



OPERATIONAL BLUEPRINT FOR SCHOOL REENTRY 2020-21

Updated 3/15/2021

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. It is required that a revised Operational Blueprint be completed and updated when there is a change of Instructional Model.

1. Please fill out the following information for your school, district or program:

Information Needed	Your Response
Name of School, District or Program	Aloha-Huber Park, Beaverton School District
Key Contact Person for this Plan	Alfonso Giardiello
Phone Number of this Person	503-356-2000
Email Address of this person	alfonso_giardiello@beaverton.k12.or.us
Sectors and Position Titles of Those Who Informed the Plan	Teaching and Learning: Administrator for Curriculum, Instruction, and Assessment; Executive Administrator for Student Services; district and school nurses Operations: Administrator for Nutrition Services, Administrator for Transportation, Chief Facilities Officer
Local Public Health Office(s) or Officer(s)	Washington County Public Health
Name of Person Designated to Establish, Implement and Enforce Physical Distancing Requirements	Alfonso Giardiello
Intended Effective Date for This Plan	April 5, 2021
Educational Service District Region	Northwest Regional ESD

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.

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.

The district was able to (and continues to) engage with our community throughout the COVID-19 pandemic. We have used frequent surveys to judge family interest and apprehension to Returning to In-Person planning. As is true with all of our communications, these surveys were translated into multiple languages. In addition, our Multilingual Department hosted numerous information sessions that were hosted in languages other than English. The MLD also ensured that each family received a personalized contact to ensure that they had the opportunity to complete district surveys in their preferred language.

The district also hosted question and answer sessions for each of our levels, elementary, middle, and high school. Families were able to ask questions to district leaders, including administrative leads for COVID-10 response planning, the full Superintendent's Cabinet, and building leaders. The community participants were chosen to ensure that the panel was representative of our district. We allowed for 60% of the participants to be chosen at random while selecting 40% from our global majority population.

3. Place an X next to the Instructional Model to be used
 - a. On-Site Learning
 - b. Hybrid Learning X
 - c. Comprehensive Distance Learning
4. If you selected Comprehensive Distance Learning, you only have to enter information for the three parts under the heading Requirements for Comprehensive Distance Learning Operational Blueprint.
5. If you selected On-Site Learning or Hybrid Learning, you have to enter information for all sections under the heading Essential Requirements for Hybrid/On-Site Operational Blueprint and [submit online](#), including updating when you are changing the Instructional Model.

* 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. For Private Schools, completing this section is optional (not required). Schools providing On-Site or Hybrid Instructional Models do not need to complete this section.

1. Describe why you are selecting Comprehensive Distance Learning as the school's Instructional Model for the effective dates of this plan.
Type your response here (take as much space as you need):

2. In completing this portion of the Blueprint you are attesting that you have reviewed the [Comprehensive Distance Learning Guidance](#). Please name any requirements you need ODE to review for any possible flexibility or waiver.
Type your response here (take as much space as you need):

3. 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.
Type your response here (take as much space as you need):

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

ESSENTIAL REQUIREMENTS FOR HYBRID OR 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 unless the school is implementing the Limited In-Person Instruction provision under the Comprehensive Distance Learning guidance.

Requirements of each section of the guidance are listed under their corresponding heading in the RSSL document. After each set of requirements, there is a prompt where you must enter the details of your On-Site or Hybrid plan that corresponds to that section.

Advisory Health Metrics for Returning to In-Person Instruction (Section 0 of the RSSL Guidance)

Requirements for 0a. RETURNING TO IN-PERSON INSTRUCTION

- Not later than the week of March 29, 2021 all public elementary schools must operate in either an On-Site or Hybrid Instructional Model when they meet the specified county health metrics in the chart on page 15 (green and yellow rows in the chart in Section 0b).
 - A general allowance will be provided if the school has communicated a plan to families and staff with a start date on or before the week of April 5, 2021 and is using the week of March 29, 2021 to train staff for a return to in-person instruction.
 - A general allowance will be provided if the school has a published calendar that shows they are not in session the week of March 29, 2021 and has communicated a plan to families and staff with a start date on or before the week of April 12, 2021 and is using the week of April 5, 2021 to train staff for a return to in-person instruction.

- A general allowance will be provided if the school is closed to in-person instruction due to a decision made in partnership with a local public health authority or the Oregon Health Authority to move to Comprehensive Distance Learning to address active transmission within a school.
 - Any school not meeting this requirement will be reviewed and may result in loss of eligibility to receive state school funds or other enforcement as prescribed by Governor Brown's [Executive Order 21-06](#).
- Not later than the week of April 19, 2021 all public middle and high schools must operate in either an On-Site or Hybrid Instructional Model when they meet the specified county health metrics in the chart on page 15 (green row in the chart in Section 0b).
 - A general allowance will be provided if the school has communicated a plan to families and staff with a start date on or before the week of April 26, 2021 and is using the week of April 19, 2021 to train staff for a return to in-person instruction.
 - A general allowance will be provided if the school has a published calendar that shows they are not in session the week of April 19, 2021 and has communicated a plan to families and staff with a start date on or before the week of May 3, 2021 and is using the week of April 26, 2021 to train staff for a return to in-person instruction.
 - A general allowance will be provided if the school is closed to in-person instruction due to a decision made in partnership with a local public health authority or the Oregon Health Authority to move to Comprehensive Distance Learning to address active transmission within a school.
 - Any school not meeting this requirement will be reviewed and may result in loss of eligibility to receive state school funds or other enforcement as prescribed by Governor Brown's [Executive Order 21-06](#).
- The requirement to offer On-Site or Hybrid Instructional Models does not apply to virtual charter schools as defined in ORS 338.005 or a public school that has a permanent instructional model that is predominantly through online courses.
 - Public schools may transition a portion or all of the school to Comprehensive Distance Learning when responding in partnership with a local public health authority or the Oregon Health Authority to control active transmission of COVID-19 in the school setting.
 - Public schools may transition a portion or all of the school to Comprehensive Distance Learning when they are operating in a county whose metrics place it in the operational status represented by the red row in the chart in section 0b. Public middle and high schools may transition a portion or all of the school to Comprehensive Distance Learning when they are operating in a county whose metrics place it in the operational status represented by the red or yellow row in the chart in section 0b. When county trends are increasing, pause expansion of additional in-person learning and maintain access to current in-person learning for schools that have it in place. Schools are not

advised to reduce in-person instruction or revert to Comprehensive Distance Learning based on county metrics if the school can demonstrate the ability to limit transmission in the school environment.

- If your public or private school is operating an On-Site or Hybrid Instructional Model, but is located in a county that does not meet the advisory metrics; that is, an elementary school in a county that is not in the On-Site or Hybrid (green) row or the Elementary On-Site or Hybrid (yellow) row or a middle or high school in a county that is not in the On-Site or Hybrid (green) row (Section 0b); the school must offer access to on-site testing for symptomatic students and staff identified on campus as well as those with known exposures to individuals with COVID. This resource is available to all schools in Oregon. [See guidance from the Oregon Health Authority.](#)
 - Schools required to offer access to this program will have two-weeks to be registered, trained, and administering the program when, or if, metrics change in their county in a way that makes this program a requirement.
 - The metrics found in the 0b Section of RSSL are what determines if a school is required to offer the program.
 - The school testing program offers an additional risk-mitigation strategy that is relatively low-burden and can help offset impacts of operating when community spread is higher even if school transmission is low/absent and RSSL protocols are firmly in place. This requirement applies anytime a school is operating in an Instructional Model that is not aligned with the county metrics case data. This is true whether your school began operating in August/September, or took a pause, or opened on January 4, or is just opening for the first time.
 - The testing program is for students in grades kindergarten and up and school staff. The program does not include early learning programs.
 - Registering for the testing program includes a self-attestation that the program will be offered. Please accept the responsibility to offer the program when you register.
- If your school is operating an On-Site or Hybrid Instructional Model, but is located in a county that does not meet the advisory metrics (Section 0b), the school must provide a Comprehensive Distance Learning Instructional Model option for students and families that choose to remain off-site. For schools and districts that are required to comply with all sections (0-8) and supplements to this guidance, the remote option must comply with the requirements of the Comprehensive Distance Learning Instructional Model. The school or district may determine the most beneficial way to staff this option, through partnership with other schools or ESDs or with staff who may be at more risk from COVID-19 or through other means.
- All public and private schools are required to keep their Operational Blueprint up-to-date on [ODE's website](#) and to submit weekly "[Status Reports](#)" that provide essential information regarding how many students are served in person in the implementation of this metrics framework.

