School-Level Communicable Disease Management Plan School Year 2023-2024



School/District/Program Information

District or Education	Service District Name and ID:	Grants Pass School	District 7
School or Program N	ame:Parkside Elementary	School	
Contact Name and T	tle:Rob Lewis, Prinicipal		
Contact Phone:	541-474-5777	Contact Email:	rlewis@grantspass.k12.or.us

Table 1.



Policies, protocols, procedures and plans already in place

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

Plan Types	Hyperlinks and Descriptions
School District Communicable Disease Management Plan OAR 581-022-2220	Comprehensive Communicable Disease Management Plan
Exclusion Measures Exclusion of students and staff who are diagnosed with certain communicable diseases. OAR 333-019-0010	Comprehensive Communicable Disease Management Plan Students and staff members should not return until they have met criteria to discontinue home isolation as described in the Planning for COVID-19 Scenarios in Schools or as outlined in appropriate ODE Ready Schools, Safe Learners Resiliency Framework.
Isolation Space Requires a prevention-oriented health services program including a dedicated space to isolate sick students and to provide services for students with special health care needs. OAR 581-022-2220	Comprehensive Communicable Disease Management Plan Isolation spaces have been established in each building to isolate students. Screening tools have been developed and staff at each building have been trained on the process for donning PPE and interviewing students about symptoms and onset. Additionally, administrative staff of the District have a reporting protocol and will assist response and help with communications with students and parents and with administering the rapid COVID-19 test, if the family so desires.
Emergency Plan or Emergency Operations Plan OAR 581-022-2225	Response Protocols

Plan Types	Hyperlinks and Descriptions
Mental Health and Wellbeing Plans such as those prepared for Student Investment Account (optional)	
Additional documents reference here:	



SECTION 1. Clarifying Roles and Responsibilities

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

Table 2.

Roles and Responsibilities

School planning team members	Responsibilities:	Primary Contact (Name/Title):	Alternative Contact:
Building Lead / Administrator	 Educates staff, families, and students on policies regarding visitors and volunteers, ensuring health and safety are being maintained. In consultation with district leadership and LPHA staff, determines the level and type of response that is required/necessary. 	Rob Lewis, Principal	Tommy Blanchard, Operations Manager

School planning team members	Responsibilities:	Primary Contact (Name/Title):	Alternative Contact:
	Acts as key spokesperson to communicate health- related matters within school community members, health partners, and other local partners.		
School Safety Team Representative (or staff member knowledgeable about risks within a school, emergency response, or operations planning)	 Trains staff at the start of the academic year and at periodic intervals on communicable disease management procedures. Leads debrief of communicable disease event, informing continuous improvement of the planning, prevention, response, and recovery system. 	Rob Lewis, Principal	Betsy Morgan, Office Manager
Health Representative (health aid, administrator, school/district nurse, ESD support)	 Supports building lead/administrator in determining the level and type of response that is necessary. Reports to the LPHA any cluster of illness among staff or students. Provides requested logs and information to the LPHA in a timely manner. 	Martha Covrig, District Nurse	Joy Huston, District Nurse
School Support Staff as needed (transportation, food service, maintenance/custodial)	Advises on prevention/response procedures that are required to maintain student services.	Betsy Morgan, Office Manager	Rob Lewis, Principal

School planning team members	Responsibilities:	Primary Contact (Name/Title):	Alternative Contact:
Communications Lead (staff member responsible for ensuring internal/external messaging is completed)	 Ensures accurate, clear, and timely information is communicated including those who may have been exposed, a description of how the school is responding, and action community members can take to protect their health. Shares communications in all languages relevant to school community. 	Kristin Hosfelt, Communications and Public Relations Specialist	Tommy Blanchard, Operations Manager
District Level Leadership Support (staff member in which to consult surrounding a communicable disease event)	 Has responsibility over communicable disease response during periods of high transmission in community at large. May act as school level support to Building lead/Administrator activating a scaled response. Responds to media inquiries during the communicable disease event and ensures that those responsible for communication are designated speakers. 	Tommy Blanchard, Operations Manager	Kristin Hosfelt, Communications and Public Relations Specialist
Main Contact within Local Public Health Authority (LPHA)	 Notifies Building Lead/Administrator of communicable disease outbreak and offers recommendations for appropriate response. Key spokesperson to communicate on health-related matters with community members, health facility staff, and other local community partners. 	Tommy Blanchard, Operations Manager	Kristin Hosfelt, Communications and Public Relations Specialist
Others as identified by team			



Section 2. Equity and Continuity of Education

Preparing a plan that centers equity and supports mental health

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

Centering Equity

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

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Suggested Resources:

- 1. Equity Decision Tools for School Leaders
- 2. Community Engagement Toolkit
- 3. Tribal Consultation Toolkit

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

Centering Educational Equity

OHA/ODE Recommendation(s)	Response:
Describe how you will ensure continuity of instruction for students who may miss school due to illness.	Each of our schools will work directly with the family to provide the support necessary to ensure continuity of education. Depending on the length of time, this could include homebound instruction, remote learning and/or coordination between family, school and teacher to replicate in-class instruction as best as possible. We use early warning systems and RTI to identify students in need. School data for grades, attendance, behavior etc. will be disaggregated and used to determine which students need additional support. Demographic data will be included to ensure unrepresented groups have their needs met.
Describe how you identify those in your school setting that are disproportionately impacted by communicable disease and which students and families may need differentiated or additional support.	Reach out to students and families to begin the process of developing a plan. Conferences or team meeting may be a time to connect with families In partnership with the teacher will develop a plan in consultation with the student and family based on the unique needs of each student. The plan can be updated and reviewed throughout the year or as needed.
Describe the process by which the school will implement a differentiated plan for those that are disproportionately impacted, historically underserved or at higher risk of negative impacts or complications related to communicable disease.	 Interpreters provided for all family meetings and orientation nights when needed and communications translated into requested language. Case managers will be onsite to partner with students with disabilities during orientation nights Materials are translated and distributed describing available school and local mental health supports Create healing and relationship-building norms, such as community and restorative circles (virtual or physically distanced), mindfulness, and social emotional learning activities. Respond to trauma and collective grieving as it arises. Invest in differentiated learning opportunities and supports for staff across various identities and roles that focus on building relationships, social emotional wellness, and navigating differences across culture, power, and privilege

OHA/ODE Recommendation(s)	Response:
	Develop students' abilities to connect across cultures by affirming racial and cultural identities and creating opportunities for students to learn from each other and with each other.
Describe what support, training or logistics need to be in place to ensure that the named strategies are understood, implemented, and monitored successfully.	Ongoing training for staff for the strategies listed above will be conducted by the District Equity Team and/or Equity Director.



Section 3. Communicable Disease Outbreak Prevention and Response:

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

Planning for and implementing proactive health and safety mitigation measures assists schools in reducing communicable disease transmission within the school environment for students, staff, and community members. Communicable disease, including norovirus, flu and COVID-19, will continue to circulate in our communities and our schools. Schools will utilize different mitigation measures based on local data, and observation of

what is happening in their schools (e.g., transmission within their facilities and communities.) In the following section, teams will document their school's approach to the CDC, OHA and ODE advised health and safety measures at baseline, during increased transmission.



Suggested Resources:

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

Table 4.

Communicable Disease Mitigation Measures

OHA/ODE Recommendation(s) Layered Health and Safety Measures	Describe what mitigating measures the school will implement to reduce and respond to the spread of communicable disease and protect in-person instruction?
Immunizations	CDC, OHA, and ODE recommend COVID-19 vaccination for all eligible individuals. Please include whether your school will offer COVID-19 vaccine clinics or notices about where to access vaccines in your community. Shots are required by law for children in attendance at public and private schools, preschools, child care facilities, and Head Start programs in Oregon. Nearly every place that provides care for a child outside the home requires shots or a medical or nonmedical exemption to stay enrolled.
	Masks are available at schools as needed
Face Coverings	 School communication to families that at some point during the school year the school may need to require masking, based on federal, state, or local laws and policies, or to ensure that students with immunocompromising conditions or other conditions that increase their risk for getting very sick.
	Per OAR 581-022-2220 schools must maintain supervised space to isolate the sick with a communicable disease that is separate from the space where other health care tasks take place. Isolation space in each school is required. Examples:
	 School to identify designated isolation spaces (required) for every school day and additional spaces in the event of a communicable disease outbreak.
Isolation	 Trained (possibly by school health nurse) school staff in isolation protocols for sick students and staff identified at the time of arrival or during the school day according to the exclusion measures.
	 School to have trained staff that can support all student health and safety needs. Staff to support students on Individualized Health Management Plans.
	Investigation and control of disease. District policies and procedures incorporate a layered approach to identifying, monitoring, and mitigating outbreaks of communicable diseases and the school works closely with LPHA.
	This is a standard protocol for all levels of the pandemic/communicable disease.
Symptom Screening	 School will train school staff on the district's flexible, non-punitive, and supportive paid sick leave policies and practices, designed to encourage sick workers to stay home without fear of retaliation, loss of pay, loss of employment, or other negative impacts.

OHA/ODE Recommendation(s) Layered Health and Safety Measures	Describe what mitigating measures the school will implement to reduce and respond to the spread of communicable disease and protect in-person instruction?
	 School will create communications which include symptoms for communicable disease and instructions to families and staff if/when symptoms are present. School will create a letter template for notifying families of illness within a classroom or communicable disease. The communication will include the message that staying home when sick can lower the risk of spreading communicable diseases other people.
COVID-19 Diagnostic Testing	The District may provide tests until supplies are exhausted.
Airflow and Circulation	Ventilation is one component of mitigation strategies to prevent sickness in the school setting. Standard operating procedures have been established directing the inspection, maintenance, and filtration requirements of HVAC equipment as well as directions to maximize the ventilation of buildings by increasing fresh air intake, purging the building before and after occupancy, etc. Building HVAC outside air dampers will be adjusted such that their minimum damper setting meets recommended outside air infiltration rates per ADSHRAE 62.11-2019 "Ventilation for Acceptable Indoor Air Quality". • Additional mitigation measures include the assessment of individual spaces to determine the need for portable HEPA filtration systems. • Facilities to train and monitor staff on HVAC, monthly service, repair, workflow
Cohorting	Cohorting may take place in the event a communicable disease requires students to come in to contact with fewer individuals to prevent the spread of illness.
	Maintain at least 3 feet to the greatest extent possible if there is an outbreak.
Physical Distancing	
Hand Washing	 Teach and reinforce handwashing with soap and water for at least 20 seconds and increase monitoring upon entry, prior to eating, after using the restroom, and before and after recess If soap and water are not readily available, hand sanitizer that contains at least 60% alcohol can be used (for individuals who can safely use hand sanitizer). Students should be supervised with the use of hand sanitizer.

OHA/ODE Recommendation(s) Layered Health and Safety Measures	Describe what mitigating measures the school will implement to reduce and respond to the spread of communicable disease and protect in-person instruction?
	Hand sanitizer should not be used with students that have a sensitivity or risk of ingesting sanitizer related to developmental or cognitive level.
	Practicing and accessibility to hand hygiene is a simple yet effective way to prevent infections. Hand hygiene, which means cleaning your hands by washing with soap and water or using an alcohol-based hand sanitizer containing at least 60% alcohol, is one of the best ways to avoid getting sick and prevent spreading germs to others. Implementation of routine hand washing, before/during/after preparing food, before/after eating, before/after caring for someone who is sick, before/after using the restroom or changing diapers, after blowing your nose/coughing/sneezing, PE, music, etc.
	Staff will teach proper handwashing and covering coughs etiquette.
	Post signs as well as model and teach to students. Adaguate handwarking symplics and access will be available.
	 Adequate handwashing supplies and access will be available. Access to hand sanitizer with at least 60% alcohol for use. Hand sanitizers will be stored up, away, and out of sight of younger children and will be used only with adult supervision for children ages 5 years and younger.
	 Post signs as well as model and teach to students. Visual directions and posters are up across schools and district facilities about hand washing as well as cough etiquette.
	Routine sanitization measures will be in full effect, including processes to respond to potentially
	infectious material as outlined in Bloodborne Pathogens and Exposure Control Plan
	All frequently touched surfaces within the school and on school buses will be cleaned
	and disinfected at least daily and between uses as much as possible.
	 Use of shared object will be limited where possible and cleaned between use to the extent possible.
Cleaning and Disinfection	Cleaning with products containing soap or detergent reduces germs on surfaces by removing contaminants and
cleaning and Distinction	decreases risk of infection from surfaces. Disinfecting kills any remaining germs on surfaces, which further reduces any risk of spreading infection. Example:
	Daily cleaning of all touch points in classrooms, transportation, common areas, cafeterias with a general cleaner.
	All restrooms disinfected daily.

OHA/ODE Recommendation(s) Layered Health and Safety Measures	Describe what mitigating measures the school will implement to reduce and respond to the spread of communicable disease and protect in-person instruction?
	 During an outbreak or illness, illness cleaning (cleaned and disinfected) will be initiated by school and increased in that area.
	Staff will be trained, at least yearly, in transmission prevention and symptom identification.
Training and Public Health	
Education	

PRACTICING PLAN TO BE READY

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

Date Last Updated: 8/25/23 Date Last Practiced: 8/24/23