



Salem Keizer Public Schools 2026-2027

OAR 581-022-2220 (Health Services) Implementation Tool

This tool is designed to support districts to implement requirements found in [OAR 581-022-2220](#). For more information on how to use this tool, please see the [Instructions for the OAR 581-022-2220 \(Health Services\) Implementation Tool](#). The first section of OAR 581-022-2220 requires school districts, education service districts, and public charter schools to develop, implement, and annually update a written prevention-oriented health services plan for all students. The plan must describe a health services program for all students at each facility that is owned or leased, where students are present for regular programming. The health services plan will be created and maintained by the administration of each district and charter school serving students. This tool facilitates self-evaluation of the required components of the rule.

District/School/Program Name:

Salem Keizer Public Schools Insight 24J
2450 Lancaster Dr. NE Salem, OR 97305

Date Last Updated: **6/2026 for 2026-2027 school year**

Table I: Staff Member Roles

Naming roles and identifying individuals, and alternates where appropriate, helps to ensure direction, coordination, and collaboration in providing health services. Health services encompass many aspects of a student’s school day and rely upon a variety of staff roles.

School and District Planning Team Members	Primary Contact (Name/Title)	Alternative Contact (Name/Title)
District leadership	Andrea Castañeda, Superintendent	Olga Cobb, Deputy Superintendent Danielle Neves, Deputy Superintendent Jonathan McIlroy, Exec Director of Strategy
Building lead/administrator	Scott Drue, Director of Student Services	Jared Myers, Assistant Director of Student Services

Health representative	Jodi Peterson, RN DHA Health Services Coordinator	Kristiina Gagner, RN Health Services Program Associate
Registered nurse	Jodi Peterson, RN DHA Health Services Coordinator	Kristiina Gagner, RN Health Services Program Associate
Licensed health services staff	(HST nurse list)	(HST nurse list)
Other staff as identified by the team	RISK, HST, Facilities, DOC, EOC, Exec	RISK, HST, Facilities, DOC, EOC, Exec

Table II: Communicable Disease Prevention & Response

OAR Requirements	Plan Considerations	Examples of Evidence/Resources	Plan Evidence	Meet?
(1) School districts, education service districts, and public charter schools shall develop, implement, and annually update a written prevention-oriented health services plan for all students. The plan must describe a health services program for all students at each facility that is owned or leased where students are present for regular programming. The health services plan will be created and maintained by the administration of each district and charter school serving students. Health services plans must include:				
(1)(b) Communicable disease prevention and management plan that includes school-level protocols for:	Where is the protocol located and how is it trained with school staff? Is the plan updated regularly and by whom?	School-level Communicable Disease Management Plan	Salem Keizer Public Schools (SKPS) Communicable Disease Management Plan policy by Health Service Team (HST) District Health Authority (DHA): - QAM HST-M002-COVID-19 Pandemic Addendum - QAM HST-W008-Communicable Disease - QAM HST-M001 Pandemic Flu and Infectious Disease Applicable documents: DHA/HST liaison for school and LPHA OHA Communicable Disease Guidance for Schools: Communicable Disease Guidance for Schools - HST-F013 Do Not Send Ill Student to School Letter - How to set up an isolation room (reach out to building nurse) - HST-F014 LPHA Communicable Disease Line List	Yes, meet the standard: - Staff trained annually by mandatory trainings. - Updated annually by HST team and timely with any updates or change requirements. - Outlined in QAMs in plan evidence. - HST and NHL available for support, DHA.