Plan Details for 0a.

Please state which operational model describes your school and then detail how your plan meets that requirement:

All district staff at the elementary level will participate in Staff Development, training and site preparation during the week of March 29, 2021. All district elementary students will have the opportunity to begin their hybrid experience during the week of April 5, 2021.

All district Secondary students will have an opportunity to begin their hybrid experience during the week of April 19, 2021.

Public Health Protocols (Section 1 of the RSSL Guidance)

Requirements for 1a. COMMUNICABLE DISEASE MANAGEMENT PLAN FOR COVID-19

- Conduct a risk assessment as required by OSHA administrative rule [OAR 437-001-0744\(3\)\(g\)](#).
 - OSHA has developed a [risk assessment template](#).
- Implement measures to limit the spread of COVID-19 within the school setting, including when the school setting is outside a building
- Update written Communicable Disease Management Plan to specifically address the prevention of the spread of COVID-19. Examples are located in the [Oregon School Nurses Association \(OSNA\) COVID-19 Toolkit](#).
 - Review OSHA requirements for infection control plan to ensure that all required elements are covered by your communicable disease management plan, including making the plan available to employees at their workplace. Requirements are listed in OSHA administrative rule [OAR 437-001-0744\(3\)\(h\)](#).
 - OSHA has developed a sample [infection control plan](#).
- Designate a single point-person at each school to establish, implement, support and enforce all RSSL health and safety protocols, including face coverings and physical distancing requirements, consistent with this guidance and other guidance from OHA. This role should be known to all staff in the building with consistent ways for licensed and classified staff to access and voice concerns or needs.
- Create a simple process that allows for named and anonymous sharing of concerns that can be reviewed on a daily and weekly basis by the designated RSSL building point-person. Example: Anonymous survey form or suggestion box where at least weekly submissions and resolutions are shared in some format.
- 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.

- Process and procedures established to train all staff in sections 1 - 3 of this guidance. Consider conducting the training virtually, or, if in-person, ensure physical distancing is maintained to the maximum extent possible.
- Protocol to notify the local public health authority ([LPHA Directory by County](#)) of any confirmed COVID-19 cases among students or staff.
- Plans for systematic disinfection of classrooms, common areas, offices, table surfaces, bathrooms and activity areas.
- Process to report to the LPHA any cluster of any illness among staff or students.
- Protocol to cooperate with the LPHA recommendations.
- Provide all logs and information to the LPHA in a timely manner.
- Protocol for screening students and staff for symptoms (see section 1f).
- Protocol to isolate any ill or exposed persons from physical contact with others.
- Protocol for communicating potential COVID-19 cases to the school community and other stakeholders (see section 1e).
- 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](#).
 - 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), 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.
- Required components of individual daily student/cohort logs include:
 - 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
- Protocol to record/keep daily logs to be used for contact tracing for a minimum of four weeks to assist the LPHA as needed.
 - See supplemental guidance on LPHA/school partnering on [contact tracing](#).
 - Refer to [OHA Policy on Sharing COVID-19 Information](#)
- 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.
- 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.
- Designate a staff member and process to ensure that the school provides updated information regarding current instructional models and student counts and reports these data in [ODE's COVID-19 Weekly School Status](#) system.
- Protocol to respond to potential outbreaks (see section 3).

Plan Details for 1a.

The questions in the risk assessment form were reviewed and they are addressed in this operational blueprint.

The district's communicable disease plan for COVID-19 is available to all students, families, and staff and is located on the district website. The plan can be accessed using this [link](#).

Following Washington County Public Health (WCPH) Communicable Disease Guidelines, both Sam Schaffer, MPH and Sue Liong, RN from Washington County Health Services have been involved in the development of these protocols. In addition, Dr. Christina Baumann, Washington County Public Health Officer, has provided consultation in meeting the Communicable Disease Guidelines. District school nurses have been integral in establishing screening protocols at school sites.

Training for basic COVID information is a requirement for all staff working in the district, including all non-school locations. At the school level, COVID-19 training will be conducted virtually through a "Safe Schools" module for all staff during admin-directed PD time with dedicated time for Q&A with administrator, custodian, and the school nurse. Additional isolation room training is necessary for any staff working in the isolation room and will be provided by the building nurse (see section 1i).

School nurses will take the lead on reporting, tracking, and monitoring student cases of COVID-19. HR will monitor and report all staff cases. Schools will follow Washington County Public Health (WCPH) School COVID-19 Outbreak Guidance. WCPH will direct the investigation if there is an outbreak (as of 3/15/21, current definition of an outbreak is one or more cases in a cohort).

Synergy will be used to gather attendance information for contact tracing for students when necessary. Other pertinent information, such as daily logs for staff attendance, demographic information, health room or isolation room use, will be provided to WCPH for the purposes of contact tracing. WCPH will use the information to evaluate potential exposure to COVID-19. Involvement of WCPH may change based on current community needs and will be assessed as changes occur.

Student athletic programs fall under OSAA guidelines. Cases of COVID-19 in an athletic cohort will be directed by the school Athletic Director.

Communication to the school community regarding a positive or presumptive case will be directed by building administration with support from school nurses, in consultation with WCPH. School exclusion letter templates have been provided by WCPH for school use. Letters may be sent out in a printed format, online communication, or other method deemed appropriate for the individual school community.

Protocols for screening students and staff for symptoms can be found in section 1f.

Protocols to isolate any ill or exposed persons from physical contact with others can be found in section 1i.

Protocols for communicating potential COVID-19 cases to the school community and other stakeholders can be found in section 1e.

Protocols to respond to potential outbreaks can be found in section 3.

The district created an online [form](#) where staff, students, and families can anonymously report COVID-19 protocol concerns. The forms are available now and located under the district and school websites under the “Families” and “Staff” drop down menus.

Requirements for 1b. HIGH-RISK POPULATIONS

- Serve students in high-risk population(s) whether learning is happening through On-Site (including outside), Hybrid (partially On-Site and partially Comprehensive Distance Learning models), or Comprehensive Distance Learning models.

Medically Fragile, Complex and Nursing-Dependent Student Requirements

- 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:
 1. Medically Complex: Are students who may have an unstable health condition and who may require daily professional nursing services.
 2. Medically Fragile: Are students who may have a life-threatening health condition and who may require immediate professional nursing services.
 3. Nursing-Dependent: Are students who have an unstable or life-threatening health condition and who require daily, direct, and continuous professional nursing services.
- Review [Supplemental Guidance on Community and Health Responsibilities Regarding FAPE in Relation to IDEA During CDL and Hybrid](#).
- 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:
- 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.
- Appropriate medical-grade personal protective equipment (PPE) should be made available to [nurses and other health providers](#).
- 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:
- 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.

Plan Details for 1b.

Please enter the details of your On-Site or Hybrid plan that correspond to the requirements listed above:

District nurses have developed protocols for enhanced PPE and COVID-19 guidelines that are specific to working with and supporting students who are medically impacted. District Nurses and Classroom nurses will be supporting students who are medically complex, medically fragile, and nursing-dependent students in our buildings. Classroom nurses have been fitted for N95 masks to wear during aerosol generating procedures and have received specific COVID-19 and Isolation Room training by the district nurses. District nurses will be working with families regarding specific student needs as a result of returning to school, will update health management plans, and will work with school teams to update IEPs and 504s to reflect any changes to medical condition or status. Any changes relevant to the larger team of service providers, including Speech Language Pathologists, School Psychologists, Motor team members and others, will be shared with them so that they can make any necessary adjustments to their services. Nurses will continue to be a part of 504 teams and IEP teams as appropriate for students, and attend all relevant meetings to ensure that any decisions made factor in medical needs for the students at school.

Requirements for 1c. PHYSICAL DISTANCING

- 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. If implementing [Learning Outside guidance](#), establish an outside learning space for learning that maintains a minimum 35 square feet per person.

- Within this design, educators should have their own minimum of 35 square feet and the design of the learning environment must allow for some ability for the educator to move through the room efficiently and carefully without breaking 6 feet of physical distance to the maximum extent feasible.
- Support physical distancing in all daily activities and instruction, maintaining six feet between individuals to the maximum extent possible.
- 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.
- Schedule modifications to limit the number of students in the building or outside learning space (e.g., rotating groups by days or location, staggered schedules to avoid hallway crowding and gathering).
- Plan for students who will need additional support in learning how to maintain physical distancing requirements. Provide instruction; don't employ punitive discipline.
- Staff must maintain physical distancing during all staff meetings and conferences, or consider remote web-based meetings.

Plan Details for 1c.

Each classroom, and area within the building, will be set up to ensure 35 square feet per person. Staff will sign in at the school entrance and lists the times they are in the building as well as locations. Each grade level will have their own path to their classroom in order to maintain distance between students. Classroom routines and school procedures will be taught and reviewed to support student learning related to maintaining physical distancing requirements.

Requirements for 1d. COHORTING

- Where feasible, establish stable cohorts: groups shall be no larger than can be accommodated by the space available to provide 35 square feet per person, including staff.
- The smaller the cohort, the less risk of spreading disease. As cohort groups increase in size, the risk of spreading disease increases.
- Each school must have a system for daily logs to ensure contact tracing among the cohort(s) (see section 1a).
- Minimize interaction between students in different stable cohorts (e.g., access to restrooms, activities, common areas). Provide access to All Gender/Gender Neutral restrooms.
- Cleaning and sanitizing surfaces (e.g., desks, dry erase boards, door handles, etc.) must be maintained between multiple student uses, even in the same cohort.
- Design cohorts such that all students (including those protected under ADA and IDEA) maintain access to general education, grade-level academic content standards, and peers.
- Minimize the number of staff that interact with each cohort to the extent possible, staff who interact with multiple stable cohorts must wash/sanitize their hands between interactions with different stable cohorts.

- Elementary staff who interact with multiple cohorts (music, PE, library, paraprofessionals who provide supervision at recesses, etc.) should have schedules altered to reduce the number of cohorts/students they interact within a week. Consider having these staff engage via technology, altering duties so that they are not in close contact with students in multiple cohorts, or adjust schedules to reduce contacts.

Plan Details for 1d.

The maximum classroom cohort will be 15 students. Grade level cohorts will be less than 100 students. Each classroom teacher will maintain student attendance as well as a log of student restroom use and a list of other staff members that are in the classroom for more than 15 minutes. Logs will be maintained for at least four weeks. Each grade level cohort will have their own walking paths in the building and restroom. Students needing gender neutral restrooms may use the staff restroom. Class sizes are small enough to meet all requirements and travel within the building will be limited. Most interventions and specialists lessons will be completed in distance learning. Any staff that interact with multiple cohorts will wash/sanitize their hands between interactions with each stable cohort. The library media assistant will have a schedule that reduces her contact with different stable cohorts each day. Library books will be brought to each classroom for contactless checkout.

Disinfection and cleaning protocols are covered in section 2j.

Requirements for 1e. PUBLIC HEALTH COMMUNICATION AND TRAINING

- 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.
- Offer initial training to all staff prior to being in-person in any instructional model. Training could be accomplished through all staff webinar, narrated slide decks, online video, using professional learning communities, or mailing handouts with discussion. Training cannot be delivered solely through the sharing or forwarding information electronically or in paper copy form as this is an insufficient method for ensuring fidelity to public health protocols ([see section 8b](#) for specific training requirements). Note: Instructional time requirements allow for time to be devoted for professional learning that includes RSSL training.
- Post “COVID -19 Hazard Poster” and “Masks Required” signs as required by OSHA administrative rule [OAR 437-001-0744\(3\)\(d\) and \(e\)](#).
- Develop protocols for communicating with students, families and staff who have come into close contact with a person who has COVID-19.
 - The definition of exposure is being within 6 feet of a person who has COVID-19 for at least 15 cumulative minutes in a day.
 - OSHA has developed a [model notification policy](#).
- Develop protocols for communicating immediately with staff, families, and the school 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.

- Periodic interval training also keeps the vigilance to protocols ever present when fatigue and changing circumstances might result in reduced adherence to guidance.
- Provide all information in languages and formats accessible to the school community.

Plan Details for 1e.

Information about district training for COVID-19 is available under section 1a.

In the event of a positive/presumptive case of COVID-19, or an exposure to COVID-19 in the school community, the school nurse or WCPH, will perform contact tracing to determine if any students have been directly affected. WCPH will use this information to determine if students must be excluded from school. Building administrators will notify the families of these students, using a letter template provided by WCPH. Communication & notification will be sent out in a format that is customary and effective for the individual school community as determined by school administrators (see section 1a).

Communication about a possible exposure will follow similar procedures: the school nurse will work with WCPH to identify who has been directly affected. This information will be provided to the building administrator who will use provided template letters to notify the school community.

Requirements for 1f. ENTRY AND SCREENING

- Direct students and staff to stay home if they have COVID-19 symptoms. COVID-19 symptoms are as follows:
 - Primary symptoms of concern: cough, fever (temperature of 100.4°F or higher) or chills, shortness of breath, difficulty breathing, or new loss of taste or smell.
 - Note that muscle pain, headache, sore throat, diarrhea, nausea, vomiting, new 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 must be excluded from school for signs of other infectious diseases, per existing school policy and protocols. See pages 9-11 of OHA/ODE [Communicable Disease Guidance for Schools](#).
 - Emergency signs that require immediate medical attention:
 - Trouble breathing
 - Persistent pain or pressure in the chest
 - New confusion or inability to awaken
 - Bluish lips or face (lighter skin); greyish lips or face (darker skin)
 - Other severe symptoms
- Screen all elementary grade students for symptoms on-site every day. This can be done visually as well as asking students and staff about any new symptoms or close contact with someone with COVID-19. For students, confirmation from a parent/caregiver or guardian can also be appropriate. Secondary students must also be screened every day. This can be done off-site, prior to coming to school.

- Staff members can self-screen and attest to their own health, but regular reminders of the importance of daily screening must be provided to staff.⁴
 - Anyone displaying or reporting the primary symptoms of concern must be isolated (see section 1i) and sent home as soon as possible. [See table “Planning for COVID-19 Scenarios in Schools.”](#)
 - [Additional guidance](#) for nurses and health staff.
- 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. [See “Planning for COVID-19 Scenarios in Schools”](#) and the [COVID-19 Exclusion Summary Guide](#).
- Staff or students with a chronic or baseline cough that has worsened or is not well-controlled with medication must 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. See the [COVID-19 Exclusion Summary Guide](#).
- 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.

Plan Details for 1f.

Schools will use current systems of communicating with families to provide ongoing reminders that sick children should stay at home. Parents should be provided the [“Home-Based Screening”](#) tool and ask that it be completed daily before sending children to school. (This tool is available in translated versions on the COVID-19 Resources for All BSD Staff page on the. See “Documents & Flyers”).

