Communicable Disease Management Plan Philomath School District 17J



Regulations:

Oregon laws outline responsibilities for communicable disease control in a school setting.

- ORS 333-019-0010
- OAR 581-022-2220

School District policy outlines action plan for communicable disease control in a school setting.

- GBEB Communicable Diseases Staff
- GBEB-AR Communicable Diseases Staff
- JHCC Communicable Diseases Students
- JHCC-AR Communicable Diseases Students

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 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).

Seasonal Flu v	s. Pandemic Flu
Influenza is one of the world's grea	atest infectious disease challenges.
But did you know that seasonal flu	and pandemic flu are not the same?
What is Seasonal Flu?	What is Pandemic Flu?
Influenza (flu) is a contagious respiratory illness	A flu pandemic is a global outbreak of a new flu A virus
caused by flu A and B viruses that infect the human	in people is very different from current and recently
respiratory tract. Annual flu epidemics occur among	circulating seasonal flu A viruses.
people worldwide.	
How often do seasonal flu epidemics occur?	How often do flu pandemics occur?
Epidemics of seasonal flu happen every year. Fall and	Flu pandemics happen rarely. Four flu pandemics
winter is the time for flu in the United States.	have happened in the past 100 years.
How do seasonal flu viruses spread?	How do pandemic flu viruses spread?
Flu viruses are thought to spread mainly from person	Pandemic flu viruses spread in the same way as
to person through droplets made when someone with	seasonal flu, but a pandemic virus will likely infect
flu coughs, sneezes, or talks near a person (within 6	more people because few people have immunity to
feet).	the pandemic flu virus.
Is there a vaccine for seasonal flu?	Is there a vaccine for pandemic flu?
Seasonal flu vaccines are made each year to vaccinate	Although the U.S. government maintains a limited
people against seasonal flu. Everyone six months and	stockpile of some pre-pandemic flu vaccines, vaccine
older should get a flu vaccine every year. For most	may not be widely available in the early stages of a
people, only one dose of vaccine is needed.	pandemic. Two doses of a pandemic flu vaccine will
	likely be needed.
Are there medications to treat seasonal flu?	Are there medications to treat pandemic
Prescription medications called antiviral drugs can	flu?
treat seasonal flu. During a severe flu season, there	Flu antiviral medications may be used to treat
can be spot shortages of these drugs.	pandemic flu if the virus is susceptible to these drugs.
	While a limited amount of flu antiviral drugs are
	stockpiled for use during a pandemic, supplies might
	not be enough to meet demand during a pandemic.
Who is at risk for complications from	Who is at risk for complications from
seasonal flu?	pandemic flu?
Young children, people 65 years and older, pregnant	Because this is a new virus not previously circulating in
women, and people with certain long-term medical	humans, it's not possible to predict who would be
conditions are more likely to have serious flu	most at risk of severe complications in a future
complications.	pandemic. In some past pandemics, healthy young
	adults were at high risk for developing severe flu
	complications.

Centers for Disease Control and Prevention. May 7, 2019.

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).

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 four hours fever free, without using 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 guide to create a framework for 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 lending 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
•	Routine hand	Routine illness	 Routine sanitizing 	 Routine seasonal
	hygiene	exclusion		illness prevention
•	Respiratory etiquette	(Appendix A)		and exclusion
•	Stay home when ill			communication.

NPI = Non-Pharmaceutical Intervention

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 Benton County, the Local Health Department (LHD) will provide school-centered communication, in collaboration with PSD Nurse, and will potentially host conference calls.

Personal NPI's	Community NPI's	Environmental NPI's	Communication
 Increase routine hand hygiene. Use alcohol-based hand sanitizer when hand washing is not an option. Cover coughs/ sneezes, throw away tissues at each use, wash hands. Stay home when ill for at least 72 hours after fever free w/o use of fever-reducing medication. 	 Identify baseline absentee rates to determine if rates have increased by 20% or more. Increase communication and education on respiratory etiquette and hand hygiene. Teachers provide age-appropriate education. Communicable disease surveillance to monitor/ report illness. Increase space between students in classroom. Instruct students in smaller cohorts, as feasible. 	 Increase sanitizing of flat and shared surfaces. Devise prevention and post-exposure sanitizing strategies based on current recommendations. Isolate students who become ill at school until parents can pick up. Discourage the use of shared items/ utensils in the classroom. 	 Provide communications to families based on the current situation, general information, and public health guidance. Provide communication to staff of the current situation. Provide communication to immune- compromised student families to defer to personal providers in regards to attendance.

