

School-Level Communicable Disease Management Plan



DAYVILLE SCHOOL DISTRICT 16J

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<https://www.dayvilleschools.com>

School/District/Program Information

District or Education Service District Name and ID: _____ 2011 _____

School or Program Name: _____ Dayville School District _____

Contact Name and Title: _____ Dr. Davida Irving, Superintendent _____

Contact Phone: _____ 855-617-2412 _____ Contact Email: _____ irvingd@grantesd.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
<p>School District Communicable Disease Management Plan OAR 581-022-2220</p>	<p>OHA Communicable Disease Guidance for Schools (To Be Updated by 8/1 for 23-24): Communicable Disease Guidance for Schools COVID-19 Pandemic Addendum: https://www.oregon.gov/ode/students-and-family/healthsafety/Documents/commdisease.pdf Oregon School Nurse Association (OSNA) toolkit samples: https://schoolnursenet.nasn.org/oregonschoolnurses/resources/covid-19-toolkit-main-page Dayville Communicable Disease Plan - https://drive.google.com/file/d/13WK2AYF3vfFp4VWGbZP2p6x-JKp8LBDu/view</p>
<p>Exclusion Measures Exclusion of students and staff who are diagnosed with certain communicable diseases. OAR 333-019-0010</p>	<p>Investigation and control of disease. District policies and procedures incorporate a layered approach to identifying, monitoring, and mitigating outbreaks of communicable diseases including COVID-19 and works closely with LPHA. Applicable documents: OHA Communicable Disease Guidance for Schools: Communicable Disease Guidance for Schools <ul style="list-style-type: none"> o Symptom-Based Exclusion Guidelines o Transmission Routes o Prevention or Mitigation Measures o School Attendance Restrictions and Reporting Do Not Send Ill Student to School Letter link: https://drive.google.com/drive/folders/1qRLarskNdERUoOwGJwXkh6CMBoK4zda4 Exclusion guidelines: https://www.oregon.gov/ode/students-and-family/healthsafety/Documents/COVID-19%20Exclusion%20Summary%20Chart.pdf RSSL Guidance - https://www.oregon.gov/ode/students-and-family/healthsafety/Pages/RSSL-Guidance.aspx</p>

Plan Types	Hyperlinks and Descriptions
<p>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</p>	<p>Isolation spaces are required. Protocols are established in each district building for a health room and an isolation room for illness to separate people who have or may have a contagious disease from people who are not sick required by OAR 581-022-2220. District policies and procedures incorporate a layered approach to identifying, monitoring, and mitigating outbreaks of communicable diseases including COVID-19 and works closely with LPHA.</p> <p>What will the teacher need to do if they send a student to the office that ends up in the isolation room, for the class room. Do they close the class or disinfect the desk? ... But what if someone has a cold, or just allergies while another has COVID in that isolated room? Follow updated school protocols for cleaning, sanitizing, and disinfecting school spaces. Please be clear with all staff and students that being "in isolation" is NOT the same as being diagnosed with COVID-19. Isolation is emphasized in guidance but is NOT new to the pandemic: per state law, the school should have space so that any student who is sick can be isolated from the rest of the student body. If a student is diagnosed with COVID-19 within 14 days of being school, follow LPHA advice for contact tracing and follow-up for close contacts of that student.</p> <p>How can we find space for "isolation room"? Our schools are old; we don't have room. Consider using spaces opened up due to physical distancing requirement, such as teacher's lounge or direct therapy rooms; conference rooms. Consider adding ventilation and physical barriers in existing spaces.</p> <p>What is required for an isolation space? ... Do we need an isolation room per sick child? OR can you group children with similar symptoms into one isolation room? Updated 7/31/2020: See Section 1i. Measures noted throughout guidance for the entire school setting are also required for isolation space:</p> <ul style="list-style-type: none"> • physical distancing and/or physical barriers between individuals; • adequate ventilation; • face covering by all individuals age 5 and up; • face mask - medical grade - and other PPE as needed worn by the person providing care -- changed between contact with individuals; • hand hygiene (readily-available soap and water - ideally, sink and bathroom - or minimum 60% hand sanitizer) before and after contact, and whenever PPE is put on or removed • Guidance section 2f recommends "Furniture: Consider removing upholstered furniture and soft seating and replace with surfaces that can be wiped down and cleaned easily."