Parents/Guardians will be reminded to have accurate contact information and emergency contacts’ phone numbers on file at school.

Schools will assign staff members to do visual screenings of students upon entry, using the [“Daily Visual Screening”](#) tool. Anyone displaying or reporting the primary symptoms of concern must be isolated, see section 1i.

Requirements for 1g. VISITORS/VOLUNTEERS

- Restrict non-essential visitors/volunteers.
 - Examples of essential visitors include: DHS Child Protective Services, Law Enforcement, etc.
 - Examples of non-essential visitors/volunteers include: Parent Teacher Association (PTA), classroom volunteers, etc.

⁴ Self-screening of adult staff members can be efficient but also problematic if not held to the highest of standards and building a culture where staff don’t sign-in when they have symptoms that should have them staying or working from home.

- Diligently screen all visitors/volunteers for symptoms and ask questions about symptoms and any close contact with someone diagnosed with COVID-19 upon every entry. Restrict from school property any visitor known to have been exposed to COVID-19. See the [COVID-19 Exclusion Summary Guide](#).
- Visitors/volunteers must wash or sanitize their hands upon entry and exit.
- Visitors/volunteers must maintain 6 feet of physical distancing, wear face coverings, and adhere to all other provisions of this guidance.

Plan Details for 1g.

Visitor access to the main school office will be managed by school staff. Volunteers will not be allowed inside any school building at this time. The district believes it's important to focus all school attention on students and staff and will revisit the use of volunteers inside the building at later time. Volunteers can support events that occur outside the school building and schools have guidance for that support.

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

- Employers are required to provide masks, face coverings, or face shields for all staff, contractors, other service providers, visitors and volunteers.
- Face coverings or face shields for all staff, contractors, other service providers, visitors or volunteers informed by [CDC guidelines for Face Coverings](#). Individuals may remove their face coverings while working alone in private offices. Face shields are an acceptable alternative only when a person has a medical condition that prevents them from wearing a mask or face covering, when people need to see mouth and tongue motions in order to communicate, or when an individual is speaking to an audience for a short period of time and clear communication is otherwise not possible.
- Face coverings or face shields for all students in grades Kindergarten and up following [CDC guidelines for Face Coverings](#). Face shields are an acceptable alternative only when a student has a medical condition that prevents them from wearing a mask or face covering, or when people need to see the student's mouth and tongue motions in order to communicate.
- Face coverings should be worn both indoors and outdoors, including during outdoor recess.
- "Group mask breaks" or "full classroom mask breaks" are not allowed. If a student removes a face covering, or demonstrates a need to remove the face covering for a short-period of time:
 - Provide space well away from peers while the face covering is removed. In the classroom setting, an example could be a designated chair where a student can sit and take a 15 minute or less "sensory break;"
 - Students must not be left alone or unsupervised;
 - Designated area or chair must be appropriately distanced from other students and of a material that is easily wiped down for disinfection after each use;
 - Provide additional instructional supports to effectively wear a face covering;
 - Provide students adequate support to re-engage in safely wearing a face covering;

- o Students cannot be discriminated against or disciplined for an inability to safely wear a face covering.
- Face masks⁵ for school RNs or other medical personnel when providing direct contact care and monitoring of staff/students displaying symptoms. School nurses shall also wear appropriate Personal Protective Equipment (PPE) for their role.
 - o [Additional guidance](#) for nurses and health staff.

Accommodations under ADA or IDEA and providing FAPE while attending to Face Covering Guidance

- If any student requires an accommodation to meet the requirement for face coverings, districts and schools must limit the student's proximity to students and staff to the extent possible to minimize the possibility of exposure. Appropriate accommodations could include:
 - o Offering different types of face coverings and face shields that may meet the needs of the student.
 - o Spaces away from peers while the face covering is removed; students must not be left alone or unsupervised.
 - o 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.
 - o Additional instructional supports to effectively wear a face covering.
- For students with existing medical conditions and a physician's orders to not wear face coverings, or other health related concerns, schools/districts **must not** deny any in-person instruction.
- Schools and districts must comply with the established IEP/504 plan prior to the closure of in-person instruction in March of 2020, or the current plan in effect for the student if appropriately developed after March of 2020.
 - o 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:
 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. Not make placement determinations solely on the inability to wear a face covering.
 3. Include updates to accommodations and modifications to support students in plans.
 - o For 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:
 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.

⁵ Face masks refer to medical-grade face masks in this document. RNs and other healthcare providers should refer to OHA for updated information.

- 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 in-person instruction, on-site instruction with accommodations, or Comprehensive Distance Learning.
- For students not currently served under an IEP or 504, districts must consider whether or not student inability to consistently wear a face covering or face shield as required is due to a disability. 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.
 - If a staff member requires an accommodation for the face covering or face shield requirements, districts and schools shall work to limit the staff member's proximity to students and staff to the extent possible to minimize the possibility of exposure.

Plan Details for 1h.

The district provided disposable face coverings and face shields to all district schools. Medical grade masks were provided to schools and departments in coordination with the district/school nurses and the Executive Administrator for Student Services.

The district's face covering policy can be found in the district's [COVID-19 Health and Safety Guidance](#).

For students with existing medical conditions and a physician's orders to not wear face coverings, or other health related concerns, schools/districts must not deny any in-person instruction.

Schools and districts will comply with the established IEP/504 plan prior to the closure of in-person instruction in March of 2020, or the current plan in effect for the student if appropriately developed after March of 2020.

Requirements for 1i. ISOLATION AND QUARANTINE

- 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.
- 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. See the [COVID-19 Exclusion Summary Guide](#).

- o Work with school nurses, health care providers, or other staff with expertise to determine necessary modifications to areas where staff/students will be isolated. If two students present COVID-19 symptoms at the same time, they must be isolated at once. If separate rooms are not available, ensure that 6 feet distance is maintained. Do not assume they have the same illness. Consider if and where students and staff will be isolated during learning outside. Create a comfortable outdoor area for isolation or follow plan for in building isolation.
- o Consider required physical arrangements to reduce risk of disease transmission.
- o Plan for the needs of generally well students who need medication or routine treatment, as well as students who may show signs of illness.
- o [Additional guidance](#) for nurses and health staff for providing care to students with complex needs.
- Students and staff who report or develop symptoms must be isolated in a designated isolation area in the school or outside learning space, 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.
 - o School nurses and health staff in close contact with symptomatic individuals (less than 6 feet) must 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 must be properly removed and disposed of prior to exiting the care space.
 - o After removing PPE, hands shall 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.
 - o If able to do so safely, a symptomatic individual shall wear a face covering.
 - o To reduce fear, anxiety, or shame related to isolation, provide a clear explanation of procedures, including use of PPE and handwashing.
- Establish procedures for safely transporting anyone who is sick to their home or to a health care facility.
- 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. Refer to table in [“Planning for COVID-19 Scenarios in Schools.”](#)
- 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).
- Record and monitor the students and staff being isolated or sent home for the LPHA review.
- The school must provide a remote learning option for students who are required to be temporarily off-site for isolation and quarantine.

Plan Details for 1i.

Isolation protocols have been developed by District nurses. Each school will have an isolation room (separate from the health room) with designated staff. All staff who have been assigned the responsibility of Isolation room management will receive specific Isolation Room training from the school nurse. Training topics will include the proper use of PPE, handwashing, isolation room procedures. Synergy health log training (HS-145 in TeacherSource) for documentation purposes will be required. Careful documentation of any time in the isolation room must be kept in the event of WCPH requests. Staff will follow the isolation protocols to keep sick persons out of direct contact with others, to minimize the spread of infection in the school community. Students who are sick must be isolated until parent/guardian can be reached for pickup.

In the event a parent or emergency contact cannot be reached, school administrators must have a plan for safely transporting students who have symptoms of communicable illness to home or a healthcare facility. Sick students must not be put on a school bus.

Staff that present with COVID-19 symptoms should report to their administrator and HR for tracking, and will be excused from work immediately.

Students who are not sick, but require some medical assistance or intervention, such as daily medication or First Aid, will be attended to in the office health room, or an alternate location, as determined by location.

Each building has a district nurse available by phone during the school day.

Facilities and School Operations (Section 2 of the RSSL Guidance)

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 instructional and extra-curricular activities requiring additional considerations (see section 5f of the *Ready Schools, Safe Learners* guidance).

Requirements for 2a. ENROLLMENT

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

- Enroll all students (including foreign exchange students) following the standard Oregon Department of Education guidelines.
- The temporary suspension of the 10-day drop rule does not change the rules for the initial enrollment date for students:
 - The ADM enrollment date for a student is the first day of the student's actual attendance.
 - A student with fewer than 10 days of absence at the beginning of the school year may be counted in membership prior to the first day of attendance, but not prior to the first calendar day of the school year.

- o If a student does not attend during the first 10 session days of school, the student's ADM enrollment date must reflect the student's actual first day of attendance.
- o Students who were anticipated to be enrolled, but who do not attend at any time must not be enrolled and submitted in ADM.
- If a student has stopped attending for 10 or more days, districts must continue to try to engage the student. At a minimum, districts must attempt to contact these students and their families weekly to either encourage attendance or receive confirmation that the student has transferred or has withdrawn from school. This includes students who were scheduled to start the school year, but who have not yet attended.
- When enrolling a student from another school, schools must request documentation from the prior school within 10 days of enrollment per OAR 581-021-0255 to make all parties aware of the transfer. Documentation obtained directly from the family does not relieve the school of this responsibility. After receiving documentation from another school that a student has enrolled, drop that student from your roll.
- Design attendance policies to account for students who do not attend in-person due to student or family health and safety concerns.
- When a student has a pre-excused absence or COVID-19 absence, the school district must reach out to offer support at least weekly until the student has resumed their education.
- When a student is absent beyond 10 days and meets the criteria for continued enrollment due to the temporary suspension of the 10 day drop rule, continue to count them as absent for those days and include those days in your Cumulative ADM reporting.

Plan Details for 2a:

The district will follow the ODE guidelines for enrollment.

Teachers will take attendance for students who engage both online and in-person synchronously.

Students who engage in Canvas on a daily basis will also be marked as engaging.

CARE teams at the 6-12 level will be incorporated to assist to engage students/families who are not engaging.

Advisory classes will continue to meet either every day or on Wednesday.

Automated calls will go out to families of students who do not engage in classes.

Requirements for 2b. ATTENDANCE

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

- Grades K-5 (self-contained): 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, online schools).
- Grades 6-12 (individual subject): 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, online schools).
- Alternative Programs: Some students are reported in ADM as enrolled in a non-standard program (such as tutorial time), with hours of instruction rather than days present and days absent. Attendance must be taken at least once for each scheduled interaction with each student, so that local systems can track the student's attendance and engagement. Reported hours of instruction continue to be those hours in which the student was present.
- Online schools that previously followed a two check-in per week attendance process must follow the Comprehensive Distance Learning requirements for checking and reporting attendance.
- 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 environment, caregiver's work schedule, and mental/physical health.

Plan Details for 2b.

Teachers will take attendance for students who engage both online and in-person synchronously.

Students who engage in Canvas on a daily basis will also be marked as engaging and will be marked accordingly.

CARE teams at the 6-12 level will be incorporated to assist to engage students/families who are not engaging.

Advisory classes will continue to meet either every day or on Wednesday.

Community involvement will provide messaging about attendance and expectations.

Automated calls will go out to families of students who do not engage in classes.

Requirements for 2c. TECHNOLOGY

- Update procedures for district-owned or school-owned devices to match cleaning requirements (see section 2d).
- Procedures for return, inventory, updating, and redistributing district-owned devices must meet physical distancing requirements.
- If providing learning outside and allowing students to engage with devices during the learning experiences, provide safe charging stations.

Plan Details for 2c.

Students will retain the device checked out to them for CDL. Each classroom teacher will determine if students need to bring their device to school each day. Students will use their assigned device if needed. If a student needs a device during hybrid instruction and they did not bring their device to school one will be loaned to them. This device will only be used by one student and will be cleaned before it is used by another student. Charging stations will also be available and will be cleaned between each individual use.

Requirements for 2d. SCHOOL SPECIFIC FUNCTIONS/FACILITY FEATURES

- **Handwashing:** All people on campus shall be advised and encouraged to frequently wash their hands or use hand sanitizer.
- **Equipment:** Develop and use sanitizing protocols for all equipment used by more than one individual or purchase equipment for individual use.
- **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.
- **Transitions/Hallways:** Limit transitions to the extent possible. Create hallway procedures to promote physical distancing and minimize gatherings.
- **Personal Property:** Establish policies for identifying personal property being brought to school (e.g., refillable water bottles, school supplies, headphones/earbuds, cell phones, books, instruments, etc.).

Plan Details for 2d.

* Signage, teaching, and periodic reteaching will help to encourage students to frequently wash their hands or use hand sanitizer. Use of hand washing or hand sanitizer will be incorporated into transitions within the classroom or building, by students and by staff when moving from one stable cohort to another.

* Students will utilize individual, labeled supplies rather than shared supplies. Any shared items such as staplers will be considered a high-touch surface with more frequent cleaning. Additionally, staff will incorporate the use of sanitizer use between uses as part of their classroom/group procedures

* Any on-site events will be limited and modified to include mask wearing and social distancing. Whenever possible, events will be hosted remotely.

* Physical markings in hallways will guide students and staff to follow distancing procedures, with physical spacing and one-directional traffic flow. The main hallway will serve as a physical barrier (identified with red tape) to prevent A wing cohorts and B wing cohorts from mixing.

* Students will bring their own water bottles (marked with name).

Requirements for 2e. ARRIVAL AND DISMISSAL

- Physical distancing, stable cohorts, square footage, and cleaning requirements must be maintained during arrival and dismissal procedures.
- Create schedule(s) and communicate staggered arrival and/or dismissal times.
- Assign students or cohorts to an entrance; assign staff member(s) to conduct visual screenings (see section 1f).
- 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.
 - 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.
- Ensure alcohol-based hand sanitizer (with 60-95% alcohol) 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.

Plan Details for 2e.

- * Physical distancing, stable cohorts, square footage, and cleaning requirements will be maintained during arrival and dismissal.
- * Students will enter and exit through the door assigned to their grade level.
- * Sign-in/out protocols are in place. We have a hand sanitizer station in the school entryway and in our school office.
- * Hand sanitizer stations are located at each entrance and as part of student restroom use protocols. Sanitizer is available to each classroom teacher as well for student use during each transition.
- * Students will be visually screened as they get on the bus. All teachers and support staff will screen students during arrival. Students that arrive after the start of the school day will enter through the office and will be visually screened at that time.

Requirements for 2f. CLASSROOMS/REPURPOSED LEARNING SPACES

- **Seating:** Rearrange student desks and other seat spaces so that staff and students' physical bodies are six feet apart to the maximum extent possible while also maintaining 35 square feet per person; assign seating so students are in the same seat at all times.
- **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.
- **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 shall be disposed of in a garbage can, then hands washed or sanitized immediately.
 - Wash hands with soap and water for 20 seconds or use an alcohol-based hand sanitizer with 60-95% alcohol.

Plan Details for 2f.

- * Seats have been spaced 6ft apart, maintaining 35 sq. ft. of space per person. Students will remain in their assigned seat spaces.
- * Each student will have a set of individual supplies for use for the duration of hybrid learning. No community supplies will be used.
- * Handwashing signage is posted throughout the building. Teachers will review hand-washing protocols with students prior to arrival for the first day of hybrid and as needed during hybrid learning.

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

- 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](#)).
- After using the restroom students must wash hands with soap and water for 20 seconds. Soap must be made available to students and staff. For learning outside if portable bathrooms are used, set up portable hand washing stations and create a regular cleaning schedule.
- Before and after using playground equipment, students must wash hands with soap and water for 20 seconds or use an alcohol-based hand sanitizer with 60-95% alcohol.
- Designate playground and shared equipment solely for the use of one cohort at a time. Outdoor playground structures require normal routine cleaning and do not require disinfection. Shared equipment (balls, jump ropes, etc.) should be cleaned and disinfected at least daily in accordance with [CDC guidance](#).
- Cleaning requirements must be maintained (see section 2j).
- Maintain physical distancing requirements, stable cohorts, and square footage requirements.
- Provide signage and restrict access to outdoor equipment (including sports equipment, etc.).
- Design recess activities that allow for physical distancing and maintenance of stable cohorts.
- Clean all outdoor equipment at least daily or between use as much as possible in accordance with [CDC guidance](#).
- Limit the number of employees gathering in shared spaces. Restrict use of shared spaces such as conference rooms, break rooms, and elevators by limiting occupancy or staggering use, maintaining 6 feet of distance between adults. Establish a minimum of 35 square feet per person when determining room capacity. Calculate only with usable space, understanding that tables and room set-up will require use of all space in the calculation. Note: The largest area of risk is adults eating together in break rooms without face coverings.

Plan Details for 2g.

- * Due to a shortened instructional time, outdoor play equipment and the playground will not be utilized during hybrid.
- * All physical spaces within the building will be utilized. Each teaching space is limited to 1 person per space. Classified staff will utilize classroom spaces of certified teachers who are teaching from home during CDL instruction.
- * Additional locations for staff lunch and break periods have been established to maintain distancing. Staff may also eat lunch in their classroom.

Requirements for 2h. MEAL SERVICE/NUTRITION

- Include meal services/nutrition staff in planning for school reentry.
- Prohibit self-service buffet-style meals.
- Prohibit sharing of food and drinks among students and/or staff.
- At designated meal or snack times, students may remove their face coverings to eat or drink but must maintain six feet of physical distance from others, and must put face coverings back on after finishing the meal or snack.
- Staff serving meals and students interacting with staff at mealtimes must wear face coverings (see section 1h). Staff must maintain 6 feet of physical distance to the greatest extent possible. If students are eating in a classroom, staff may supervise from the doorway of the classroom if feasible.
- Students and staff must wash hands with soap and water for 20 seconds or use an alcohol-based hand sanitizer with 60-95% alcohol before meals and shall be encouraged to do so after.
- Appropriate daily cleaning of meal items (e.g., plates, utensils, transport items).
- Cleaning and sanitizing of meal touch-points and meal counting system between stable cohorts.
- Adequate cleaning and disinfection of tables between meal periods.
- Since staff must remove their face coverings during eating and drinking, limit the number of employees gathering in shared spaces. Restrict use of shared spaces such as conference rooms and break rooms by limiting occupancy or staggering use. Consider staggering times for staff breaks, to prevent congregation in shared spaces. Always maintain at least 6 feet of physical distancing and 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. Wear face coverings except when eating or drinking and minimize time in spaces where face coverings are not consistently worn.

Plan Details for 2h.

No meals will be eaten at school.

Meal sacks containing breakfast, lunch and supper will be provided to students as they leave school buildings for the day.

Staff Meals:

Staff will wash hands with soap and water for 20 seconds or use an alcohol-based hand sanitizer with 60-95% alcohol before meals and will be encouraged to do so after.

Staff will take meals in designated areas where six feet of physical distance can be maintained at all times. Staff will be encouraged to stagger meals to limit congregating in shared spaces.

Face coverings are to be worn except when eating or drinking and time spent in spaces where face coverings are not worn should be minimized.

Requirements for 2i. TRANSPORTATION

- Include transportation departments (and associated contracted providers, if used) in planning for return to service.
- Buses are cleaned frequently. Conduct targeted cleanings between routes, with a focus on disinfecting frequently touched surfaces of the bus (see section 2j).
- Staff must use hand sanitizer (containing between 60-95% alcohol) in between helping each child and when getting on and off the vehicle. Gloves are not recommended; hand sanitizer is strongly preferred. If hand sanitizer is not available, disposable gloves can be used and must be changed to a new pair before helping each child.
- Develop protocol for loading/unloading that includes visual screening for students exhibiting symptoms and logs for contact-tracing. This must be done at the time of arrival and departure.
 - If a student displays COVID-19 symptoms, provide a face covering (unless they are already wearing one) and keep 6 feet away from others. Continue transporting the student.
 - The symptomatic student shall be seated in the first row of the bus during transportation, and multiple windows must be opened to allow for fresh air circulation, if feasible.
 - The symptomatic student shall leave the bus first. After all students exit the bus, the seat and surrounding surfaces must be cleaned and disinfected.
 - If arriving at school, notify staff to begin isolation measures.
 - If transporting for dismissal and the student displays an onset of symptoms, notify the school.
- 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.
- Per federal guidance, drivers must wear properly fitting face coverings at all times. A face shield or goggles may be worn to supplement a properly fitting face covering. Please refer to the [CDC order](#).
- 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).
- Face coverings for all students, applying the guidance in section 1h to transportation settings. This prevents eating while on the bus.
- Take all possible actions to maximize ventilation: Dress warmly, keep vents and windows open to the greatest extent possible.

Plan Details for 2i.

Bus drivers will perform visual screening of each student upon boarding looking for COVID-like symptoms. Any child displaying symptoms will be directed to sit in one of the first three rows of the bus which will have been reserved and open. Any isolated students will unload before other students are allowed out of their seats. Schools will be notified of the pending arrival of any student(s) displaying COVID-like symptoms and school staff shall be present upon arrival to escort the student to an isolation room. Students will load from the rear to front of the bus and

exit from front to rear. A minimum of three windows will be lowered to the ½ mark on each side of the bus and roof vents will be opened to maximize airflow.

Drivers will sanitize high-touch areas upon unloading of each group of students. All areas of buses will be thoroughly sanitized twice per day (after AM route & PM route). Extra supply of face coverings will be available for any students in need. Drivers will have a 3-oz bottle of hand sanitizer for personal use. Every effort will be made to seat one student per seat and maintain three-foot distancing. For Activity Trips, student/team cohorts will not be mixed for transportation to events. If charter buses are used, students will be seated one per row.

Drivers will wear face coverings when driving (unless the mask or face covering interferes with the driver's vision), when not actively driving and operating the bus, and while students are entering or exiting the bus. Parents will be notified of any route or stop changes due to COVID-related issues.

Requirements for 2j. CLEANING, DISINFECTION, AND VENTILATION

- Clean, sanitize, and disinfect frequently touched surfaces (e.g. 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. Provide time and supplies for the cleaning and disinfecting of high-touch surfaces between multiple student uses, even in the same cohort.
- Outdoor learning spaces must have at least 75% of the square footage of its sides open for airflow.
- Outdoor playground structures require normal routine cleaning and do not require disinfection. Shared equipment should be cleaned and disinfected at least daily in accordance with [CDC guidance](#).
- Apply disinfectants safely and correctly following labeling direction as specified by the manufacturer. Keep these products away from students.
- 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.
- Schools with HVAC systems must evaluate the system to minimize indoor air recirculation (thus maximizing fresh outdoor air) to the extent possible. Schools that do not have mechanical ventilation systems shall, to the extent possible, increase natural ventilation by opening windows and interior doors before students arrive and after students leave, and while students are present. Do not prop open doors that can pose a safety or security risk to students and staff (e.g., exterior doors and fire doors that must remain closed.)
- Schools with HVAC systems should ensure all filters are maintained and replaced as necessary to ensure proper functioning of the system.
- All intake ports that provide outside air to the HVAC system should be cleaned, maintained, and cleared of any debris that may affect the function and performance of the ventilation system.

- Consider running ventilation systems continuously and changing the filters more frequently. Do not use fans if they pose a safety or health risk, such as increasing exposure to pollen/allergies or exacerbating asthma symptoms. Consider using window fans or box fans positioned in open windows to blow fresh outdoor air into the classroom via one window, and indoor air out of the classroom via another window. Fans must not be used in rooms with closed windows and doors, as this does not allow for fresh air to circulate.
- Consider the need for increased ventilation in areas where students with special health care needs receive medication or treatments.
- Facilities must be cleaned and disinfected at least daily to prevent transmission of the virus from surfaces (see [CDC's guidance on disinfecting public spaces](#)).
- 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](#)).

Plan Details for 2j.

This summary provides a general overview of the daily disinfection, general cleaning, and district expectations for instructional staff, custodial staff, and student support in classrooms during all in person learning days.

Mondays, Tuesdays, Thursdays and Fridays

Regular Start 9:00 am - 11:15 am

6:30 am - 9:00 am

Prior to the start of the Custodial Foreman's day, the buildings will have already been disinfected and cleaned from the evening shift on the previous work day. Custodians will disarm the building and perform any outstanding work from the previous evening shift.

Custodians turn on lights and building inspections. Verify airflow. Verify Boiler start. Turn on all district provided HEPA air cleaners (isolation areas).

9:00 am - 11:15 am

Custodians will collect trash as needed throughout the buildings.

Custodians will disinfect high touch points in the buildings (and clean as needed)

Common Spaces – door knobs, railings, drinking fountains, hard surfaces, and floors.

Each restroom at least once – door knobs, sinks, fixtures, mirrors, urinals/toilets, stalls, and floors.

Break Areas – door knobs, light switches, telephones, chairs, and floors.

Teachers and paraeducators may choose to use Clorox disinfecting wipes or Lysol disinfecting wipes in the classroom.

Safe to use around children and pregnant women.

Avoid contact with eyes or clothing. You should also wash thoroughly with soap and water after handling.

Wipe down high touch point surfaces as needed. Use enough wipes for treated surface to remain visibly wet for 30 seconds.

High touch surfaces include: classroom door knobs/handles, sink handles, and teacher desks.

Recommend disinfecting high touch surfaces in the classroom at least once during in-person instruction. Select a time when it's convenient for you and your students.

11:15 am - 3:30 pm

Students depart school to transition from in-person instruction to Comprehensive Distance Learning

Instructional Staff is still present in building teaching

Custodians will collect trash as needed throughout the buildings.

Custodians will disinfect high touch points in the buildings (and clean as needed)

Common Spaces – door knobs, railings, drinking fountains, hard surfaces, and floors.

Each restroom at least once – door knobs, sinks, fixtures, mirrors, urinals/toilets, stalls, and floors.

Break Areas – door knobs, light switches, telephones, chairs, and floors.

Custodians begin cleaning of the cafeteria and kitchen.

2:00 pm - 10:30 pm (Custodial Evening Shift)

Custodians clean classrooms, restrooms, and hallways

Custodians will collect trash and recycling and remove from the buildings.

Secure building.

Requirements for 2k. HEALTH SERVICES

- 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.
- 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; dental providers; physical, occupational, speech, and respiratory therapists; and School Based Health Centers (SBHC).

Plan Details for 2k.

The district has the following specialists available for student physical and behavioral health needs: Registered Nurses, Licensed Practical nurses, Health Assistants, behavioral health providers, physical, occupational, and speech therapists. Students with chronic medical conditions will receive case management from district registered nurses; these are identified as Medically Fragile, Complex, and Nursing-Dependent Students. The level of school support will be determined by nursing assessment.

Schools will maintain an isolation room in each building for symptomatic students (see section 1i), and Covid testing.

The district has two School Based Health Centers as a resource for further professional support.

Requirements for 2l. BOARDING SCHOOLS AND RESIDENTIAL PROGRAMS ONLY

- Provide specific plan details and adjustments in Operational Blueprints that address staff and student safety, which includes how you will approach:
 - Contact tracing
 - The intersection of cohort designs in residential settings (by wing or common restrooms) with cohort designs in the instructional settings.
 - 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
- Review and take into consideration [CDC guidance](#) for shared or congregate housing:
 - 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;

- o Establish plans for the containment and isolation of on-campus cases, including consideration of PPE, food delivery, and bathroom needs.

Exception

- They have a current and complete RSSL Blueprint and are complying with Sections 1-3 and any other applicable sections, including Section 2L.
- The school maintains a fully-closed residential campus (no non-essential visitors allowed), and normal day school operations are only offered remotely through distance learning.
- There have been no confirmed cases of COVID-19 among school staff or students in the past 14 days.
- Less than 10% of staff, employees, or contracts (in total) are traveling to or from campus. Staff in this designation will:
 - o Limit travel to essential functions.
 - o Carefully monitor their own health daily and avoid coming to campus at any potential symptom of COVID-19.
- Any boarding students newly arriving to campus will either:
 - o Complete a quarantine at home for 14 days* prior to traveling to the school, OR
 - o Quarantine on campus for 14 days.*

*A 14-day quarantine is the safest option to prevent the spread of COVID-19 to others. However, in either option above, for boarding students who have not developed any symptoms, schools may consider ending quarantine after 10 days without any testing, or after 7 days with a negative result on a COVID-19 viral test collected within 48 hours before ending quarantine, unless otherwise directed by the local public health authority (LPHA).

- Student transportation off-campus is limited to medical care.

Plan Details for 2l.

N/A

Requirements for 2m. SCHOOL EMERGENCY PROCEDURES AND DRILLS

- In accordance with [ORS 336.071](#) and [OAR 581-022-2225](#) all schools (including those operating a Comprehensive Distance Learning model) are required to instruct students on emergency procedures. Schools that operate an On-Site or Hybrid model need to instruct and practice drills on emergency procedures so that students and staff can respond to emergencies.
 - o At least 30 minutes in each school month must be used to instruct students on the emergency procedures for fires, earthquakes (including tsunami drills in appropriate zones), and safety threats.
 - o Fire drills must be conducted monthly.
 - o Earthquake drills (including tsunami drills and instruction for schools in a tsunami hazard zone) must be conducted two times a year.
 - o Safety threats including procedures related to lockdown, lockout, shelter in place and evacuation and other appropriate actions to take when there is a threat to safety must be conducted two times a year.

- Drills can and should be carried out as close as possible to the procedures that would be used in an actual emergency. For example, a fire drill must be carried out with the same alerts and same routes as normal. If appropriate and practicable, COVID-19 physical distancing measures can be implemented, but only if they do not compromise the drill.
- When or if physical distancing must be compromised, drills must be completed in less than 15 minutes.
- Drills shall not be practiced unless they can be practiced correctly.
- Train staff on safety drills prior to students arriving on the first day on campus in hybrid or face-to-face engagement.
- If on a hybrid schedule, conduct multiple drills each month to ensure that all cohorts of students have opportunities to participate in drills (i.e., schedule on different cohort days throughout the year).
- Students must wash hands with soap and water for 20 seconds or use an alcohol-based hand sanitizer with 60-95% alcohol after a drill is complete.

Plan Details for 2m.

All schools will continue to follow the district's [Emergency Operations Plan](#) and under the guidance and direction of the district's Emergency Coordinator.

Requirements for 2n. SUPPORTING STUDENTS WHO ARE DYSREGULATED, ESCALATED, AND/OR EXHIBITING SELF-REGULATORY CHALLENGES

- Utilize the components of Collaborative Problem Solving⁶ or a similar framework to continually provide instruction and skill-building/training related to the student's demonstrated lagging skills⁷.
- Take proactive/preventative steps to reduce antecedent events and triggers within the school environment.
- Be proactive in planning for known behavioral escalations (e.g., self-harm, spitting, scratching, biting, eloping, failure to maintain physical distance). Adjust antecedents where possible to minimize student and staff dysregulation. Recognize that there could be new and different antecedents and setting events with the additional requirements and expectations for the 2020-21 school year.
- Establish a proactive plan for daily routines designed to build self-regulation skills; self-regulation skill-building sessions can be short (5-10 minutes), and should take place at times when the student is regulated and/or is not demonstrating challenging behaviors.

⁶ See [this site](#) for an overview of Collaborative Problem Solving.

⁷ In the CPS framework, lagging skills are the reasons that a child is having difficulty meeting expectations or responding adaptively to triggers. Specific lagging skills can be assessed using the [Collaborative Problem Solving Assessment & Planning Tool - Likert Scale](#) (CPS-APT) or the [Assessment of Lagging Skills and Unsolved Problems \(ALSUP\)](#).

- Ensure all staff are trained to support de-escalation, provide lagging skill instruction, and implement alternatives to restraint and seclusion.
- Ensure that staff are trained in effective, evidence-based methods for developing and maintaining their own level of self-regulation and resilience to enable them to remain calm and able to support struggling students as well as colleagues.
- Plan for the impact of behavior mitigation strategies on public health and safety requirements.
- Ensure that spaces that are unexpectedly used to deescalate behaviors are appropriately cleaned and sanitized after use before the introduction of other stable cohorts to that space.

Plan Details for 2n.

- * Aloha-Huber Park has a Student Success Framework that has been adapted for CDL and Hybrid instruction.
- * Staff will proactively plan for and respond to needs/lagging skills of individual students and review skills as needed.
- * The Behavioral Health and Wellness team will plan for students they feel may need support as hybrid instruction begins based on information shared from families and current skill level. The team will also be available to support unanticipated needs.

Requirements for 2o. PROTECTIVE PHYSICAL INTERVENTION

- In accordance with ORS 339.291, ORS 339.300, and OAR 581-015-2556, if restraint or seclusion is used on a student, it must be imposed by personnel who are trained in approved restraint or seclusion programs, or by other personnel who are otherwise available in the case of emergency circumstance. Staff may engage in close contact (less than 6 feet of physical distance) with no more than two other individuals on a given day for the purposes of assessing physical skills associated with required training components of approved programs, under the following conditions:
 - Only participants and trainers are allowed to be present for these sessions.
 - Participants and trainers must be screened for symptoms associated with COVID-19 prior to the start of each session. Anyone exhibiting symptoms, by visual screening or self-report, shall not participate in training at that time.
 - All participants and trainers must wash their hands immediately prior to and following direct physical contact with another person.
 - All people in close contact for this purpose must wear appropriate Personal Protective Equipment (PPE), including but not limited to, medical grade N95 face masks, face shield, gloves, and gown.
- Reusable Personal Protective Equipment (PPE) must be cleaned and disinfected following the manufacturer's recommendation, after every episode of physical intervention (see section 2j. Cleaning, Disinfection, and Ventilation). Single-use disposable PPE must not be re-used.

Plan Details for 2o.

Single-use PPE will be provided for staff and students who arrive at school without the necessary PPE.

Response to Outbreak (Section 3 of the RSSL Guidance)

Requirements for 3a. PREVENTION AND PLANNING

- Review the “[Planning for COVID-19 Scenarios in Schools](#)” toolkit.
- Coordinate with Local Public Health Authority (LPHA) to establish communication channels related to current transmission level.

Plan Details for 3a.

All schools will continue to monitor [Ready Schools, Safe Learners](#) and [Planning for COVID-19 Scenarios in Schools](#) toolkit from OHA/ODE, and will reference these guidelines in decision making. The district will maintain a COVID-19 resources page on the staff intranet, and an external COVID-19 Health and Safety guidance page on the district website. The district works closely with WCPH to maintain adherence to county health standards and decision making regarding potential health threats in the community.

Requirements for 3b. RESPONSE

- Review and utilize the “[Planning for COVID-19 Scenarios in Schools](#)” toolkit.
- Ensure continuous services and implement Comprehensive Distance Learning.
- Continue to provide meals for students.

Plan Details for 3b.

All schools will continue to monitor [Ready Schools, Safe Learners](#) and [Planning for COVID-19 Scenarios in Schools](#) toolkit from OHA/ODE, and will reference these guidelines in decision making. The district will maintain a COVID-19 resources page on the staff intranet, and an external COVID-19 Health and Safety guidance page on the district website. The district works closely with WCPH to maintain adherence to county health standards and decision making regarding potential health threats in the community.

Requirements for 3c. RECOVERY AND REENTRY

- Review and utilize the “[Planning for COVID-19 Scenarios in Schools](#)” toolkit.
- Clean, sanitize, and disinfect surfaces (e.g. door handles, sink handles, drinking fountains, transport vehicles) and follow [CDC guidance](#) for classrooms, cafeteria settings, restrooms, and playgrounds.
- When bringing students back into On-Site or Hybrid instruction, consider smaller groups, cohorts, and rotating schedules to allow for a safe return to schools.

Plan Details for 3c.

All schools will continue to monitor [Ready Schools, Safe Learners](#) and [Planning for COVID-19 Scenarios in Schools](#) toolkit from OHA/ODE, and will reference these guidelines in decision making. The district will maintain a COVID-19 resources page on the staff intranet, and an external COVID-19 Health and Safety guidance page on the district website. The district works closely with WCPH to maintain adherence to county health standards and decision making regarding potential health threats in the community. Cleaning, sanitizing, and disinfecting protocols will be in accordance with CDC guidance.

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 unless the school is implementing the Limited In-Person Instruction provision under the Comprehensive Distance Learning guidance.

This section does not apply to private schools.

Let us know whether statement 1 or statement 2 applies to your school plan by typing “Yes” after the prompt that follows the correct statement:

1. We affirm that, in addition to meeting the requirements as outlined above, our school plan has met the collective requirements from ODE/OHA guidance related to the 2020-21 school year, including but not limited to requirements from:
 - o Sections 4, 5, 6, 7, and 8 of the [Ready Schools, Safe Learners](#) guidance,
 - o The [Comprehensive Distance Learning](#) guidance,
 - o The [Ensuring Equity and Access: Aligning Federal and State Requirements](#) guidance, and
 - o [Planning for COVID-19 Scenarios in Schools](#)

Does statement 1 apply to your school?

Yes

2. We affirm that we cannot meet all of the collective requirements from ODE/OHA guidance related to the 2020-21 school year from:
 - o Sections 4, 5, 6, 7, and 8 of the [Ready Schools, Safe Learners](#) guidance,
 - o The [Comprehensive Distance Learning](#) guidance,
 - o The [Ensuring Equity and Access: Aligning Federal and State Requirements](#) guidance, and
 - o [Planning for COVID-19 Scenarios in Schools](#)

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.

Does statement 2 apply to your school?

N/A

Assurance Compliance and Timeline

If a district/school cannot meet any of the requirements from the sections listed below, provide a plan and timeline to meet the requirement:

- Section 4: Equity
- Section 5: Instruction
- Section 6: Family, Community, Engagement
- Section 7: Mental, Social, and Emotional Health
- Section 8: Staffing and Personnel

Please type below which requirements cannot be met and the plan and timeline to meet them. Be sure to include how and why the school is currently unable to meet them.

School's response:

N/A