Level One Actions: Prevention Focused – Virus Detected in Region

Note: For school year 2020-2021, actions will also comply with guidance from ODE, OHA, and the State of Oregon.

Level Two Actions: Intervention Focused (includes Level 1 Actions)

Personal	NPI's	Community NPI's	En	vironmental NPI's		Communication
	ecific ed to allow tudents to if n their	Refer to public health-specific guidance. Increase space between people at school as much as possible (at least 3'). Temporarily dismiss students attending childcare facilities and K-12 schools. (Staff report to work; students do not come to school).	•	Refer to public health-specific guidance. Modify, postpone, or cancel large school events, as coordinated with local health department (LHD).	•	Work with LHD to establish timely communication with staff and families. Provide communication to staff about the use of sick time and a reminder to stay home when sick. Advise parents to report actual symptoms when calling students in sick as part of communicable disease surveillance.

(When cases identified in communities).

Note: For school year 2020-2021, actions will also comply with guidance from ODE, OHA, and the State of Oregon.

Level Three Actions: Response Focused (includes Level 1 and 2 Actions)

(When cases identified in schools).

Personal NPI's	Community NPI's	Environmental NPI's	Communication
• Follow public health direction.	 Follow exclusion guidance designated by the local Public Health authority, which may include student dismissal. 	 Follow local Public Health direction on environmental cleaning, which may include school closure and canceling major events. 	 Coordinate communication with the local Public Health authority. Identify potentially immediately- impacted student populations.

Note: For school year 2020-2021, actions will also comply with guidance from ODE, OHA, and the State of Oregon.

Level Four Actions: Post Event

Personal NPI's	Community NPI's	Environmental NPI's	Communication
 Routine hand hygiene and respiratory etiquette when local Public Health authority deems process may return to baseline. Stay home when ill and until 72 hours fever free w/o use of fever-reducing medications. 	 Routine illness exclusion when local Public Health authority deems processes may return to baseline. 	 Routine sanitizing when local Public Health authority deems processes may return to baseline. 	 Routine seasonal illness prevention and exclusion communication. Participate in post- event evaluation to determine what worked/ did not work in response. Determine plans needed to make up lost academic time.

Note: For school year 2020-2021, actions will also comply with guidance from ODE, OHA, and the State of Oregon.

Special Considerations:

• Employee Sick Leave:

Philomath School District administration should work together to determine the need to temporarily revise or flex sick leave to accommodate any public health guidance in regards to lost work, such as maximum incubation period exclusion (usually 10-14 days). Prolonged exclusion may occur with individuals who are contacts to identified cases, who are immune-compromised, or who are identified as potential cases.

• School Closures:

If school closure is advised by the local Public Health Department, consultation should occur between legal, union, and district administration to ensure processes are uniformly understood, agreed to, and administered.

• Immuno-Compromised Students:

Students with immune-compromising health conditions and treatments may require exclusion from school outside of public health guidance. These students should provide documentation from their personal health provider.

Recommendations/ Considerations Plan Component Required Protocol to notify the local Public Health • Contact Tina Hoch, PSD District Nurse. If anyone who has entered the school ٠ is diagnosed with COVID-19, contact authority of: (541-740-0245) 1. Any confirmed COVID 19-cases among Tina Hoch, PSD District Nurse. • Nurse Tina will: students or staff. Contact I PHA: Nurse Tina will: • Benton County (541-766-6835) 2. Any cluster illnesses among students Contact LPHA: Polk County (503-623-8175-Benton County (541-766-6835) or staff (2 or more). KVCS Only) Polk County (503-623-8175-• Contact Office of the Superintendent KVCS Only) (541-929-3169) • Contact Office of the Superintendent • Information to be provided to parents (541 - 929 - 3169)regarding need to notify the school immediately upon identification of COVID-19 in a student. Protocol for screening students and staff • Daily Contact Tracing logs will be Screening protocol must recognize • upon entry to school each day. maintained for each school. that students and staff who have • Data collected at entry screen will conditions that cause chronic symptoms (e.g., asthma, allergies, include the following: Student Name etc.) should not be automatically Arrival Time to School excluded from school. • Parent/Guardian Contact Cough is an exception: Staff or • • Interactions Beyond Cohort students with a chronic or baseline • Symptoms and/or Exposures Noted cough that has worsened or is not • Designated staff will screen for well-controlled with medication primary symptoms of concern. should be excluded from school. Do Cough not exclude staff or students who • Fever or Chills have other symptoms that are chronic Shortness of Breath or Difficulty Breathing or baseline symptoms (e.g., asthma, • Any student or staff with any of the allergies, etc.) from school. above symptoms will be sent home or isolated until able to go home.