OAR Requirements	Plan Considerations	Examples of Evidence/Resources	Plan Evidence	Meet?
(1)(b)(A) Notifying the local public health authority (LPHA) if absence due to illness threshold, as established by the Oregon Health Authority (OHA) or LPHA, of students and staff is attained.	What is the school-level process for monitoring symptoms and absences and contacting LPHA? Who is responsible for monitoring illness thresholds and what is the communication plan in responding? What metrics or data are monitored to determine when the LPHA needs to be contacted? How is the process reviewed and updated regularly in the district's communicable disease plan?	- School-level Communicable Disease Management Plan (Section 1, Table 2) - Protocol for LPHA communication - Protocol for monitoring absences and illness Resources: Communicable Disease Guidance for Schools	HST DHA role in LPHA liaison and mitigating measure within the school setting and maintaining policies. SKPS Communicable Disease Management Plan: - QAM HST-M002-COVID-19 Pandemic Addendum - QAM HST-W008-Communicable Disease - QAM HST-M001 Pandemic Flu and Infectious Disease Applicable documents: DHA/HST liaison for school and LPHA OHA Communicable Disease Guidance for Schools: Communicable Disease Guidance for Schools	Yes, meet the standard: Outlined in QAMs in plan evidence.
(1)(b)(B) Exclusion of individuals consistent with OAR 333-019-0010 , with a description of an isolation space that is appropriately supervised and adequately equipped and that can be used exclusively for the supervision and care of a sick child when a sick child is present in the school.	Where is the isolation space? Can it be used exclusively as an isolation space? What is the plan to shift use when needed and how will staff be made aware that the space is in use for isolation? What protocols are in place to ensure supervision, supplies, and cleaning after use?	- School-level Communicable Disease Management Plan (Table 1; Section 3, Table 4) - Consistent with board policies JHCC/JHCC-AR and GBEB/GBEB-AR - Isolation space protocol Resources: Communicable Disease Guidance for Schools	SKPS Communicable Disease Management Plan: - QAM HST-M002-COVID-19 Pandemic Addendum - QAM HST-W008-Communicable Disease - QAM HST-M001 Pandemic Flu and Infectious Disease Applicable documents: How to set up an isolation room (reach out to building nurse) OHA Communicable Disease DHA/HST liaison for school and LPHA Guidance for Schools: Communicable Disease Guidance for Schools	Yes, meet the standard Outlined in QAMs in plan evidence.

OAR Requirements	Plan Considerations	Examples of Evidence/Resources	Plan Evidence	Meet?
(1)(b)(C) Implementing mitigation measures if cases warrant or if recommended by the Oregon Health Authority or LPHA.	How are school staff trained on the school's communicable disease mitigation measures? Are supplies available and located in or near where they may need to be utilized? What is the process implementing mitigation measures?	- School-level Communicable Disease Management Plan (Section 3, Table 4) Resources: Communicable Disease Guidance for Schools	SKPS Communicable Disease Management Plan: - QAM HST-M002-COVID-19 Pandemic Addendum - QAM HST-W008-Communicable Disease - QAM HST-M001 Pandemic Flu and Infectious Disease Applicable documents: OHA Communicable Disease DHA/HST liaison for school and LPHA Guidance for Schools: Communicable Disease Guidance for Schools	Yes, meets the standard 1. Outlined in QAMs in plan evidence.
(1)(b)(D) Identifying, understanding, and responding to the needs of students who are more likely to have severe disease outcomes or loss of access to education due to a communicable disease, and responding to those needs.	How did you identify those in your school that are disproportionately impacted by communicable disease? How do you monitor and determine when to respond to student's needs? Who is included in these conversations? What supports are available to students and how are they communicated to staff?	- School-level Communicable Disease Management Plan (Section 2, Table 3) - ODE Student Acuity Tool - Protocol or process that would be activated (established team to discuss needs in response to CD events) - Individuals with Disabilities Education Act (IDEA) or section 504 process Resources: - ODE school nurse resources webpage	SKPS Communicable Disease Management Plan: - QAM HST-M002-COVID-19 Pandemic Addendum - QAM HST-W008-Communicable Disease - QAM HST-M001 Pandemic Flu and Infectious Disease Applicable documents: OHA Communicable Disease DHA/HST liaison for school and LPHA Guidance for Schools: Communicable Disease Guidance for Schools	Yes, meet the standard 1. Outlined in QAMs in plan evidence.

OAR Requirements	Plan Considerations	Examples of Evidence/Resources	Plan Evidence	Meet?
(1)(b)(E) Responding to the mental health impacts of a communicable disease outbreak in the school.	How are the wellbeing and mental health needs of students and staff determined? What district or school resources will be utilized in supporting student and staff wellbeing and mental health during prevention, response, and recovery from incidents of a communicable disease outbreak? How are staff, students and families linked to culturally relevant health and mental health services and supports?	- Integrated Guidance/Student Investment Account Plan - School-level Communicable Disease Management Plan (Table 1) - Multi-tiered system of supports for mental health - Mental health community resource map Resources: - ODE mental health webpage	SKPS Communicable Disease Management Plan: - QAM HST-M002-COVID-19 Pandemic Addendum - QAM HST-W008-Communicable Disease - QAM HST-M001 Pandemic Flu and Infectious Disease Applicable documents: DHA/HST liaison for school and LPHA OHA Communicable Disease Guidance for Schools: Communicable Disease Guidance for Schools	Yes, meet the standard 1. Outlined in QAMs in plan evidence.
(1)(b)(F) Ensuring continuity of education for students who may miss school due to illness.	How are health and other related services for students who have an Individual Education Program (IEP) or 504 plan considered? What is the communication process to support family involvement during a student's absence?	- School-level Communicable Disease Management Plan (Section 2, Table 3) "Child find" IDEA or section 504 process	SKPS Communicable Disease Management Plan: - QAM HST-M002-COVID-19 Pandemic Addendum - QAM HST-W008-Communicable Disease - QAM HST-M001 Pandemic Flu and Infectious Disease Applicable documents: DHA/HST liaison for school and LPHA Student Services Department OHA Communicable Disease Guidance for Schools: Communicable Disease Guidance for Schools	Yes, meet the standard 1. Outlined in QAMs in plan evidence.

OAR Requirements	Plan Considerations	Examples of Evidence/Resources	Plan Evidence	Meet?
(1)(c) A district-to-school communication plan that includes a:	Where is the protocol located and how is it shared with school staff? Does the protocol ensure accuracy and efficiency?	Point of contact and duties found in the school-level Communicable Disease Management Plan (Section 1, Table 2)	SKPA Communicable Disease Management Plan located on QAM and district website: - QAM HST-M002-COVID-19 Pandemic Addendum - QAM HST-W008-Communicable Disease - QAM HST-M001 Pandemic Flu and Infectious Disease Applicable documents: DHA/HST liaison for school and LPHA OHA Communicable Disease Guidance for Schools: Communicable Disease Guidance for Schools	Yes, meet the standard 1. Outlined in QAMs in plan evidence.
(1)(c)(A) Point of contact to facilitate communication, maintain healthy operations, and respond to communicable disease questions from schools, state or local public health authorities, state or local regulatory agencies, students, families, and staff;	Does the point of contact have appropriate authority and knowledge to communicate to all parties accurately and efficiently? How is the point of contact assignment updated as needed with staffing changes? What is the process to make the point of contact aware of pertinent information?	Point of contact and duties found in the school-level Communicable Disease Management Plan (Section 1, Table 2)	DHA/HST liaison for school and LPHA SKPS Communicable Disease Management Plan: - QAM HST-M002-COVID-19 Pandemic Addendum - QAM HST-W008-Communicable Disease - QAM HST-M001 Pandemic Flu and Infectious Disease Applicable documents: OHA Communicable Disease Guidance for Schools: Communicable Disease Guidance for Schools	Yes, meet the standard 1. Outlined in QAMs in plan evidence.

OAR Requirements	Plan Considerations	Examples of Evidence/Resources	Plan Evidence	Meet?
(1)(c)(B) Protocol to provide all staff and families with contact information for the point of contact; and	How is this information shared each school year? Where is this information accessible to staff and families?	• Link on district webpage to point of contact information • Point of contact and duties found in the school-level Communicable Disease Management Plan (Section 1, Table 2)	SKPS Communicable Disease Management Plan: • QAM HST-M002-COVID-19 Pandemic Addendum • QAM HST-W008-Communicable Disease • QAM HST-M001 Pandemic Flu and Infectious Disease Applicable documents: OHA Communicable Disease Guidance for Schools: Communicable Disease Guidance for Schools	Yes, meet the standard: 5. Staff trained annually by mandatory trainings. 6. Updated annually by HST team and timely with any updates or change requirements. 7. Outlined in QAMs in plan evidence. 8. HST and NHL are available for support, DHA.
(1)(c)(C) Process to notify as soon as possible all families and other individuals if there has been a case of a restrictable disease as defined by OAR 333-019-0010 on the premises if advised by an LPHA or the OHA.	How does the school district ensure accurate and efficient communication is provided to families about cases as needed? Who is responsible?	• Point of contact and duties found in the school-level Communicable Disease Management Plan (Section 1, Table 2) • District/building-level communication tree and protocol	DHA/HST liaison for school and LPHA as well as families. SKPS Communicable Disease Management Plan: • QAM HST-M002-COVID-19 Pandemic Addendum • QAM HST-W008-Communicable Disease • QAM HST-M001 Pandemic Flu and Infectious Disease Applicable documents: OHA Communicable Disease Guidance for Schools: Communicable Disease Guidance for Schools	Yes, meet the standard 1. Outlined in QAMs in plan evidence.

Table III: School Health Services

OAR Requirements	Plan Considerations	Examples of Evidence/Resources	Plan Evidence	Meet?
(1) School districts, education service districts, and public charter schools shall develop, implement, and annually update a written prevention-oriented health services plan for all students. The plan must describe a health services program for all students at each facility that is owned or leased where students are present for regular programming. The health services plan will be created and maintained by the administration of each district and charter school serving students. Health services plans must include:				
(1)(a) Health care space that is appropriately supervised and adequately equipped for providing health care and administering medication or first aid.	What are the district requirements (location/supplies) for a health care space? Where is the health care space at building level? What protocols are in place to ensure supervision and supplies?	• Job description or assignment of duties that includes supervision of health care space • Evidence of training required for staff supervising health care space. (e.g., Medication Administration training) • District or building level health care and medication administration protocols Resources: • ODE medication administration webpage	DHA/HST liaison for school and LPHA as well as families. SKPS Communicable Disease Management Plan: • QAM HST-M002-COVID-19 Pandemic Addendum • QAM HST-W008-Communicable Disease • QAM HST-M001 Pandemic Flu and Infectious Disease Applicable documents: OHA Communicable Disease Guidance for Schools: Communicable Disease Guidance for Schools	Yes, meet the standard: 1. Staff trained annually by mandatory trainings. 2. Updated annually by HST team and timely with any updates or change requirements. 3. Outlined in QAMs in plan evidence. 4. HST and NHL available for support, DHA.

OAR Requirements	Plan Considerations	Examples of Evidence/Resources	Plan Evidence	Meet?
(1)(e) Services for all students, including those who are medically complex, medically fragile or nursing dependent, and those who have approved 504 plans, individual education program plans, and individualized health care plans or special health care needs as required by ORS 336.201 , 339.869 , OAR 581-021-0037 , 581-015-2040 , 581-015-2045 , and 851-045-0040 to 0060 ; and 851-047-0010 to 0030 .	How is student acuity assessed to determine nurse staffing as required by ORS 336.201? How are student needs identified and information shared with appropriate staff so that services may be provided? How are student services documented and information shared to support care coordination? Does the school district have sufficient staffing and resources for Nursing, Occupational Therapy, Physical Therapy, and Speech Language Pathology and Audiology?	• “Child find” IDEA or section 504 process • Process that outlines how students are identified, assessed, and receive services • Annual MC, MF, ND, and school nurse Full time Employees (FTE) data collection • Staffing plan that outlines health services providers and their assignments, including RN, LPN, and delegations, in relation to student population and need Resources: • ODE school nurse resources webpage	DHA/HST uses: 1. ODE Nursing Acuity Assessment Tool 2. Synergy 3. Nursing staffing requirements based of ODE School Nurse Annual Report 4. OT 5. PT 6. SLP/audiology	Yes, meet the standard

OAR Requirements	Plan Considerations	Examples of Evidence/Resources	Plan Evidence	Meet?
(1)(h) Process to assess and determine a student’s health services needs, including availability of a nurse to assess student nursing needs upon, during, and following enrollment with one or more new medical diagnose(s) impacting a student’s access to education, and implement the student’s individual health plan prior to attending as per 336.201 .	How are student health concerns identified during enrollment? How is information shared with nursing staff upon registration, including transition from and early intervention/early childhood special education (EI/ECSE)? What tool or process does the district have to assess student nursing and other licensed school health services needs? How is information shared and communication supported between licensed health staff, teachers, and other school staff?	- Registration process that captures medical diagnoses and health concerns “Child find” IDEA or section 504 process - Documentation of nursing assessment and delegation process - Delegation records - Student health records - School nurse assessment tool and process for development and implementation of student health care plans Resources: - ODE school nurse resources webpage - Oregon nurse practice act (Division 45 & Division 47)	SKPS QAMs: - Online registration in Synergy or written registration via Pupil Medical Record - Shared information by Synergy, registration, JSK, and communication with WESD nurse report. - Nursing documentation Synergy - Nursing assessment based on ODE Nursing Acuity Assessment Tool	Yes, meet the standard Outlined in QAMs in plan evidence.

OAR Requirements	Plan Considerations	Examples of Evidence/Resources	Plan Evidence	Meet?
(1)(j) Policy and procedures for medications, as per ORS 339.866 to 339.874 and OAR 581-021-0037 .	How are school building staff familiarized with medication administration policies and procedures? Are staffing resources and time allocated to medication administration training to ensure student needs are met throughout the school day? Are supplies, space, and storage available at each school building?	- Consistent with school board policies JHCD/JHCDA and JHCD/JHCDA-AR - Staff training documentation - District or building level medication administration protocol Resources: - ODE medication administration webpage	SKPS QAMs:  District's Medication Administration Manual (HST-M003) - HST QAMs	Yest, meet the standard: - Staff trained annually by mandatory trainings and recorded in employee ATL. HST trains staff on Basic Medication and all health-related trainings and are recorded in employee ALT. - Updated annually by HST team and timely with any updates or change requirements - Outlined in QAMs in plan evidence. - HST and NHL available for support, DHA.

OAR Requirements	Plan Considerations	Examples of Evidence/Resources	Plan Evidence	Meet?
(1)(k) Guidelines for the management of students who are medically complex, medically fragile, or nursing dependent as defined by ORS 336.201, including students with life-threatening food allergies and adrenal insufficiency while the student is in school, at a school-sponsored activity, under the supervision of school personnel, in before-school or after-school care programs on school-owned property, and in transit to or from school or school-sponsored activities. The guidelines must include:	What tool or process does the district have to assess student nursing needs? How are student health services coordinated while the student is in school, at a school-sponsored activity, under the supervision of school personnel, in before-school or after-school care programs on school-owned property, and in transit to or from school or school-sponsored activities? How is the provision of health services documented?	- Consistent with board policies JHCD/JHCDA, and JHCD/JHCDA-AR - IEP and 504 team processes and protocols - Protocol, tool, or process for documenting provision of health services to students. This could include documentation software, student health records, health room documentation, and training and delegation records. - School nurse assessment tool and process for development and implementation of student health care plans Resources: - ODE school nurse resources webpage - ODE school health services webpage	Nurse assessment with the Nursing assessment based on ODE Nursing Acuity Assessment Tool HST trains district staff based on student need and required by law mandatory trainings for student health and safety. Documented in Academy Teaching Learning (ATL)	Yes, meet the standard: - Staff trained annually by mandatory trainings. - Updated annually by HST team and timely with any updates or change requirements. - Outlined in QAMs in plan evidence. - HST and NHL available for support, DHA.

OAR Requirements	Plan Considerations	Examples of Evidence/Resources	Plan Evidence	Meet?
(1)(k)(A) Standards for the education and training of school personnel to manage students with life threatening allergies or adrenal insufficiency;	Does school district have standards for training in place for managing students with life threatening allergies and adrenal insufficiency? Are staffing resources and time allocated to training to ensure student needs are met throughout the school day? Are staff trained in consideration of coverage of student health needs across the school day (e.g., when riding the bus, field trips, extracurricular activities)?	- Consistent with board policies JHCD/JHCDA and JHCD/JHCDA-AR - Emergency medication training protocols - Training schedule - Records of staff trained Resources: - ODE medication administration webpage	SKPS QAMs:  District's Medication Administration Manual (HST-M003) - HST QAMs	Yes, meet the standard Outlined in QAMs in plan evidence.
(1)(k)(B) Procedures for responding to life-threatening medical conditions including allergic reactions or adrenal crisis;	Are staff trained and aware of their roles in responding to situations that may arise for students with life-threatening medical conditions? How are the necessary supplies and medications made available and staff made aware of their location? How do the procedures account for the student across their school day (e.g., when riding the bus, field trips, extracurricular activities)?	- Consistent with board policies JHCD/JHCDA and JHCD/JHCDA-AR - Student individual health plans (IHP) - Building Emergency Operations Plan Resources: - ODE medication administration webpage - ODE school safety and emergency management webpage	SKPS QAMs:  District's Medication Administration Manual (HST-M003) - HST QAMs - Medications locked with trained staff and medication audits completed by HST.	Yes, meet the standard Outlined in QAMs in plan evidence.

OAR Requirements	Plan Considerations	Examples of Evidence/Resources	Plan Evidence	Meet?
(1)(k)(C) A process for the development of an individualized health care plan for every medically complex, medically fragile, nursing dependent student, including students with a known life-threatening allergy and an individualized health care plan for every student for whom the school district has been given proper notice of a diagnosis of adrenal insufficiency per OAR 581-021-0037 ;	How does the district ensure that all complex, medically fragile, and nursing dependent students have an individualized health plan developed by a school nurse? How are nurses notified when a child needs to be assessed for nursing services (e.g., registration, new medical diagnosis)? How does nurse staffing level support student assessment during registration process?	• Protocol, tool, or process for documenting individual health plans (IHP). This could include documentation software, student health records, and training and delegation records. • School nurse assessment tool and process for development of student health care plans • IEP and 504 team processes and protocols	Nurse assessment with the Nursing assessment based on ODE Nursing Acuity Assessment Tool HMP plan in place based on nursing assessment, supervision by Coordinator. Nursing consult based on nursing caseload. Nurse Help Line (NHL) active all student contact hours with RN for support.	Yes, meet the standard 1. Outlined in QAMs and HST in plan evidence.
(1)(k)(D) Protocols for preventing exposures to allergens; and	How are protocols included in student individual health plans and communicated to school staff? What protocols does the district have in place to prevent exposure to allergens? How are protocols implemented and monitored?	• Consistent with board policies JHCD/JHCDA and JHCD/JHCDA-AR • Student individual health plans (IHP) • Building operations plan	Nurse assessment with the Nursing assessment based on ODE Nursing Acuity Assessment Tool HMP plan in place based on nursing assessment, supervision by Coordinator. HMP's in place, nurse trained onsite staff and Stock Epi program in place. Allergen free tables and Sodexo for food to reduce exposure. Nursing consult based on nursing caseload. Nurse Help Line (NHL) active all student contact hours with RN for support.	Yes, meet the standard 1. Outlined in QAMs in plan evidence.

OAR Requirements	Plan Considerations	Examples of Evidence/Resources	Plan Evidence	Meet?
(1)(k)(E) A process for determining if or when a student may self-carry prescription medication when the student has not been approved to self-administer medication as allowed by 581-021-0037 .	Where is the process documented and how is it communicated to staff and families? Who determines when a student may self-carry? How does the district ensure staff are aware of a student who self-carries medication and where it is located?	- Consistent with board policies JHCD/JHCDA and JHCD/JHCDA-AR - District medication administration protocol and forms Resources: - ODE medication administration webpage	Nurse assessment with the Nursing assessment based on ODE Nursing Acuity Assessment Tool HMP plan in place based on nursing assessment, supervision by Coordinator. HMP's in place, nurse trained onsite staff. QAM: HST -F009 Self Medication Agreement	Yes, meet the standard 1. Outlined in QAMs in plan evidence.

Table IV: District Processes, Systems & Policies

OAR Requirements	Plan Considerations	Examples of Evidence/Resources	Plan Evidence	Meet?
(1) School districts, education service districts, and public charter schools shall develop, implement, and annually update a written prevention-oriented health services plan for all students. The plan must describe a health services program for all students at each facility that is owned or leased where students are present for regular programming. The health services plan will be created and maintained by the administration of each district and charter school serving students. Health services plans must include:				
(1)(d) Health screening information, including required immunizations and TB certificates, when required by ORS 433.260 and 431.110 and OAR 333-019-0010 .	How are immunizations tracked, students identified, students excluded? (OAR 333-050-0050) How does the school district communicate immunization information to parents/guardians and OHA/LPHA?	- School-level Communicable Disease Management Plan (Section 3, Table 4) - Link to district immunization process that aligns with OHA requirements Resources: Communicable Disease Guidance for Schools OHA School Immunization page	Immunization HST QAMs: - HST-W002 Immunization Requirements - HST-W003 Immunization Report and Letter Instructions. Communication with OHA/LPHA by HST and SKPS immunization coordinator HST DHA role in LPHA liaison and mitigating measure within the school setting and maintaining policies. SKPA Communicable Disease Management Plan: - QAM HST-M002-COVID-19 Pandemic Addendum - QAM HST-W008-Communicable Disease - QAM HST-M001 Pandemic Flu and Infectious Disease Applicable documents: DHA/HST liaison for school and LPHA OHA Communicable Disease Guidance for Schools: Communicable Disease Guidance for Schools	Yes, meet the standard Outlined in QAMs in plan evidence.

OAR Requirements	Plan Considerations	Examples of Evidence/Resources	Plan Evidence	Meet?
(1)(f) Integration of school health services with school health education programs and coordination with health and social service agencies, public and private.	How are health education programs integrated with school health staff and services? When and how does the school district partner with public and private health organizations?	- Integrated Guidance/Student Investment Account Plan - Community resource and partnership mapping - Documentation of guest speaker contracts or MOUs	HST partners with local nursing schools to provide preceptorship. HST/DHA liaison with LPHA, medical providers, Medical Director Behavior Health team and Social Emotional Director to partner with mental health community supports. SKPS completes required health guidelines and Oregon Student Health Survey.	Yes, meet the standard
(1)(g) Hearing screening; and vision and dental screening as required by ORS 336.211 and 336.213 .	How are hearing, vision and dental screenings provided to students? What is the process to ensure all required students have vision and dental screening certificates on file?	- May reference dental screening collection - May reference vision screening grant participation including numbers of students screened - Dental, vision, and hearing screening records Resources: OAR 581-021-0017 (Dental Screening) OAR 581-021-0031 (Vision Screening) - ODE school health screenings webpage	 HST-F012-Dental Screening Certificate.pdf HST supports Dental and Vision. HST-W019 Dental Screening Certification, Collection, and Entry. HST supports. Vision consent or opt out options with HST and Lions Foundation support with HST for ODE required vision screenings and documented in Synergy through data import from spot screeners. Universal hearing screenings are completed by SLP team for ODE required students and documented in Synergy.	Yes, meet the standard 1. Outlined in QAMs in plan evidence

OAR Requirements	Plan Considerations	Examples of Evidence/Resources	Plan Evidence	Meet?
(1)(h)(i) Compliance with OR-OSHA Bloodborne Pathogens Standards for all persons who are assigned to job tasks which may put them at risk for exposure to body fluids per OAR 437-002-0360 .	What are the district's procedures and standards related to exposure to bloodborne pathogens? How is training provided to staff? How is staff training documented and monitored?	- Consistent with school board policies EBBA-AR, GBEB-AR, JHCC-AR - Staff training and professional development opportunities and tracking - Documentation of bloodborne pathogens training - Evidence of available supplies, response protocols Resources: Occupational Safety and Health Administration (OSHA) Bloodborne Pathogens Standards	Required in staff mandatory training documented with ATL, compliant with Oregon OSHA. QAM RISK-P007	Yes, meet the standard 1. Outlined in QAMs in plan evidence

Table V: Additional OAR Requirements

Sections 2-5 are not required components of the Prevention-Oriented Health Services Plan. These components may require districts to think through their established programs, policies, and protocols to meet the rule requirements.

OAR Requirements	Reflection Questions	District Links/Notes	Meet?
(2) School districts, education service districts, and charter schools shall ensure that nurses who provide health services to students are licensed to practice nursing by the Oregon State Board of Nursing (OSBN)	What are the district’s procedures to ensure nurses are licensed in Oregon and that licensure is current?	Human Resources verification process *HR tracking tool for licensed staff upon hire as well as continued tracking of expiration dates and updated licensure requirements. Munis system can track this system.	Yes, meet the standard.
(2)(a) School districts, education service districts, and charter schools may employ Licensed Practical Nurses (LPN) in alignment with LPN supervision requirements of OAR 851-045-0050 to 0060 .	Does the district employ LPNs, and do they operate under the LPN scope of practice in alignment with the Oregon Nurse Practice Act? Are LPNs supervised by a registered nurse (RN) or a Licensed Individual Practitioner (LIP)? Who in the district is responsible for ensuring supervision requirements are followed?	Yes, LPNs employed at SKPS. LPN’s supervised by assigned RN. LPN’s operate under the LPN scope of practice in alignment with the Oregon Nurse Practice Act. Health Services Coordinator responsible for ensuring supervision requirements and scope of practice followed.	Yes, meet the standard 1. Outlined in Nurse Orientation Manual

OAR Requirements	Reflection Questions	District Links/Notes	Meet?
(2)(b) Job descriptions and nursing delegation considerations shall reflect assignments complying with the Oregon State Board of Nursing Scope of Practice Administrative Rules for all levels of licensed providers, including standards for the evaluation and assessment of students, provision of services, medication administration, supervision of unlicensed staff and documentation of services provided per Division 47 .	Are job descriptions for district nurses in alignment with Division 47 of the Oregon Nurse Practice Act? Are nursing delegation considerations and assignments in alignment with Division 47 of the Oregon Nurse Practice Act? How are Nurse Practice Act requirements communicated to and supported by building administrators and supervisors?	DHC standards meet Division 47 and outlined in Synergy documentation system. • https://salkeiz.k12.or.us/careers/job-descriptions • Board of Nursing Division 47	Yes, meet the standard 1. Outlined in Nurse Orientation Manual
(2)(c) School districts, education service districts, and charter schools that employ Registered Nurses who are not certified by the Teacher Standards and Practices Commission as school nurses, shall not designate such personnel as "school nurse" by job title.	Do job titles, policies, and processes reflect the requirement that personnel must be certified as a school nurse by the Teachers Standards and Practices Commission (TSPC) to be called a “school nurse”? What is the alternative title for nurses not licensed by TSPC (e.g., district nurse)?	School Health Nurse Title (Health Nurse on job description)	Yes, meet the standard

OAR Requirements	Reflection Questions	District Links/Notes	Meet?
(3) Each school shall have, at a minimum, at least one staff member with a current first aid/CPR/AED card for every 60 students enrolled, as set by ORS 339.345 , and 342.664 and who are trained annually in the district and building emergency plans. Emergency planning will include the presence of at least one staff member with a current first aid/CPR/AED card for every 60 students for school-sponsored activities where students are present.	How does the district identify staff to be trained in first aid/CPR/AED and the district's emergency plan? How is training documented? Are staffing resources and time allocated to training to ensure needs are met throughout the school day? Does the emergency plan include first aid/CPR/AED training and appropriately trained staffing for school-sponsored activities?	Office managers track this for the school building in Munis and ATL to meet the requirements.	Yes, meet the standard
(4) Schools that contract or pay for health services must ensure services are comprehensive, medically accurate, and inclusive as defined by OAR 581-022-2050 .	What is the process for vetting contracted and paid services to ensure they are comprehensive, medically accurate, and inclusive to all students? Who is responsible for ensuring contracted and paid services meet requirements? How are contracted or paid services made aware of the requirements?	HR review of licensure. District contract in place with the service requested. Supervisor for the position to ensure contracted employees meet the job requirements and skill base. HR to review licensure accuracy. Supervisor of the contracted staff responsible for duties. HR for payment of services with supervisor to review work and hours. Contract in place with person and agency.	Yes, meet the standard

OAR Requirements	Reflection Questions	District Links/Notes	Meet?
(5) Each school building must have a written plan for response to medical emergencies; such plan should be articulated with general emergency plans for buildings and districts as required by OAR 581-022-2225 .	Does the building and district emergency plan consider a range of possible medical emergencies? Does the building and district emergency plan consider the potential medical needs of individual students in the building/district (e.g., availability of medication, required licensed medical staff or delegated staff)? How are staff made aware of staff roles in the building medical emergency plan and what training or practice is provided?	SKPS Emergency Plan QAM RISK-M007 Nurse Help Line supported by RN during student contact hours.	Yes, meet the standard Outlined in QAMs in plan evidence