., page 2 in the initial template).
5. If you selected On-Site Learning or Hybrid Learning, you have to fill out the blue portion of the Operational Blueprint for Reentry (i.e., pages 3-16 in the initial template) and submit online. (<https://app.smartsheet.com/b/form/a4dedb5185d94966b1dffc75e4874c8a>) by August 17, 2020 or prior to the beginning of the 2020-21 school year.

* **Note:** Private schools are required to comply with only sections 1-3 of the *Ready Schools, Safe Learners* guidance.

REQUIREMENTS FOR COMPREHENSIVE DISTANCE LEARNING OPERATIONAL BLUEPRINT

This section must be completed by any school that is seeking to provide instruction through Comprehensive Distance Learning. Schools providing On-Site or Hybrid Instructional Models do not need to complete this section.

Describe why you are selecting Comprehensive Distance Learning as the school's Instructional Model for the effective dates of this plan.

The decision to begin our 20-21 school year in a comprehensive distance learning model was based on the metrics provided by the state, the recent increase of confirmed Covid-19 cases in our small, rural community, feedback from our families and staff, as well as limited access to resources that would allow us to meet the requirements for an on-site learning and/or hybrid learning model. At this time, the Nestucca Valley School District believes that comprehensive distance learning is the safest plan for our students, staff and greater community.

In completing this portion of the Blueprint you are attesting that you have reviewed the Comprehensive Distance Learning Guidance. [Here is a link to the overview of CDL Requirements](#). Please name any requirements you need ODE to review for any possible flexibility or waiver.

N/A

Describe the school's plan, including the anticipated timeline, for returning to Hybrid Learning or On-Site Learning consistent with the *Ready Schools, Safe Learners* guidance.

The Nestucca Valley School District plans to implement a comprehensive distance-learning program during the first nine-week grading period. During this time, we will be closely monitoring and meeting on a weekly basis (minimum) to discuss the district's ability to move into an on-site or hybrid learning model as soon as we are able to do so. As we go through this process, we will adjust our blueprint plan to reflect the current data within Tillamook County, as well as any new guideline set forth by the state. We will be including staff, students, families and stakeholders in these discussions as well.

The remainder of this operational blueprint is not applicable to schools operating a Comprehensive Distance Learning Model.

ESSENTIAL REQUIREMENTS FOR HYBRID / ON-SITE OPERATIONAL BLUEPRINT

This section must be completed by any school that is providing instruction through On-Site or Hybrid Instructional Models. Schools providing Comprehensive Distance Learning Instructional Models do not need to complete this section.



1. Public Health Protocols

1a. COMMUNICABLE DISEASE MANAGEMENT PLAN FOR COVID-19

OHA/ODE Requirements	Hybrid/Onsite Plan
<ul style="list-style-type: none"> <input type="checkbox"/> Implement measures to limit the spreads of COVID-19 within the school setting. <input type="checkbox"/> Update written Communicable Disease Management Plan to specifically address the prevention of the spread of COVID-19. <input type="checkbox"/> Designate a person at each school to establish, implement and enforce physical distancing requirements, consistent with this guidance and other guidance from OHA. <input type="checkbox"/> Include names of the LPHA staff, school nurses, and other medical experts who provided support and resources to the district/school policies and plans. Review relevant local, state, and national evidence to inform plan. <input type="checkbox"/> Process and procedures established to train all staff in sections 1 - 3 of the <i>Ready Schools, Safe Learners</i> guidance. Consider conducting the training virtually, or, if in-person, ensure physical distancing is maintained to the maximum extent possible. <input type="checkbox"/> Protocol to notify the local public health authority (LPHA Directory by County) of any confirmed COVID-19 cases among students or staff. <input type="checkbox"/> Plans for systematic disinfection of classrooms, offices, bathrooms and activity areas. <input type="checkbox"/> Process to report to the LPHA any cluster of any illness among staff or students. <input type="checkbox"/> Protocol to cooperate with the LPHA recommendations and provide all logs and information in a timely manner. <input type="checkbox"/> Protocol for screening students and staff for symptoms (see section 1f of the <i>Ready Schools, Safe Learners</i> guidance). <input type="checkbox"/> Protocol to isolate any ill or exposed persons from physical contact with others. <input type="checkbox"/> Protocol for communicating potential COVID-19 cases to the school community and other stakeholders (see section 1e of the <i>Ready Schools, Safe Learners</i> guidance). <input type="checkbox"/> Create a system for maintaining daily logs for each student/cohort for the purposes of contact tracing. This system needs to be made in consultation with a school/district nurse or an LPHA official. Sample logs are available as a part of the Oregon School Nurses Association COVID-19 Toolkit. <ul style="list-style-type: none"> • If a student(s) is part of a stable cohort (a group of students that are consistently in contact with each other or in multiple cohort groups) that conform to the requirements of cohorting (see section 1d of the <i>Ready Schools, Safe Learners</i> guidance), the daily log may be maintained for the cohort. • If a student(s) is not part of a stable cohort, then an individual student log must be maintained. <input type="checkbox"/> Required components of individual daily student/cohort logs include: 	Empty space for the Hybrid/Onsite Plan