Communicable Disease Management Plan: COVID-19 Specific

Plan Component	Required	Recommendations/ Considerations
Protocol for screening students and staff upon entry to school each day. (Continued)	 COVID-19 symptoms may also include the following, however these are less specific and not recommended as sole criteria for exclusion from school: New loss of taste or smell Headache Muscle or body aches Nausea Fatigue Congestion/ Runny Nose Note: Diarrhea and vomiting are allowable conditions for restriction from school, independent of COVID-19. 	
Communication protocol for COVID-19 cases.	 Contact Tina Hoch, PSD District Nurse. (541-740-0245) Nurse Tina will: Contact LPHA: Benton County (541-766-6835) Polk County (503-623-8175- KVCS Only) Contact Office of the Superintendent (541-929-3169) District administrative team will be responsible for communication with parents, families, and staff. 	 Parents of all students who were exposed to a person diagnosed with COVID-19, and all exposed adults, should be notified within 24 hours and advised to quarantine at home for 14 days following exposure and to seek testing should symptoms develop, or as directed by public health. Consult with LPHA officials on what constitutes "exposure".

Plan Component	Required	Recommendations/ Considerations
Daily logs for each stable group or each individual student to support contact tracing of cases if necessary.	 Daily Contact Tracing logs will be maintained for each school. Data will include the following: Student Name Arrival & Dismissal Time to/from School Parent/Guardian Contact Interactions Beyond Cohort Symptoms and/or Exposures Noted At the end of each day, logs will be turned in to school office. Office staff will forward data to PSD District Nurse. Logs will be maintained for a minimum of four weeks after completion of the term. Staff training will be provided related to importance of and requirement for 	
Record of anyone entering the facility.	 daily logs. Office staff in each school will be responsible for maintaining a daily log of visitors outside existing cohorts. District Office staff will be responsible for maintaining a daily log of visitors outside the existing office cohort. Daily log will consist of the following: Name Contact Information Date of Visit Time of Entry and Exit 	

Plan Component	Required	Recommendations/ Considerations
Protocol to restrict any potentially sick persons from physical contact with others. (Isolation Measures)	 An adequate supply of face coverings are available in the office of each school. Each school will have a designated space to isolate students or staff who develop COVID-19 symptoms. Isolate students or staff members who report or develop symptoms, with staff supervision and symptom monitoring, until they are able to go home. (Monitoring to be completed by PSD District Nurse or designee). While waiting to go home, people displaying symptoms should wear a face covering, as should supervising staff. If people are nauseous, struggling to breathe, or in distress, they should not wear any face covering. A different, dedicated space will be available at each school for students to receive non-COVID-19 health services. Query all staff and families regarding recent travel out-of-state. If so, quarantine at home for at least ten (10) days. 	 Anyone developing cough, fever, chills, shortness of breath, difficulty breathing, or sore throat while at school must be: Immediately provided a face covering to wear; Immediately isolated from others; and Sent home as soon as possible. Anyone with these symptoms must remain home for at least ten (10) days after illness onset and 24 hours after fever is gone, without use of fever-reducing medicine, and other symptoms are improving. Alternatively, an individual may return to school after receiving two (2) negative COVID-19 molecular tests (PCR) at least 24 hours apart. Involve PSD School Nurse in the development of protocols and assessment of symptoms.

Plan Component	Required	Recommendations/ Considerations
 Environmental Management: Ensure 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. Hand washing is required before every meal and following restroom usage. 	 Staff members will have documented plans for ensuring student and staff: Hand hygiene upon entry to school; Hand washing prior to meals; and Hand washing following restroom use. 	
Environmental Management: Appropriate cleaning and contingency plans for routine infection prevention, and for closing cohort, schools, or districts based on identified COVID-19 cases and in compliance with public health and CDC guidelines.	 Protocols will be provided for: Cleaning and disinfection for routine infection prevention; Cleaning and classroom closure in case of a COVID-19 case in a cohort; and Cleaning following school-wide exposure. Specific location for supplies and materials will be designated in each school. Maintenance Director and School Custodial staff will be responsible. 	 Routine cleaning and disinfecting will follow current CDC Guidelines for Cleaning and Disinfecting. Cleaning classrooms between groups; Cleaning playground equipment between groups; Cleaning restrooms; Etc