Plan Types	Hyperlinks and Descriptions
	<ul style="list-style-type: none"> Guidance also requires supervision and monitoring of the student in isolation, and measures to reduce stigma, fear, or anxiety (don't label the space "dirty"). <p>From OSNA colleagues: Also consider the need for students to walk from "clean" space to "isolation" space through public spaces; needing isolation spaces near exits if possible for pick-up; other measures to reduce exposure while student is symptomatic.</p> <p>What about plans if a parent doesn't pick up a sick child? Student will remain in isolation.</p> <p>Can isolated students be required to wear face covering?...Many of the isolation spaces are not near the office. So students will have to walk there. Should students be encouraged to wear masks when walking to that room? See sections 1h and 1i. Face covering for symptomatic individuals is recommended in current guidance "if it can be done safely."</p> <p>Updated 7/31/2020: Guidance version 3.0.1. requires all persons age 5 and up to wear face covering in the school building. Staff who interact with multiple cohorts could choose to wear more protection, such as medical-grade face mask and additional face shield, to reduce their own risk. Staff who provide "direct contact care and monitoring of staff/students displaying symptoms" (p.31) should wear medical-grade face masks and other PPE appropriate to the situation.</p> <p>How often should we clean isolation space? If we use shower curtains or other barriers, do they need wiped down between students? Updated 7/31/2020: The briefest summary of guidance is to clean after contact with a symptomatic individual, and at least daily. Guidance section 1d requires "Cleaning and wiping surfaces (e.g., desks, door handles, etc.) must be maintained between multiple student uses, even in the same cohort." Guidance section 2j recommends "Clean, sanitize, and disinfect frequently touched surfaces (e.g., playground equipment, door handles, sink handles, drinking fountains, transport vehicles) and shared objects (e.g., toys, games, art supplies) between uses multiple times per day. Maintain clean and disinfected (CDC guidance) environments, including classrooms, cafeteria settings, restrooms, and playgrounds." Guidance section 2f recommends "Furniture: Consider removing upholstered furniture and soft seating and replace with surfaces that can be wiped down and cleaned easily."</p> <p>What about video monitoring of the isolation room? ... Can video baby monitors be used as a surveillance method of isolation? We have very limited staff. Consider both safety and confidentiality. If "very limited staff" are monitoring, the video is not increasing safety. Consider district privacy policies before video recording students.</p> <p>Do schools need more than one isolation space? ... What if screening on arrival leads to 5-10 students</p>

Plan Types	Hyperlinks and Descriptions
Mental Health and Wellbeing Plans such as those prepared for Student Investment Account (optional)	<i>Identify existing district or school plans and tools that can be utilized in supporting student and staff wellbeing and mental health during prevention, response, and recovery from incidents of a communicable disease outbreak.</i> Link to: https://www.oregon.gov/ode/students-and-family/healthsafety/Pages/Planning-for-the-2022-23-School-Year.aspx
Additional documents reference here:	CDC COVID Community Levels OSNA COVID Toolkit



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	<ul style="list-style-type: none"> 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. 	Dr. Davida Irving	same

School planning team members	Responsibilities:	Primary Contact (Name/Title):	Alternative Contact:
	<ul style="list-style-type: none"> Acts as key spokesperson to communicate health-related matters within school community members, health partners, and other local partners. 		
<p>School Safety Team Representative <i>(or staff member knowledgeable about risks within a school, emergency response, or operations planning)</i></p>	<ul style="list-style-type: none"> 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. 	Dr. Davida Irving	same
<p>Health Representative <i>(health aid, administrator, school/district nurse, ESD support)</i></p>	<ul style="list-style-type: none"> 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. 	Dr. Davida Irving	same
<p>School Support Staff as needed <i>(transportation, food service, maintenance/custodial)</i></p>	<ul style="list-style-type: none"> Advises on prevention/response procedures that are required to maintain student services. 	Lori Smith	Dr. Davida Irving

School planning team members	Responsibilities:	Primary Contact (Name/Title):	Alternative Contact:
<p>Communications Lead <i>(staff member responsible for ensuring internal/external messaging is completed)</i></p>	<ul style="list-style-type: none"> 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. 	Dr. Davida Irving	same
<p>District Level Leadership Support <i>(staff member in which to consult surrounding a communicable disease event)</i></p>	<ul style="list-style-type: none"> 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. 	Dr. Davida Irving	same
<p>Main Contact within Local Public Health Authority (LPHA)</p>	<ul style="list-style-type: none"> 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. 	Dr. Davida Irving	same
<p>Others as identified by team</p>			



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.

Table 3.

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.	<ul style="list-style-type: none"> • Online support • Send home homework and notes and make available online • Provide tutoring
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.	<ul style="list-style-type: none"> • By Aug. 31, 2023, Dr. Irving will utilize registration information and previous academic records to identify students who experience barriers to their education or who are disproportionately impacted by COVID-19 (e.g., students at increased risk of severe COVID-19 illness due to cognitive or developmental function, students at increased risk of negative impact/complications related to immunocompromised health status, etc.). Teachers will be asked to identify additional students in their classroom who may be disproportionately impacted. • By Oct. 15, 2023, Dr. Irving in partnership with teachers will complete the empathy interview processes to understand student barriers within all populations of students in the school. • By Oct. 31, 2023, Dr. Irving will use the records review and empathy review information to design strategies that will remove barriers and provide additional support to students identified as needing additional support.
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.	<ul style="list-style-type: none"> • By Sept. 1, 2023, teachers will reach out to students’ family to begin the process of developing a plan. For students who are identified later in the process, teachers will connect with families during conferences or by special appointment. • By Oct. 1, 2023, Mr. Aurora in partnership with a student’s guidance counselor and teacher will develop a plan in consultation with the student and family based on the unique needs of each student. The plan will be written and reviewed periodically throughout the year to ensure that it continues to fulfil the support needs.
Describe what support, training or logistics need to be in place to ensure that the named strategies are understood, implemented, and monitored successfully.	<p>All school staff will continue professional development to assist in this work, and to implement needed support for students disproportionately impacted, historically underserved or at higher risk of negative impacts or complications related to COVID-19.</p> <ul style="list-style-type: none"> • Each quarter (Oct. 7, Jan. 13, & April 7) one professional development opportunity will be dedicated to professional development that focuses on a specific educational barrier and best practice strategies for our historically underserved populations. <p>OHA/ODE Recommendation(s) Response:</p>

OHA/ODE Recommendation(s)	Response:
	<ul style="list-style-type: none"> Dr. Irving in partnership with the teacher, will review the progress of identified students once a quarter (Nov. 11, Feb. 10, & April 28) to ensure the implemented support is achieving the desired result. That evaluation will be shared with students and families.



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	<p><i>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.</i></p>
Face Coverings	<p>As the school transitions out of periods of high transmission slowly returning to baseline:</p> <ul style="list-style-type: none"> • For 10 school days after the outbreak subsides or the COVID-19 Community Level is categorized as low, • Dr. Irving will continue to strongly recommend the use of face coverings indoors until the outbreak subsides. Signage will be posted at the front door, and face coverings will remain free and available. Per OAR 333-019-1011 face coverings are required in health care spaces. These spaces within the school are designated by signage. • health care spaces. These spaces within the school are designated by signage. <p>Dr. Irving will send a communication to families recommending students and staff continue to wear face coverings to reduce the risk of spreading disease. Wearing a well-fitting mask consistently and correctly reduces the risk of spreading the virus that causes COVID-19. The messages will reiterate at a medium COVID-19 Community Level, people who are immunocompromised or at risk for getting very sick with COVID-19 should talk to their healthcare provider about the need to wear a mask and take other precautions (for example, avoiding high-risk activities).</p>
Isolation	<p>Per OAR 581-022-2220 schools must maintain space which isolates the sick or injured.</p>
Symptom Screening	<p>As the school transitions out of periods of high transmission slowly returning to baseline, communication with families in our weekly newsletter key messages will be reinforced:</p> <ul style="list-style-type: none"> • Watch for symptoms of infectious disease, including COVID-19, influenza, respiratory syncytial virus (RSV), and gastrointestinal infections. If symptoms are present students should stay home and get tested for COVID-19. • Staying home when sick can lower the risk of spreading infectious diseases, including the virus that causes COVID-19, to other people. <p>The school has adopted flexible, non-punitive, and supportive policies and practices, designed to encourage sick individuals to stay home without negative impacts.</p>
COVID-19 Diagnostic Testing	<p><i>OHA offers schools a diagnostic testing program to all public and private K-12 schools in Oregon. Please indicate whether your school will offer diagnostic testing.</i> As the school transitions out of periods of high transmission slowly returning to baseline:</p> <ul style="list-style-type: none"> • Diagnostic testing will continue to be available to individuals with symptoms or exposure to COVID-19. This includes a test to stay protocol for students or staff at increased risk of severe COVID-19 and at the direction of local public health. This essential access to free testing can help diagnose COVID-19 infection early. <p>Screening testing will also continue to be available to unvaccinated individuals without symptoms or exposure to COVID-19 and includes weekly testing. Unvaccinated staff or students who enroll will be tested weekly and all results are confidential.</p>
Airflow and Circulation	<p>As the school transitions out of periods of high transmission slowly returning to baseline: After the outbreak subsides or the COVID-19 Community Level is categorized as low, Lonnie Dickens will continue with monthly service checks of the HVAC system to optimize ventilation. Checks will ensure the system is meeting code requirements, providing acceptable indoor air OHA/ODE Recommendation(s) Layered Health and Safety Measures</p> <ul style="list-style-type: none"> • After the COVID-19 Community Level is categorized as low, activities where the school

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?
	community comes together can be held indoors.
Cohorting	Dayville School District's small class sizes and limited instruction space make cohorting a challenge. All students grades K-6 and all students grades 7-12 eat at the same time in the cafeteria as two separate groups. Grades 7-12 share common passing times as well as interact in classrooms and extra-curricular activities. Cohorting will be accomplished to the maximum extent possible.
Physical Distancing	As the school transitions out of periods of high transmission slowly returning to baseline, the school will continue to support and promote physical distancing by: <ul style="list-style-type: none"> Striving for at least 3 feet between students to the extent possible by continuing to arrange learning and other spaces to allow and encourage distancing. Minimize time standing in lines, including marking spaces on floor, or encouraging one-way traffic flow in constrained spaces
Hand Washing	As the school transitions out of periods of high transmission slowly returning to baseline, the school will monitor and reinforce these behaviors. Handwashing will be done before and after meal or snack times and after recess and after using the bathroom. <ul style="list-style-type: none"> After the outbreak subsides, teachers will continue to monitor and reinforce proper handwashing and covering coughs and sneezes to lower the risk of spreading viruses. Five days after the outbreak subsides, Lonnie Dickens will restock every classroom with adequate handwashing supplies, including soap and water to all school sinks and classrooms
Cleaning and Disinfection	As the school transitions out of periods of high transmission slowly returning to baseline: <ul style="list-style-type: none"> After the outbreak subsides or the COVID-19 Community Level is categorized as low, Lonnie Dickens and school custodial staff will continue to ensure clean surfaces (e.g., door handles, sink handles, drinking fountains, transport vehicles) daily to reduce the risk of germs spreading by touching surfaces. Within 24 hours of when a classroom has had a sick person or someone who tested positive for COVID-19, the space will be cleaned and disinfected.
Training and Public Health Education	As the school transitions out of periods of high transmission slowly returning to baseline: <ul style="list-style-type: none"> After the outbreak subsides or the COVID-19 Community Level is categorized as low, Lonnie Dickens and school custodial staff will continue to ensure clean surfaces (e.g., door handles, sink handles, drinking fountains, transport vehicles) daily to reduce the risk of germs spreading by touching surfaces. Within 24 hours of when a classroom has had a sick person or someone who tested positive for COVID-19, the space will be cleaned and disinfected.

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.

INSERT THE LINK where this plan is available for public viewing. **Plan is available at** <https://www.dayvilleschools.com/communicable-disease>

Date Last Updated: **August 25, 2023**

Date Last Practiced: **n/a**