OHA/ODE Requirements	Hybrid/Onsite Plan
<ul style="list-style-type: none"> • Child's name • Drop off/pick up time • Parent/guardian name and emergency contact information • All staff (including itinerant staff, district staff, substitutes, and guest teachers) names and phone numbers who interact with a stable cohort or individual student <p><input type="checkbox"/> Protocol to record/keep daily logs to be used for contact tracing for a minimum of four weeks to assist the LPHA as needed.</p> <p><input type="checkbox"/> Process to ensure that all itinerant and all district staff (maintenance, administrative, delivery, nutrition, and any other staff) who move between buildings keep a log or calendar with a running four-week history of their time in each school building and who they were in contact with at each site.</p> <p><input type="checkbox"/> Process to ensure that the school reports to and consults with the LPHA regarding cleaning and possible classroom or program closure if anyone who has entered school is diagnosed with COVID-19.</p> <p><input type="checkbox"/> Protocol to respond to potential outbreaks (see section 3 of the <i>Ready Schools, Safe Learners</i> guidance).</p>	

1b. HIGH-RISK POPULATIONS

OHA/ODE Requirements	Hybrid/Onsite Plan
<p><input type="checkbox"/> Serve students in high-risk population(s) whether learning is happening through On-Site, Hybrid (partially On-Site and partially Comprehensive Distance Learning models), or Comprehensive Distance Learning models.</p> <p>Medically Fragile, Complex and Nursing-Dependent Student Requirements</p> <p><input type="checkbox"/> All districts must account for students who have health conditions that require additional nursing services. Oregon law (ORS 336.201) defines three levels of severity related to required nursing services:</p> <ol style="list-style-type: none"> 1. Medically Complex: Are students who may have an unstable health condition and who may require daily professional nursing services. <p><input type="checkbox"/> Staff and school administrators, in partnership with school nurses, or other school health providers, should work with interdisciplinary teams to address individual student needs. The school registered nurse (RN) is responsible for nursing care provided to individual students as outlined in ODE guidance and state law:</p> <ul style="list-style-type: none"> • Communicate with parents and health care providers to determine return to school status and current needs of the student. • Coordinate and update other health services the student may be receiving in addition to nursing services. This may include speech language pathology, occupational therapy, physical therapy, as well as behavioral and mental health services. • Modify Health Management Plans, Care Plans, IEPs, or 504 or other student-level medical plans, as indicated, to address current health care considerations. • The RN practicing in the school setting should be supported to remain up to date on current guidelines and access professional support such as evidence-based resources from the Oregon School Nurses Association. • Service provision should consider health and safety as well as legal standards. 	

OHA/ODE Requirements	Hybrid/Onsite Plan
<ul style="list-style-type: none"> • Work with an interdisciplinary team to meet requirements of ADA and FAPE. • High-risk individuals may meet criteria for exclusion during a local health crisis. • Refer to updated state and national guidance and resources such as: <ul style="list-style-type: none"> ○ U.S. Department of Education Supplemental Fact Sheet: Addressing the Risk of COVID-19 in Preschool, Elementary and Secondary Schools While Serving Children with Disabilities from March 21, 2020. ○ ODE guidance updates for Special Education. Example from March 11, 2020. ○ OAR 581-015-2000 Special Education, requires districts to provide 'school health services and school nurse services' as part of the 'related services' in order 'to assist a child with a disability to benefit from special education.' ○ OAR 333-019-0010 Public Health: Investigation and Control of Diseases: General Powers and Responsibilities, outlines authority and responsibilities for school exclusion. 	

1c. PHYSICAL DISTANCING

OHA/ODE Requirements	Hybrid/Onsite Plan
<ul style="list-style-type: none"> <input type="checkbox"/> Establish a minimum of 35 square feet per person when determining room capacity. Calculate only with usable classroom space, understanding that desks and room set-up will require use of all space in the calculation. This also applies for professional development and staff gatherings. <input type="checkbox"/> Support physical distancing in all daily activities and instruction, maintaining at least six feet between individuals to the maximum extent possible. <input type="checkbox"/> Minimize time standing in lines and take steps to ensure that six feet of distance between students is maintained, including marking spacing on floor, one-way traffic flow in constrained spaces, etc. <input type="checkbox"/> Schedule modifications to limit the number of students in the building (e.g., rotating groups by days or location, staggered schedules to avoid hallway crowding and gathering). <input type="checkbox"/> Plan for students who will need additional support in learning how to maintain physical distancing requirements. Provide instruction; don't employ punitive discipline. <input type="checkbox"/> Staff should maintain physical distancing during all staff meetings and conferences, or consider remote web-based meetings. 	

1d. COHORTING

OHA/ODE Requirements	Hybrid/Onsite Plan
<ul style="list-style-type: none"> <input type="checkbox"/> Where feasible, establish stable cohorts: groups should be no larger than can be accommodated by the space available to provide 35 square feet per person, including staff. <ul style="list-style-type: none"> • The smaller the cohort, the less risk of spreading disease. As cohort groups increase in size, the risk of spreading disease increases. <input type="checkbox"/> Students cannot be part of any single cohort, or part of multiple cohorts that exceed a total of 100 people within the educational week. Schools should plan to limit cohort sizes to allow for efficient contact-tracing and minimal risk for exposure. <input type="checkbox"/> Each school must have a system for daily logs to ensure contact tracing among the cohort (see section 1a of the <i>Ready Schools, Safe Learners</i> guidance). 	

OHA/ODE Requirements	Hybrid/Onsite Plan
<ul style="list-style-type: none"> <input type="checkbox"/> Minimize interaction between students in different stable cohorts (e.g., access to restrooms, activities, common areas). Provide access to All Gender/Gender Neutral restrooms. <input type="checkbox"/> Cleaning and wiping surfaces (e.g., desks, door handles, etc.) must be maintained between multiple student uses, even in the same cohort. <input type="checkbox"/> Design cohorts such that all students (including those protected under ADA and IDEA) maintain access to general education, grade level learning standards, and peers. <input type="checkbox"/> Staff who interact with multiple stable cohorts must wash/sanitize their hands between interactions with different stable cohorts. 	

1e. PUBLIC HEALTH COMMUNICATION

OHA/ODE Requirements	Hybrid/Onsite Plan
<ul style="list-style-type: none"> <input type="checkbox"/> Communicate to staff at the start of On-Site instruction and at periodic intervals explaining infection control measures that are being implemented to prevent spread of disease. <input type="checkbox"/> Develop protocols for communicating with students, families and staff who have come into close contact with a confirmed case. <ul style="list-style-type: none"> • The definition of exposure is being within 6 feet of a COVID-19 case for 15 minutes (or longer). <input type="checkbox"/> Develop protocols for communicating immediately with staff, families, and the community when a new case(s) of COVID-19 is diagnosed in students or staff members, including a description of how the school or district is responding. <input type="checkbox"/> Provide all information in languages and formats accessible to the school community. 	

1f. ENTRY AND SCREENING

OHA/ODE Requirements	Hybrid/Onsite Plan
<ul style="list-style-type: none"> <input type="checkbox"/> Direct students and staff to stay home if they, or anyone in their homes or community living spaces, have COVID-19 symptoms, or if anyone in their home or community living spaces has COVID-19. COVID-19 symptoms are as follows: <ul style="list-style-type: none"> • Primary symptoms of concern: cough, fever (of greater than 100.4°F) or chills, shortness of breath, or difficulty breathing. • Note that muscle pain, headache, sore throat, new loss of taste or smell, diarrhea, nausea, vomiting, nasal congestion, and runny nose are also symptoms often associated with COVID-19. More information about COVID-19 symptoms is available from CDC. • In addition to COVID-19 symptoms, students should be excluded from school for signs of other infectious diseases, per existing school policy and protocols. See pages 9-12 of OHA/ODE Communicable Disease Guidance. • Emergency signs that require immediate medical attention: <ul style="list-style-type: none"> ○ Trouble breathing ○ Persistent pain or pressure in the chest ○ New confusion or inability to awaken ○ Bluish lips or face ○ Other severe symptoms <input type="checkbox"/> Screen all students and staff for symptoms on entry to bus/school every day. This can be done visually and/or with confirmation from a parent/caregiver/guardian. Staff members can self-screen and attest to their own health. <ul style="list-style-type: none"> • Anyone displaying or reporting the primary symptoms of concern must be isolated (see section 1i of the <i>Ready</i> 	

OHA/ODE Requirements	Hybrid/Onsite Plan
<p><i>Schools, Safe Learners</i> guidance) and sent home as soon as possible.</p> <ul style="list-style-type: none"> • They must remain home until 24 hours after fever is gone (without use of fever reducing medicine) and other symptoms are improving. <p><input type="checkbox"/> Follow LPHA advice on restricting from school any student or staff known to have been exposed (e.g., by a household member) to COVID-19 within the preceding 14 calendar days.</p> <p><input type="checkbox"/> Staff or students with a chronic or baseline cough that has worsened or is not well-controlled with medication should be excluded from school. Do not exclude staff or students who have other symptoms that are chronic or baseline symptoms (e.g., asthma, allergies, etc.) from school.</p> <p><input type="checkbox"/> Hand hygiene on entry to school every day: wash with soap and water for 20 seconds or use an alcohol-based hand sanitizer with 60-95% alcohol.</p>	

1g. VISITORS/VOLUNTEERS

OHA/ODE Requirements	Hybrid/Onsite Plan
<p><input type="checkbox"/> Restrict non-essential visitors/volunteers.</p> <p><input type="checkbox"/> Visitors/volunteers must wash or sanitize their hands upon entry and exit.</p> <p><input type="checkbox"/> Visitors/volunteers must maintain six-foot distancing, wear face coverings, and adhere to all other provisions of this guidance.</p> <p><input type="checkbox"/> Screen all visitors/volunteers for symptoms upon every entry. Restrict from school property any visitor known to have been exposed to COVID-19 within the preceding 14 calendar days.</p>	

1h. FACE COVERINGS, FACE SHIELDS, AND CLEAR PLASTIC BARRIERS

OHA/ODE Requirements	Hybrid/Onsite Plan
<p><input type="checkbox"/> Face coverings or face shields for all staff, contractors, other service providers, or visitors or volunteers following CDC guidelines Face Coverings.</p> <p><input type="checkbox"/> Face coverings or face shields for all students in grades Kindergarten and up following CDC guidelines Face Coverings.</p> <p><input type="checkbox"/> If a student removes a face covering, or demonstrates a need to remove the face covering for a short-period of time, the school/team must:</p> <p><input type="checkbox"/> Face masks for school RNs or other medical personnel when providing direct contact care and monitoring of staff/students displaying symptoms. School nurses should also wear appropriate Personal Protective Equipment (PPE) for their role.</p> <p>Protections under the ADA or IDEA</p> <p><input type="checkbox"/> If any student requires an accommodation to meet the requirement for face coverings, districts and schools should work to limit the student's proximity to students and staff to the extent possible to minimize the possibility of exposure. Appropriate accommodations could include:</p> <ul style="list-style-type: none"> • Offering different types of face coverings and face shields that may meet the needs of the student. • Spaces away from peers while the face covering is removed; students should not be left alone or unsupervised. • Short periods of the educational day that do not include wearing the face covering, while following the other health strategies to reduce the spread of disease; • Additional instructional supports to effectively wear a face covering; 	

OHA/ODE Requirements	Hybrid/Onsite Plan
<ul style="list-style-type: none"> <input type="checkbox"/> For students with existing medical conditions, doctor's orders to not wear face coverings, or other health related concerns, schools/districts must not deny access to On-Site instruction. <input type="checkbox"/> Schools and districts must comply with the established IEP/504 plan prior to the closure of in-person instruction in March of 2020. <ul style="list-style-type: none"> • If a student eligible for, or receiving services under a 504/IEP, cannot wear a face covering due to the nature of the disability, the school or district must: <ol style="list-style-type: none"> 1. Review the 504/IEP to ensure access to instruction in a manner comparable to what was originally established in the student's plan including on-site instruction with accommodations or adjustments. 2. Placement determinations cannot be made due solely to the inability to wear a face covering. 3. Plans should include updates to accommodations and modifications to support students. • Students protected under ADA/IDEA, who abstain from wearing a face covering, or students whose families determine the student will not wear a face covering, the school or district must: <ol style="list-style-type: none"> 1. Review the 504/IEP to ensure access to instruction in a manner comparable to what was originally established in the student's plan. 2. The team must determine that the disability is not prohibiting the student from meeting the requirement. <ul style="list-style-type: none"> • If the team determines that the disability is prohibiting the student from meeting the requirement, follow the requirements for students eligible for, or receiving services under, a 504/IEP who cannot wear a face covering due to the nature of the disability, • If a student's 504/IEP plan included supports/goals/instruction for behavior or social emotional learning, the school team must evaluate the student's plan prior to providing instruction through Comprehensive Distance Learning. 3. Hold a 504/IEP meeting to determine equitable access to educational opportunities which may include limited on-site instruction, on-site instruction with accommodations, or Comprehensive Distance Learning. <input type="checkbox"/> Districts must consider child find implications for students who are not currently eligible for, or receiving services under, a 504/IEP who demonstrate an inability to consistently wear a face covering or face shield as required. Ongoing inability to meet this requirement may be evidence of the need for an evaluation to determine eligibility for support under IDEA or Section 504. <input type="checkbox"/> If a staff member requires an accommodation for the face covering or face shield requirements, districts and schools should work to limit the staff member's proximity to students and staff to the extent possible to minimize the possibility of exposure. 	

1i. ISOLATION MEASURES

OHA/ODE Requirements	Hybrid/Onsite Plan
<ul style="list-style-type: none"> <input type="checkbox"/> Protocols for exclusion and isolation for sick students and staff whether identified at the time of bus pick-up, arrival to school, or at any time during the school day. <input type="checkbox"/> Protocols for screening students, as well as exclusion and isolation protocols for sick students and staff identified at the time of arrival or during the school day. <ul style="list-style-type: none"> • Work with school nurses, health care providers, or other staff with expertise to determine necessary modifications to areas where staff/students will be isolated. • Consider required physical arrangements to reduce risk of disease transmission. • Plan for the needs of generally well students who need medication or routine treatment, as well as students who may show signs of illness. <input type="checkbox"/> Students and staff who report or develop symptoms must be isolated in a 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 school staff until they are able to go home. Anyone providing supervision and symptom monitoring must wear appropriate face covering or face shields. <ul style="list-style-type: none"> • School nurse and health staff in close contact with symptomatic individuals (less than six feet) should wear a medical-grade face mask. Other Personal Protective Equipment (PPE) may be needed depending on symptoms and care provided. Consult a nurse or health care professional regarding appropriate use of PPE. Any PPE used during care of a symptomatic individual should be properly removed and disposed of prior to exiting the care space. • After removing PPE, hands should be immediately cleaned with soap and water for at least 20 seconds. If soap and water are not available, hands can be cleaned with an alcohol-based hand sanitizer that contains 60-95% alcohol. • If able to do so safely, a symptomatic individual should wear a face covering. • To reduce fear, anxiety, or shame related to isolation, provide a clear explanation of procedures, including use of PPE and handwashing. <input type="checkbox"/> Establish procedures for safely transporting anyone who is sick to their home or to a health care facility. <input type="checkbox"/> Staff and students who are ill must stay home from school and must be sent home if they become ill at school, particularly if they have COVID-19 symptoms. <ul style="list-style-type: none"> • Symptomatic staff or students should be evaluated and seek COVID-19 testing from their regular physician or through the local public health authority. • If they have a positive COVID-19 viral (PCR) test result, the person should remain home for at least 10 days after illness onset and 24 hours after fever is gone, without use of fever reducing medicine, and other symptoms are improving. • If they have a negative COVID-19 viral test (and if they have multiple tests, all tests are negative), they should remain home until 24 hours after fever is gone, without 	

OHA/ODE Requirements	Hybrid/Onsite Plan
<p>use of fever reducing medicine, and other symptoms are improving.</p> <ul style="list-style-type: none"> If a clear alternative diagnosis is identified as the cause of the person's illness (e.g., a positive strep throat test), then usual disease-specific return-to-school guidance should be followed and person should be fever-free for 24 hours, without use of fever reducing medicine. A physician note is required to return to school, to ensure that the person is not contagious. If they do not undergo COVID-19 testing, the person should remain at home for 10 days and until 24 hours after fever is gone, without use of fever reducing medicine, and other symptoms are improving. <p><input type="checkbox"/> Involve school nurses, School Based Health Centers, or staff with related experience (Occupational or Physical Therapists) in development of protocols and assessment of symptoms (where staffing exists).</p> <p><input type="checkbox"/> Record and monitor the students and staff being isolated or sent home for the LPHA review.</p>	



2. Facilities and School Operations

Some activities and areas will have a higher risk for spread (e.g., band, choir, science labs, locker rooms). When engaging in these activities within the school setting, schools will need to consider additional physical distancing or conduct the activities outside (where feasible). Additionally, schools should consider sharing explicit risk statements for higher risk activities (see section 5f of the *Ready Schools, Safe Learners* guidance).

2a. ENROLLMENT

(Note: Section 2a does not apply to private schools.)

OHA/ODE Requirements	Hybrid/Onsite Plan
<p><input type="checkbox"/> Enroll all students (includes foreign exchange students) following the standard Oregon Department of Education guidelines.</p> <p><input type="checkbox"/> Do not disenroll students for non-attendance if they meet the following conditions:</p> <ul style="list-style-type: none"> Are identified as high-risk, or otherwise considered to be part of a population vulnerable to infection with COVID-19, or Have COVID-19 symptoms for 10 consecutive school days or longer. <p><input type="checkbox"/> Design attendance policies to account for students who do not attend in-person due to student or family health and safety concerns.</p>	

2b. ATTENDANCE

(Note: Section 2b does not apply to private schools.)

OHA/ODE Requirements	Hybrid/Onsite Plan
<p><input type="checkbox"/> Grades K-5: Attendance must be taken at least once per day for all students enrolled in school, regardless of the instructional model (On-Site, Hybrid, Comprehensive Distance Learning).</p> <p><input type="checkbox"/> Grades 6-12: Attendance must be taken at least once for each scheduled class that day for all students enrolled in school, regardless of the instructional model (On-Site, Hybrid, Comprehensive Distance Learning).</p> <p><input type="checkbox"/> Provide families with clear and concise descriptions of student attendance and participation expectations as well as family involvement expectations that take into consideration the home</p>	

OHA/ODE Requirements	Hybrid/Onsite Plan
environment, caregiver's work schedule, and mental/physical health.	

2c. TECHNOLOGY

OHA/ODE Requirements	Hybrid/Onsite Plan
<input type="checkbox"/> Update procedures for district-owned or <i>school-owned</i> devices to match cleaning requirements (see section 2d of the <i>Ready Schools, Safe Learners</i> guidance). <input type="checkbox"/> Procedures for return, inventory, updating, and redistributing district-owned devices must meet physical distancing requirements.	

2d. SCHOOL SPECIFIC FUNCTIONS/FACILITY FEATURES

OHA/ODE Requirements	Hybrid/Onsite Plan
<input type="checkbox"/> Handwashing: All people on campus should be advised and encouraged to wash their hands frequently. <input type="checkbox"/> Equipment: Develop and use sanitizing protocols for all equipment used by more than one individual or purchase equipment for individual use. <input type="checkbox"/> Events: Cancel, modify, or postpone field trips, assemblies, athletic events, practices, special performances, school-wide parent meetings and other large gatherings to meet requirements for physical distancing. <input type="checkbox"/> Transitions/Hallways: Limit transitions to the extent possible. Create hallway procedures to promote physical distancing and minimize gatherings. <input type="checkbox"/> Personal Property: Establish policies for personal property being brought to school (e.g., refillable water bottles, school supplies, headphones/earbuds, cell phones, books, instruments, etc.). If personal items are brought to school, they must be labeled prior to entering school and use should be limited to the item owner.	<ul style="list-style-type: none"> ● Handwashing: ● Equipment: ● Events: ● Transitions/Hallways: ● Personal Property:

2e. ARRIVAL AND DISMISSAL

OHA/ODE Requirements	Hybrid/Onsite Plan
<input type="checkbox"/> Physical distancing, stable cohorts, square footage, and cleaning requirements must be maintained during arrival and dismissal procedures. <input type="checkbox"/> Create schedule(s) and communicate staggered arrival and/or dismissal times. <input type="checkbox"/> Assign students or cohorts to an entrance; assign staff member(s) to conduct visual screenings (see section 1f of the <i>Ready Schools, Safe Learners</i> guidance). <input type="checkbox"/> Ensure accurate sign-in/sign-out protocols to help facilitate contact tracing by the LPHA. Sign-in procedures are not a replacement for entrance and screening requirements. Students entering school after arrival times must be screened for the primary symptoms of concern. <ul style="list-style-type: none"> ● Eliminate shared pen and paper sign-in/sign-out sheets. ● Ensure hand sanitizer is available if signing children in or out on an electronic device. <input type="checkbox"/> Ensure hand sanitizer dispensers are easily accessible near all entry doors and other high-traffic areas. Establish and clearly communicate procedures for keeping caregiver drop-off/pick-up as brief as possible.	

2f. CLASSROOMS/REPURPOSED LEARNING SPACES

OHA/ODE Requirements	Hybrid/Onsite Plan
<input type="checkbox"/> Seating: Rearrange student desks and other seat spaces so that staff and students' physical bodies are six feet apart to the	<ul style="list-style-type: none"> ● Seating:

OHA/ODE Requirements	Hybrid/Onsite Plan
<p>maximum extent possible while also maintaining 35 square feet per person; assign seating so students are in the same seat at all times.</p> <ul style="list-style-type: none"> <input type="checkbox"/> Materials: Avoid sharing of community supplies when possible (e.g., scissors, pencils, etc.). Clean these items frequently. Provide hand sanitizer and tissues for use by students and staff. <input type="checkbox"/> Handwashing: Remind students (with signage and regular verbal reminders from staff) of the utmost importance of hand hygiene and respiratory etiquette. Respiratory etiquette means covering coughs and sneezes with an elbow or a tissue. Tissues should be disposed of in a garbage can, then hands washed or sanitized immediately. <ul style="list-style-type: none"> • Wash hands with soap and water for 20 seconds or use an alcohol-based hand sanitizer with 60-95% alcohol. 	<ul style="list-style-type: none"> • Materials: • Handwashing:

2g. PLAYGROUNDS, FIELDS, RECESS, BREAKS, AND RESTROOMS

OHA/ODE Requirements	Hybrid/Onsite Plan
<ul style="list-style-type: none"> <input type="checkbox"/> Keep school playgrounds closed to the general public until park playground equipment and benches reopen in the community (see Oregon Health Authority's Specific Guidance for Outdoor Recreation Organizations). <input type="checkbox"/> After using the restroom students must wash hands with soap and water for 20 seconds. Soap must be made available to students and staff. <input type="checkbox"/> Before and after using playground equipment, students must wash hands with soap and water for 20 seconds <u>or</u> use an alcohol-based hand sanitizer with 60-95% alcohol. <input type="checkbox"/> Designate playground and shared equipment solely for the use of one cohort at a time. Disinfect at least daily or between use as much as possible in accordance with CDC guidance. <input type="checkbox"/> Cleaning requirements must be maintained (see section 2j of the <i>Ready Schools, Safe Learners</i> guidance). <input type="checkbox"/> Maintain physical distancing requirements, stable cohorts, and square footage requirements. <input type="checkbox"/> Provide signage and restrict access to outdoor equipment (including sports equipment, etc.). <input type="checkbox"/> Design recess activities that allow for physical distancing and maintenance of stable cohorts. <input type="checkbox"/> Clean all outdoor equipment at least daily or between use as much as possible in accordance with CDC guidance. <input type="checkbox"/> Limit staff rooms, common staff lunch areas, and workspaces to single person usage at a time, maintaining six feet of distance between adults. 	

2h. MEAL SERVICE/NUTRITION

OHA/ODE Requirements	Hybrid/Onsite Plan
<ul style="list-style-type: none"> <input type="checkbox"/> Include meal services/nutrition staff in planning for school reentry. <input type="checkbox"/> Staff serving meals must wear face shields or face covering (see section 1h of the <i>Ready Schools, Safe Learners</i> guidance). <input type="checkbox"/> Students must wash hands with soap and water for 20 seconds <u>or</u> use an alcohol-based hand sanitizer with 60-95% alcohol before meals and should be encouraged to do so after. <input type="checkbox"/> Appropriate daily cleaning of meal items (e.g., plates, utensils, transport items) in classrooms where meals are consumed. <input type="checkbox"/> Cleaning and sanitizing of meal touch-points and meal counting system between stable cohorts. <input type="checkbox"/> Adequate cleaning of tables between meal periods. <input type="checkbox"/> Since staff must remove their face coverings during eating and drinking, staff should eat snacks and meals independently, and not 	

OHA/ODE Requirements	Hybrid/Onsite Plan
in staff rooms when other people are present. Consider staggering times for staff breaks, to prevent congregation in shared spaces.	

2i. TRANSPORTATION

OHA/ODE Requirements	Hybrid/Onsite Plan
<ul style="list-style-type: none"> <input type="checkbox"/> Include transportation departments (and associated contracted providers, if used) in planning for return to service. <input type="checkbox"/> Buses are cleaned frequently. Conduct targeted cleanings between routes, with a focus on disinfecting frequently touched surfaces of the bus (see section 2j of the <i>Ready Schools, Safe Learners</i> guidance). <input type="checkbox"/> Develop protocol for loading/unloading that includes visual screening for students exhibiting symptoms and logs for contact-tracing. This can be done at the time of arrival and departure. <ul style="list-style-type: none"> • If a student displays COVID-19 symptoms, provide a face shield or face covering (unless they are already wearing one) and keep six feet away from others. Continue transporting the student. • If arriving at school, notify staff to begin isolation measures. <ul style="list-style-type: none"> ○ If transporting for dismissal and the student displays an onset of symptoms, notify the school. <input type="checkbox"/> Consult with parents/guardians of students who may require additional support (e.g., students who experience a disability and require specialized transportation as a related service) to appropriately provide service. <input type="checkbox"/> Drivers wear face shields or face coverings when not actively driving and operating the bus. <input type="checkbox"/> Inform parents/guardians of practical changes to transportation service (i.e., physical distancing at bus stops and while loading/unloading, potential for increased route time due to additional precautions, sanitizing practices, and face coverings). <input type="checkbox"/> Face coverings or face shields for all students in grades Kindergarten and up following CDC guidelines applying the guidance in section 1h of the <i>Ready Schools, Safe Learners</i> guidance to transportation settings. 	

2j. CLEANING, DISINFECTION, AND VENTILATION

OHA/ODE Requirements	Hybrid/Onsite Plan
<ul style="list-style-type: none"> <input type="checkbox"/> Clean, sanitize, and disinfect frequently touched surfaces (e.g., playground equipment, door handles, sink handles, drinking fountains, transport vehicles) and shared objects (e.g., toys, games, art supplies) between uses multiple times per day. Maintain clean and disinfected (CDC guidance) environments, including classrooms, cafeteria settings and restrooms. <input type="checkbox"/> <u>Clean and disinfect</u> playground equipment at least daily or between use as much as possible in accordance with CDC guidance. <input type="checkbox"/> Apply disinfectants safely and correctly following labeling direction as specified by the manufacturer. Keep these products away from students. <input type="checkbox"/> To reduce the risk of asthma, choose disinfectant products on the EPA List N with asthma-safer ingredients (e.g. hydrogen peroxide, citric acid, or lactic acid) and avoid products that mix these with asthma-causing ingredients like peroxyacetic acid, sodium hypochlorite (bleach), or quaternary ammonium compounds. <input type="checkbox"/> Operate ventilation systems properly and/or increase circulation of outdoor air as much as possible by opening windows and doors, using fans, and through other methods. Consider running 	

OHA/ODE Requirements	Hybrid/Onsite Plan
<p>ventilation systems continuously and changing the filters more frequently. Do <u>not</u> use fans if they pose a safety or health risk, such as increasing exposure to pollen/allergies or exacerbating asthma symptoms. For example, do not use fans if doors and windows are closed and the fans are recirculating the classroom air.</p> <ul style="list-style-type: none"> <input type="checkbox"/> Consider the need for increased ventilation in areas where students with special health care needs receive medication or treatments. <input type="checkbox"/> Facilities should be cleaned and disinfected at least daily to prevent transmission of the virus from surfaces (see CDC's guidance on disinfecting public spaces). <input type="checkbox"/> Air circulation and filtration are helpful factors in reducing airborne viruses. Consider modification or enhancement of building ventilation where feasible (see CDC's guidance on ventilation and filtration and American Society of Heating, Refrigerating, and Air-Conditioning Engineers' guidance). 	

2k. HEALTH SERVICES

OHA/ODE Requirements	Hybrid/Onsite Plan
<ul style="list-style-type: none"> <input type="checkbox"/> OAR 581-022-2220 Health Services, requires districts to “maintain a prevention-oriented health services program for all students” including space to isolate sick students and services for students with special health care needs. While OAR 581-022-2220 does not apply to private schools, private schools must provide a space to isolate sick students and provide services for students with special health care needs. <input type="checkbox"/> Licensed, experienced health staff should be included on teams to determine district health service priorities. Collaborate with health professionals such as school nurses; SBHC staff; mental and behavioral health providers; physical, occupational, speech, and respiratory therapists; and School Based Health Centers (SBHC). 	

2l. BOARDING SCHOOLS AND RESIDENTIAL PROGRAMS ONLY

OHA/ODE Requirements	Hybrid/Onsite Plan
<ul style="list-style-type: none"> <input type="checkbox"/> Provide specific plan details and adjustments in Operational Blueprints that address staff and student safety, which includes how you will approach: <ul style="list-style-type: none"> • Contact tracing • The intersection of cohort designs in residential settings (by wing or common restrooms) with cohort designs in the instructional settings. The same cohorting parameter limiting total cohort size to 100 people applies. • Quarantine of exposed staff or students • Isolation of infected staff or students • Communication and designation of where the “household” or “family unit” applies to your residents and staff <input type="checkbox"/> Review and take into consideration CDC guidance for shared or congregate housing: <ul style="list-style-type: none"> • Not allow more than two students to share a residential dorm room unless alternative housing arrangements are impossible • Ensure at least 64 square feet of room space per resident • Reduce overall residential density to ensure sufficient space for the isolation of sick or potentially infected individuals, as necessary; • Configure common spaces to maximize physical distancing; • Provide enhanced cleaning; 	

OHA/ODE Requirements	Hybrid/Onsite Plan
<ul style="list-style-type: none"> Establish plans for the containment and isolation of on-campus cases, including consideration of PPE, food delivery, and bathroom needs. 	



3. Response to Outbreak

3a. PREVENTION AND PLANNING

OHA/ODE Requirements	Hybrid/Onsite Plan
<ul style="list-style-type: none"> <input type="checkbox"/> Coordinate with Local Public Health Authority (LPHA) to establish communication channels related to current transmission level. <input type="checkbox"/> Establish a specific emergency response framework with key stakeholders. <input type="checkbox"/> When new cases are identified in the school setting, and the incidence is low, the LPHA will provide a direct report to the district nurse, or designated staff, on the diagnosed case(s). Likewise, the LPHA will impose restrictions on contacts. 	

3b. RESPONSE

OHA/ODE Requirements	Hybrid/Onsite Plan
<ul style="list-style-type: none"> <input type="checkbox"/> Follow the district's or school's outbreak response protocol. Coordinate with the LPHA for any outbreak response. <input type="checkbox"/> If anyone who has been on campus is known to have been diagnosed with COVID-19, report the case to and consult with the LPHA regarding cleaning and possible classroom or program closure. <ul style="list-style-type: none"> Determination if exposures have occurred Cleaning and disinfection guidance Possible classroom or program closure <input type="checkbox"/> Report to the LPHA any cluster of illness (2 or more people with similar illness) among staff or students. <input type="checkbox"/> When cases are identified in the local region, a response team should be assembled within the district and responsibilities assigned within the district. <input type="checkbox"/> Modify, postpone, or cancel large school events as coordinated with the LPHA. <input type="checkbox"/> If the school is closed, implement Short-Term Distance Learning or Comprehensive Distance Learning models for all staff/students. <input type="checkbox"/> Continue to provide meals for students. <input type="checkbox"/> Communicate criteria that must be met in order for On-Site instruction to resume and relevant timelines with families. 	

3c. RECOVERY AND REENTRY

OHA/ODE Requirements	Hybrid/Onsite Plan
<ul style="list-style-type: none"> <input type="checkbox"/> Plan instructional models that support all learners in Comprehensive Distance Learning. <input type="checkbox"/> Clean, sanitize, and disinfect surfaces (e.g., playground equipment, door handles, sink handles, drinking fountains, transport vehicles) and follow CDC guidance for classrooms, cafeteria settings, restrooms, and playgrounds. <input type="checkbox"/> Communicate with families about options and efforts to support returning to On-Site instruction. <input type="checkbox"/> Follow the LPHA guidance to begin bringing students back into On-Site instruction. <ul style="list-style-type: none"> Consider smaller groups, cohorts, and rotating schedules to allow for a safe return to schools. 	



ASSURANCES

*This section must be completed by any public school that is providing instruction through On-Site or Hybrid Instructional Models.
Schools providing Comprehensive Distance Learning Instructional Models do not need to complete this section.
This section does not apply to private schools.*

- We affirm that our school plan has met the requirements from ODE guidance for sections 4, 5, 6, 7, and 8 of the **Ready Schools, Safe Learners** guidance.
- We affirm that we cannot meet all of the ODE requirements for sections 4, 5, 6, 7 and/or 8 of the **Ready Schools, Safe Learners** guidance at this time. We will continue to work towards meeting them and have noted and addressed which requirement(s) we are unable to meet in the table titled "Assurance Compliance and Timeline" below.



4. Equity



5. Instruction



6. Family, Community, Engagement



7. Mental, Social, and Emotional Health



8. Staffing and Personnel

Assurance Compliance and Timeline

If a district/school cannot meet the requirements from the sections above, provide a plan and timeline to meet the requirement.

List Requirement(s) Not Met	Provide a Plan and Timeline to Meet Requirements <i>Include how/why the school is currently unable to meet them</i>

NESTUCCA VALLEY SCHOOL DISTRICT
SURPLUS GOODS
AUGUST 2020

5.3

2 White Fridge (freezer on top)

4 cycle weed eater

double sink and faucet

2 large school buses- each 20 years old

1990's Nissan pick up- failing transmission

1



NESTUCCA VALLEY SCHOOL DISTRICT
P.O. Box 99, Cloverdale, Or. 97112 503-392-4892 FAX- 503-392-9061
Inspiring individual excellence, instilling diligence, and initiating life-long learning

6.1

Misty Wharton
Superintendent
Kim Seals
Financial Services Liaison
Ursula McVittie
Human Resources Specialist

**NESTUCCA VALLEY SCHOOL DISTRICT
AUGUST 10, 2020
REGULARLY SCHEDULED BOARD MEETING**

BOND-The K-8 project and high school gym seismic retrofit, are both ahead of schedule and on budget. Major milestones at the K-8 facility include: window installation, all flooring has been removed from existing building, electrical rough in and VRF systems installation is ongoing, playground layout has been graded in, the covered front entry footings have been poured, the gym middle school wing and district office have been dried in, the switch gear has been placed and PUD has established the new permanent power supply. Upcoming milestones- drain field installation will begin on August 17, the two modular buildings on the north end of campus will be removed on August 31, the existing building will be receiving new flooring, plumbing, fixtures, lights, ceiling and painting in the next few months.

FALL 2020- On July 29, 2020 the district announced that the first nine weeks of the 2020-2021 school year will be administered via comprehensive distance learning as outlined by the Oregon Department of Education guidance "Ready Schools Safe Learners". We will convene as an administrative team, weekly, to consider the current infection rate in our county and adhere to state and federal policy concerning operating in person instruction.

INTERNET ACCESSIBILITY- The district is working with all Tillamook county school districts, the county commissioners and state and federal agencies to increase internet infrastructure, accessibility and affordability for our students and families. We will develop a scholarship program for families, who are experiencing a hardship in paying for internet service monthly and work with families to get them connected to an internet provider so that our students can fully engage in our distance learning model.

COMPREHENSIVE DISTANCE LEARNING-We are working on establishing multiple professional development days for our staff to learn our new platforms for distance learning. We will be using a model that many school in the Northwest Regional Education Service Districts will be using, CANVAS and Acellus. As a district we will also access Zoom to video conference with our students and supplementing the curriculum with Seesaw, Google Classroom and our adopted core curriculums.

I came back into the office on August 3, 2020. During the course of Comprehensive Distance Learning (“CDL”) my office will be at the High School in room 219. I am excited for the coming school year despite it being unlike anything we are used to.

I have jumped into the process of planning and preparing for the new school year along with Misty, Ken and Megan. I have been working on a schedule for the elementary, making sure we have space for our staff and cleaning and sanitation procedures. This is a process with a lot of details and to work out and it is comforting to be working with the team I do who can handle the work.

The amount of work that has been accomplished on the district campuses this summer are impressive and Logan, Bill, Tevin and his crew (Mitch, Skylar, Cody and Cooper) deserve recognition for their work. Those of you who are physically present at the meeting will have seen an example of their work in the stripping of the parking lot and repainting the curbs.

Since returning I have engaged in a number of conversations and meetings with staff members. Everyone I have spoken to is excited to start the new school year.

Chad C. Holloway
Principal
Nestucca Valley Elementary School

NOTES FROM NESTUCCA JUNIOR SENIOR HIGH SCHOOL

August 10, 2020

Upcoming Activities:

- Talking to teachers and staff, I am confident that they are all going to rise to the occasion for distance learning. Since they know what the learning model is ahead of time, and are going to have time to plan, they are excited about possibilities on how to help students this coming year. It's not how they would like to start the year, but I am certain that they will do the best that they possibly can.
- Online registration will open August 17th.

Recent Activities:

- The seismic retrofit is going well; it is exciting to see the progress.

Transportation:

- Our new van will be delivered mid-October
- We are on track with our required annuals on existing buses, and have been able to take care of some minor issues that we didn't even know needed to be addressed.
- Two new 84-passenger buses are still scheduled to be delivered at the end of August.