Plan Component	Required	Recommendations/ Considerations
Physical Distancing and Protection: Maintain six feet of physical distance between people.	 A minimum of 35 square feet per person is available in classrooms, cafeteria, gyms, and other building locations. Any breach to required distance will be mitigated through additional protections. Protocol for minimizing interactions between cohorts and minimizing changes in stable cohorts while balancing educational needs for individual curricula. 	 Ensure that school schedules address physical distancing requirements. Establish clear and stable cohorts of students. Restrict interaction between student cohorts.
Physical Distancing and Protection: Face coverings for staff and students.	 Each school will provide regular communication to staff, parents, families, and students on appropriate use of face coverings. Communication templates currently in development. All communications must include information about exclusionary situations when a mask or face covering should not be worn. Face coverings must never be worn by children when sleeping. 	 Masks will be available for staff, students, and guests entering each school. At this time, all students and staff in K-12 public facility must wear a face covering. If face coverings are to be work, they should be washed daily.

Appendix A Symptom Recognition

COLD, INFLU		14	,
Symptoms	COVID-19	Influenza (Flu)	Cold
Dry cough	୦୦୦	୦୦୦	Θ
Fever	000	000	-
Stuffy nose	•	00	୦୦୦
Sore throat	00	00	୦୦୦
Shortness of breath	00		
Headache	00	000	-
Body aches	00	000	୦୦୦
Sneezing			୦୦୦
Exhaustion	00	000	00
Diarrhea	-	00	

Appendix **B**

Stay-At-Home Guidance

School and Illness: Should Your Child Stay Home?

The following guidelines will help you decide whether your child is too ill to go to school.

Your child is too ill to go to school if he or she has any of these signs:

- Seems very tired and needs bed rest (this is common with flu symptoms)
- Has vomiting or diarrhea (Do NOT send until student is FREE OF symptoms for 24 hours without the use of medicine)
- Becomes short of breath or is wheezing
- Has a cough that disrupts normal activity
- Has distracting pain from earache, headache, sore throat or recent injury
- Has yellow or green drainage from eye(s)
- Break out in a rash; not all rashes require that a child stay home from school. Check with your child's doctor. Impetigo would require staying home until treated with an antibiotic for 24 hours.
- Live lice visible in hair. Treat the student for live lice. Student may return the day after treatment.

Fever: Your child should not go to school if they have a temperature at or above 100.0* F. Student may return to school after they are feeling better (a temp. below 100.0*F without a fever reducer in their system).

Contagious Disease: Your child should stay home from school if he/she has a contagious disease. A contagious disease is one that can be spread by close contact with a person or object. Examples are chickenpox, flu, vomiting, diarrhea, colds, strep throat and "pinkeye." A disease may be contagious before the child shows signs of illness. It is very hard to prevent the spread of some germs, especially in a school classroom. Good hand washing will help prevent the spread of germs in most settings.

If your child has chickenpox or strep throat, please ask your doctor when he/she may return to school. In general, children who have active chickenpox should not return to school until all the lesions are dried and crusted. Children with strep throat should be on antibiotics for 24 hours and feeling well enough to concentrate.

During cold and flu season, **please** pay extra attention to signs and symptoms. We want all individuals to stay as healthy as possible! **Good hand washing is incredibly important! Please wash hands often.**

We know it may be hard to get a doctor's appointment right away. Here are some helpful tips when caring for your child while at home:

- Have them drink plenty of liquid
- Keep the sick child/children isolated as much as possible
- Keep them as comfortable and resting as much as possible
- Use over the counter medication when necessary
- Make sure the sick child/children and caregiver are washing their hands frequently

Respectfully, Tina Hoch, RN Philomath School District Nurse 541-740-0245

Appendix C Staff Training Sign-Off

Training Protocols	Person(s) Responsible
Personal Protective Equipment	PSD Maintenance and School Custodians
Healthy Hygiene Practices	PSD Nurse and School Administrators
Physical Distancing	School Administrators and Custodians
Cleaning and Sanitizing Protocols	PSD Maintenance and School Custodians
Entry Screening	PSD Nurse and School Administrators
In-Person Contact	District and School Administrators
Contact Tracing	PSD Nurse and School Administrators
Exclusions	PSD Nurse
In-Person Reporting	PSD Nurse and School Administrators

I have read and understand the Philomath School District Communicable Disease Management Plan and related materials and have received the necessary instruction to follow the plan.

Employee Name:	
Employee Signature:	Date:
Supervisor Signature:	Date: