

COVID-19 Specific Communicable Disease Management Plan

School District: South Umpqua #19

Consulting RN, School Nurse, or Medical Professional: Dr. Bob Dannenhoffer

Updates and Review:

All schools should use the Ready Schools, Safe Learners Guidance and consider the language in that document to be the most up-to-date. The plan below is only a template and not required for use.

Plan Component	Revisions	Recommendations and Considerations
A protocol to notify the local public health authority (LPHA) of 1. Any confirmed COVID-19 case(s) among students or staff. 2. Any cluster of illness among students or staff (2 or more).	The protocol we follow for notifying the local public health authority of confirmed cases or clusters of illness is located in Appendix A. Andy Johnson, our Director of Student Achievement, is the person who contacts our LPHA. Douglas Public Health Network, Kim Gandy Cell #541-817-4612 Office #541-440-3571 or Vanessa Becker Cell # 541-817-6552	If anyone who has entered school is diagnosed with COVID-19, report to and consult with the LPHA regarding cleaning and possible classroom or program closure (<u>LPHA directory</u>).
Protocol for screening students and staff upon entry to school each day.	Please see Appendix B, Pandemic Plan for screening protocols.	Schools may consider collecting information about existing conditions that cause coughing on intake forms. Involve school nurses and School Based Health Centers (SBHCs) in development of protocols and assessment of symptoms when available. Consider connecting with School Nurses and other contracted RNs where available. Screening protocol must recognize that students and staff who have conditions that cause chronic symptoms (e.g., asthma, allergies, etc.) should not be automatically excluded from school. Cough is an exception: Staff or students with a chronic or baseline cough that has

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Plan Component	Required	Recommendations and Considerations
		worsened or is not well-controlled with medication should 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. For students or staff with other symptoms, see guidance from the Oregon Department of Education and the Oregon Health Authority.
Communication protocol for COVID-19 cases.	Please see Appendix A for our list of people responsible for communication. Kate McLaughlin, Superintendent, notifies the public and staff of any positive cases. Andy Johnson, Director of Student Achievement, helps with notification of district staff and contacts the DPHN.	Parents of all students who were exposed to a person diagnosed with COVID-19, and all exposed adults, should be notified within 24 hours and advised to quarantine at home for 14 days following exposure and to seek testing should symptoms develop, or as directed by public health. Consult with LPHA officials on what constitutes “exposure”.
Daily logs for each stable group or each individual student to support contact tracing of cases if necessary.	Please see Appendix C for our daily logs.	Record keeping protocol for daily logs used in contact tracing to assist the LPHA as needed
Record of anyone entering the facility.	Please see Appendix C for our daily logs.	

Isolation Measures

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Plan Component	Required	Recommendations and Considerations
Protocol to restrict any potentially sick persons from physical contact with others.	Please see Appendix D for this attestation.	Anyone developing cough, fever, chills, shortness of breath, difficulty breathing, or sore throat while at school must be given a face covering to wear, isolated from others immediately; and sent home as soon as possible. Anyone with these symptoms must remain home for at least 10 days after illness onset and 72 hours after fever is gone, without use of fever reducing medicine, and other symptoms are improving. Alternatively, a person may return to school after receiving two negative COVID-19 molecular tests (PCR) at least 24 hours apart. Involve school nurses and school-based health centers (SBHCs) in development of protocols and assessment of symptoms, when available.

Environmental Management

Plan Component	Required	Recommendations and Considerations
Ensure hand hygiene on entry to school every day: wash with soap and water for 20 seconds or use an alcohol-based hand sanitizer with 60-95% alcohol.	Please see appendix B for this information.	

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Plan Component	Required	Recommendations and Considerations
Hand washing is required before every meal and after restroom use.		
Appropriate cleaning and contingency plans for routine infection prevention, and for closing cohort, schools, or districts based on identified COVID-19 cases and in compliance with public health and CDC guidelines.	Please see appendix B for this information.	Routine cleaning and disinfecting should follow <u>CDC cleaning and disinfecting guidance</u> , and includes cleaning classrooms between groups, playground equipment between groups, restroom door or faucet handles, etc.

Physical Distancing and Protection

Plan Component	Required	Recommendations and Considerations
Maintain three feet of physical distance between people.	Principals have created cohorts and plans for minimizing interactions between cohorts in each building. We are also requiring seating charts to minimize quarantine numbers. Teachers are responsible for maintaining physical distancing in their classrooms. Hallways are marked with directional tape to enhance physical distancing. Meals are either in classroom or in cohorts with seating charts. Adults monitor recess and work with students on appropriate physical distancing.	Minimize time standing in hallways; consider marking spaces on floor, one-way travel in constrained spaces, staggered passing times, or other measures to prevent congregation and congestion in common spaces. Schedule modifications: consider ways to limit the number of students in the building (rotating cohorts by half days or full days). Consider usable classroom space in making calculations. Establish cohorts of students using the same classrooms with the same teachers each day. Students should remain in one classroom environment for the duration of the learning day, unless this would severely impact educational needs. Teachers of specific academic content areas may rotate through student cohorts where feasible. In high schools or other settings where cohorts must change to allow

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Plan Component	Required	Recommendations and Considerations
		individual curricula, maintain physical distancing and disinfect desks and high-touch surfaces between groups. Restrict interaction between students cohorts; e.g. access to restrooms, activities, common areas.
Face coverings for staff and students.	“Masks Required” signs are visible in multiple areas in all buildings. Masking requirements are regularly communicated through a variety of communication methods including e-mail, Facebook posts, letters to families, conversations with staff and public. Staff are informed by principals at the beginning of the school year and with regular updates.	See ODE/OHA guidance on face covering, shields, and masks. Staff who interact with individual students in less than six feet must wear masks. Staff who support personal care, feeding, and any 1:1 sustained contact with a student. Staff who interact with multiple cohorts should wear a face covering in accordance with CDC guidelines. Students in grades 6-12 years and over may wear face coverings if they are able to wear them appropriately (i.e., not touch the face covering, change it if visibly soiled, etc.). If face coverings are worn, they should be washed daily or a new covering worn daily. Note: Students who cannot reliably wear face covering without constant supervision (e.g., some students who experience disability) should not wear a face covering; face coverings must never be worn by children while sleeping. Provide disposable face coverings and instructions on appropriate face covering use to students, parents, families and staff (available on OHA website.)

- Current COVID19 outbreak or conditions in your local community support you moving forward with your plan, subject to changing conditions.

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I certify that I have received, carefully reviewed [School's] communicable disease management plan, including all links and attachments, and I agree to work with them on ongoing COVID-19 mitigation efforts. [Electronic LPHA signature:] (We have not reviewed this plan this year with our LPHA due to the high volume of Covid cases in our county. Their staff is overwhelmed and we do not want to add to their work burden. However, we did review our plan with them last year and our Superintendent meets regularly with the head of the Health Network).

Attestation to truthfulness of the plan: [Electronic District signature: Andy Johnson]

Appendix A

SUSD COVID-19 Exposure/Quarantine Checklist

Student/Staff Member with Positive Test:

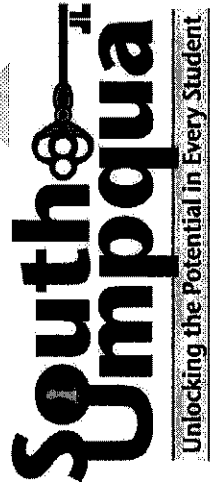
Grade Level(s) of Cohort:

<i>Task</i>	<i>Date/Time Completed</i>	<i>Who Completed</i>
Notify Kate, Andy, Tabitha that a positive exposure/test has occurred		
Confirm Positive Exposure with DPHN		Andy, Kate, Tabitha
Notify Department Leads - Principals, Supervisors - Joe, Claire, Diane - Wendy @ First Student		Andy, Kate, Tabitha
Principal/Supervisor Identifies Cohort and Contacts Review Contact Tracing Logs		Principal, Supervisor
Notify Board Chair – Jeff Johnson via text or call		Kate
Email School Board Members		Kate
Email All Staff with Information		Kate/Tabitha
Public Communication (Facebook)		Kate
Principal/Supervisor contacts all staff who are direct contacts, provides quarantine information - Notify Kate as soon as all required staff are notified - Kate will send follow up email to all staff		Principal, Supervisor
School Team contacts all students/families who are direct contacts, provides quarantine information (ask parents who signed release forms if they want students tested before they leave school) Notify Kate & Andy as soon as all required students/families are notified		School Team
Send list of staff and student contacts to Vanessa at DPHN, Andy		Principal, Supervisor
Send list of staff contacts to Tabitha in HR so she can contact staff regarding leave options		Principal, Supervisor
Issue press release		Kate

Disinfect/Sanitize/Ozone		Joe and Team
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Appendix B

South Umpqua School District #19



Guidance for Covid-19 and Other Viruses

Rev. July 7, 2020

Introduction

The purpose of this document is to provide guidance on the actions and interventions to help slow the spread of respiratory illnesses, both seasonal and pandemic or novel viruses. As such, this document may be modified to meet changing levels of a pandemic threat.

Seasonal Respiratory Illness and Seasonal Influenza

Seasonal Respiratory Illness

Several viruses routinely circulate in our community to cause upper viral respiratory illnesses. The “common cold” is caused by rhinoviruses, adenoviruses, and coronaviruses. The symptoms of these seasonal illnesses may vary in the severity, but include cough, low-grade fever, and sore throat.

Seasonal Influenza

Influenza or more commonly referred to as “flu” is a contagious respiratory illness caused by influenza viruses. There are two main types of influenza “flu” virus: Types A and B. These influenza viruses A and B routinely spread in people (human influenza viruses) and are responsible for seasonal flu outbreaks each year. Influenza can cause mild to severe illness and serious outcomes of flu infection can result in hospitalization or death. Some people, such as very young children, older people, and people with weak immune systems or underlying health conditions, are at high risk of severe flu complications. Routine symptoms associated with “flu” include fever, cough, sore throat, runny nose, muscle aches, headaches, fatigue, and sometimes vomiting.

Novel, Variant and Pandemic Viruses

Novel viruses refer to a virus not previously identified, it may be a new strain or a strain that has not previously infected people. A variant virus is a virus that historically has infected animals but begins to infect people.

A pandemic virus is one which spreads quickly between people, causing illness worldwide, most people will lack immunity to these viruses. The most common viruses associated with novel and pandemic outbreaks are influenza A and human coronavirus. The pandemic flu can be more severe, causing more deaths than the seasonal flu. Because it is a new virus, a vaccine may not be available right away and could overwhelm normal operations of communities.

Basic Definitions

Infectious disease terms are often mistakenly used interchangeably. Knowing the difference is important to help you better understand public health news and appropriate public health responses.

- ♦ **ENDEMIC** is something that belongs to a particular people or country. Endemics can also be a constant presence in a specific area, but in relatively low frequency, such as chicken pox in the United States and Malaria in parts of Africa.
- ♦ **AN OUTBREAK** is a greater-than anticipated increase in the number of endemic cases. It can also be a single case in a new area. If it is not quickly controlled, an outbreak can become an epidemic (example 2019 outbreak of measles in Washington State and New York city).
- ♦ **AN EPIDEMIC** is a disease that affects a large number of people within a community, population, or region, it actively spreads, and new cases of the disease substantially exceed

- ♦ what is expected (example when COVID-19 broke out in Wuhan, China it was an epidemic).
- ♦ **A PANDEMIC** is an epidemic that's spread over multiple countries or continents (such as the COVID-19).

This guidance provides requirements and recommendations based on Oregon Health Authority, CDC, and Oregon Department of Education guidance and recommendations. It is aimed at limiting the novel coronavirus in key environments where it can spread. These recommendations may be changed as/if additional information becomes available.

COVID-19 is mostly spread by respiratory droplets released when people talk, cough, or sneeze. It is thought that the virus may spread to hands from a contaminated surface and then touching the nose, mouth, or eyes. In addition, COVID-19 may be spread by people who are not showing symptoms. Therefore, personal practices (such as handwashing, staying home when sick) and environmental cleaning and disinfection are important principals covered in this document. There are a number of actions which can be taken to help lower the risk of COVID-19 exposure and spread during school sessions and activities.

Signage will be posted at all school entrances requesting that people who have been symptomatic with fever and/or cough not enter.

Schools are required to enforce that staff and students stay home if:

- ♦ They have tested positive for or are showing COVID-19 symptoms or if anyone in their home or community living spaces has COVID-19, until they meet criteria for return.
- ♦ They have recently had close contact with a person with Covid-19, until they meet criteria for return.

Symptom screening will be conducted of any person entering the building, this includes students, staff, family members and visitors.

In addition to Covid-19 symptoms, students should be excluded from school for signs of other infectious diseases, per existing school policies and protocols (see OHA/ODE Communicable Disease Guidance).

SCREENING FLOW CHART

Screen for COVID-19 Symptoms	
NO FLAGS -----	Proceed to School
Exposure, No symptoms --	Cannot go to School – Home for 14 days since exposure
Diagnosis, No symptoms --	Cannot go to School – Home for 10 days since first positive COVID-19 test.
At least 1 symptom --	Cannot go to school – Home until: ♦ 10 days since first symptoms ♦ No fever for 3 days (without fever medicine) ♦ 3 days of symptom improvement, including coughing and shortness of breath

(Verbal) Symptom Screening Checklist

The person conducting screenings should maintain a six-foot distance while asking questions. If an elementary child is being dropped off questions may be asked of the person accompanying the child. If the child is unaccompanied or arrives via school bus, the person conducting the screening will use their best judgement on determining if the child can respond on their own.



1. Do you have any of these symptoms?

- ☐ Fever
- ☐ Chills
- ☐ Shortness of Breath or difficulty breathing
- ☐ New cough
- ☐ New loss of taste or smell

If the person has any of these symptoms, they should go home, stay away from other people, and call their health care provider.

2. Have you had close contact (within 6 feet for at least 15 minutes) in the last 14 days with someone diagnosed with COVID-19, or has any health department or health care provider been in contact with you and advised you to quarantine?

- ☐ Yes – The person should not be at school. The person can return 14 days after the last time they had close contact with someone with COVID-19, or as listed below.
- ☐ No – The person can be at school if the person is not experiencing symptoms.

3. Since the last time you were at school, have you or anyone in your home or community living space been diagnosed with Covid-19?

- ☐ Yes | If a person is diagnosed with COVID-19 based on a test, their symptoms, or does not get a COVID-19 test but has had symptoms, they should not be at school and should stay at home until they meet the criteria below.
- ☐ No

(Visual) Symptom Screening Checklist for Students

School personnel will conduct visual symptom screening upon student arrival at school, and continue monitoring students, as necessary, throughout the day for any symptoms.

Refer to the Verbal Symptom Screening Checklist for any students with visible symptoms.



Anyone showing symptoms of COVID-19 or who may have been exposed to COVID-19 should not be at school.

Does the student appear to have:

- ☐ Fever
- ☐ Chills
- ☐ Shortness of Breath or difficulty breathing
- ☐ New cough
- ☐ Change in energy level (lethargic)
- ☐ Flushed or pale cheeks

A person can return to school when a family member can ensure that they can answer **YES to ALL three questions:**

- ☐ Has it been at least 10 days since the person first had symptoms?
- ☐ Has it been at least 3 days since the person had a fever (without using fever reducing medicine)?
- ☐ Has it been at least 3 days since the person's symptoms have improved, including cough and shortness of breath?

If a person has had a negative COVID-19 tests, they can return to school once there is no fever without the use of fever-reducing medicines and they have felt well for 24 hours.

If a person has been diagnosed with COVID-19 but does not have symptoms, they should remain out of school until 10 days have passed since the date of their first positive COVID-19 diagnostic test, assuming they have not subsequently developed symptoms since their positive test.

If a person has been determined to have been in close contact with someone diagnosed with COVID-19, they should remain out of school for 14 days since the last known contact, unless they test positive. In which case, criteria above would apply. They must complete the full 14 days of quarantine even if they test negative.

Parent/Guardian Attestation

Student's First Name: _____ Student's Last Name: _____
Parent/Guardian First Name: _____ Parent/Guardian Last Name: _____

1. Has your student had close contact (within 6 feet for at least 15 minutes) in the last 14 days with someone diagnosed with COVID-19, or has any health department or health care provider been in contact with you and advised you to quarantine?

- ☐ Yes – The person should not be at school. The person can return 14 days after the last time they had close contact with someone with COVID-19, or as listed below.
- ☐ No – The person can be at school if the person is not experiencing symptoms.

2. Does your students have any of these symptoms?

- ☐ Fever
- ☐ Chills
- ☐ Shortness of Breath or difficulty breathing
- ☐ New cough
- ☐ New loss of taste or smell

If the person has any of these symptoms, they should go home, stay away from other people, and call their health care provider.

3. Since they were last at school, has your child been diagnosed with COVID-19?

- ☐ Yes | If a person is diagnosed with COVID-19 based on a test, their symptoms, or does not get a COVID-19 test but has had symptoms, they should not be at school and should stay at home until they meet the criteria below.
- ☐ No

A person can return to school when a family member can ensure that they can answer **YES to ALL three questions:**

- ☐ Has it been at least 10 days since the person first had symptoms?
- ☐ Has it been at least 3 days since the person had a fever (without using fever reducing medicine)?
- ☐ Has it been at least 3 days since the person's symptoms have improved, including cough and shortness of breath?

If a person has had a negative COVID-19 tests, they can return to school once there is no fever without the use of fever-reducing medicines and they have felt well for 24 hours.

If a person has been diagnosed with COVID-19 but does not have symptoms, they should remain out of school until 10 days have passed since the date of their first positive COVID-19 diagnostic test, assuming they have not subsequently developed symptoms since their positive test.

If a person has been determined to have been in close contact with someone diagnosed with COVID-19, they should remain out of school for 14 days since the last known contact, unless they test positive. In which case, criteria above would apply. They must complete the full 14 days of quarantine even if they test negative.

I attest that the above information is true to the best of my knowledge as of:

_____/_____/_____, ____:____ AM PM Signature: _____
MONTH DAY YEAR

POSITIVE SCREENING PROTOCOL: At School or Transportation Entry

	Exposure, No symptoms	Diagnosis, No symptoms	SYMPTOMS
WHO	Staff or Student shares they were exposed to someone with COVID-19 within the last 2 weeks but is NOT symptomatic	Staff or Student shares they were diagnosed with COVID-19 less than 10 days ago, but is NOT symptomatic	Staff or Student presents with at least one of the following COVID-19 symptoms: * Fever * Chills * New cough * Shortness of Breath or difficulty breathing * New loss of taste or smell
Staff or Student: A designated individual (e.g. parent or guardian) is PRESENT to immediately support student to get home or to medical care safely	☐ Immediately go home. ☐ Notify local health dept. and follow their procedures. ☐ Can return to school once it has been 14 days since last close contact, if they do not develop symptoms. ☐ Student and staff can participate in remote learning and teaching (if applicable) while out.	☐ Immediately go home. ☐ Notify local health dept. and follow their procedures. ☐ May return to school 10 days since first positive COVID-19 test, if they do not develop symptoms. ☐ Student and staff can participate in remote learning and teaching (if applicable) while out.	☐ Immediately go home. ☐ Notify Local Health Dept. and follow their procedures. ☐ If a person is diagnosed with COVID-19 based on a test, their symptoms, or does not get at COVID-19 tests but has had symptoms, they can return to school when: * At least 3 days (72 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications; and * Improvement in respiratory symptoms (e.g. cough, shortness of breath); and * At least 10 days have passed since symptoms first appeared. ☐ If a person has had a negative COVID-19 test, they can return to school once there is no fever without the use of fever-reducing medicines and they have felt well for 24 hours. ☐ Student and staff can participate in remote learning and teacher (if applicable).
Student: A designated individual (e.g. parent or guardian) is NOT PRESENT to immediately support student to get home or to medical care safely.	☐ If appropriate for that student; they should wear a face covering. ☐ Separate student in designated area with supervision by an adult wearing a face covering, standing at least 6 feet away. ☐ Enact plan to safely send student home as quickly as possible. ☐ Notify local health department and follow their procedures. ☐ Can return to school once it has been 14 days since last close contact, if they do not develop symptoms. ☐ Participate in remote learning while out.	☐ If appropriate for that student; they should wear a face covering. ☐ Isolate student in designated area with supervision by an adult wearing a face covering, standing at least 6 feet away. ☐ Enact plan to get student home safely and cannot be through school transportation. ☐ Notify local health department and follow their procedures. ☐ If a person is diagnosed with COVID-19 based on a test, their symptoms, or does not get at COVID-19 tests but has had symptoms, they can return to school when: * At least 3 days (72 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications; and * Improvement in respiratory symptoms (e.g. cough, shortness of breath); and * At least 10 days have passed since symptoms first appeared. ☐ If a person has had a negative COVID-19 test, they can return to school once there is no fever without the use of fever-reducing medicines and they have felt well for 24 hours. ☐ Student and staff can participate in remote learning and teacher (if applicable).	☐ If appropriate for that student; they should wear a face covering. ☐ Isolate student in designated area with supervision by an adult wearing a face covering, standing at least 6 feet away. ☐ Enact plan to get student home safely and cannot be through school transportation. ☐ Notify local health department and follow their procedures. ☐ If a person is diagnosed with COVID-19 based on a test, their symptoms, or does not get at COVID-19 tests but has had symptoms, they can return to school when: * At least 3 days (72 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications; and * Improvement in respiratory symptoms (e.g. cough, shortness of breath); and * At least 10 days have passed since symptoms first appeared. ☐ If a person has had a negative COVID-19 test, they can return to school once there is no fever without the use of fever-reducing medicines and they have felt well for 24 hours. ☐ Student and staff can participate in remote learning and teacher (if applicable).

POSITIVE SCREENING PROTOCOL: During the School Day

	Exposure, No symptoms	Diagnosis, No symptoms	SYMPTOMS
WHO	Staff or Student shares they were exposed to someone with COVID-19 within the last 2 weeks but is NOT symptomatic	Staff or Student shares they were diagnosed with COVID-19 less than 10 days ago, but is NOT symptomatic	Staff or Student presents with at least one of the following COVID-19 symptoms: * Fever * Chills * New cough * Shortness of Breath or difficulty breathing * New loss of taste or smell
Student:	☐ If appropriate for that student; they should wear a face covering. ☐ Separate student in designated area with supervision by an adult wearing a face covering, standing at least 6 feet away. ☐ Enact plan to safely send student home as quickly as possible. ☐ Notify local health department and follow their procedures. ☐ Can return to school once it has been 14 days since last close contact, if they do not develop symptoms. ☐ Participate in remote learning while out.	☐ If appropriate for that student; they should wear a face covering. ☐ Isolate student in designated area with supervision by an adult wearing a face covering, standing at least 6 feet away. ☐ Enact plan to get student home safely and cannot be through school transportation. ☐ Close off and ventilate facility areas used by the sick student. ☐ Wait at least 24 hours, THEN ☐ Clean and disinfect those areas with an EPA-registered product. ☐ Notify local health department and follow their procedures. ☐ If student is diagnosed with COVID-19 based on a test, their symptoms, or does not get at COVID-19 tests but has had symptoms, they can return to school when: * At least 3 days (72 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications; and * Improvement in respiratory symptoms (e.g. cough, shortness of breath); and * At least 10 days have passed since symptoms first appeared. ☐ If student has had a negative COVID-19 test, they can return to school once there is no fever without the use of fever-reducing medicines and they have felt well for 24 hours. ☐ Student can participate in remote learning if applicable.	☐ If appropriate for that student; they should wear a face covering. ☐ Isolate student in designated area with supervision by an adult wearing a face covering, standing at least 6 feet away. ☐ Enact plan to get student home safely and cannot be through school transportation. ☐ Close off and ventilate facility areas used by the sick student. ☐ Wait at least 24 hours, THEN ☐ Clean and disinfect those areas with an EPA-registered product. ☐ Notify local health department and follow their procedures. ☐ If student is diagnosed with COVID-19 based on a test, their symptoms, or does not get at COVID-19 tests but has had symptoms, they can return to school when: * At least 3 days (72 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications; and * Improvement in respiratory symptoms (e.g. cough, shortness of breath); and * At least 10 days have passed since symptoms first appeared. ☐ If person has had a negative COVID-19 test, they can return to school once there is no fever without the use of fever-reducing medicines and they have felt well for 24 hours. ☐ Staff can participate in remote teaching (if applicable).
Staff	☐ Immediately go home. ☐ Notify local health dept. and follow their procedures. ☐ Can return to school once it has been 14 days since last close contact, if they do not develop symptoms. ☐ Can participate in remote teaching (if applicable) while out.	☐ Immediately go home. ☐ Notify local health dept. and follow their procedures. ☐ Wait at least 24 hours, THEN ☐ Clean and disinfect those areas with an EPA-registered product. ☐ May return to school 10 days since first positive COVID-19 test, if they do not develop symptoms. ☐ Close off facility areas used by the sick person. ☐ Can participate in remote learning and teaching (if applicable) while out.	☐ If appropriate staff should wear face covering. ☐ If well enough, go home immediately. ☐ If not well enough, isolate staff member in designated area and provide support to get home or to medical care. ☐ Notify Local Health Dept. and follow their procedures. ☐ Close off and ventilate facility areas used by the sick person. ☐ Wait at least 24 hours THEN ☐ Clean and disinfect those areas with an EPA-registered product. ☐ If person is diagnosed with COVID-19 based on a test, their symptoms, or does not get at COVID-19 tests but has had symptoms, they can return to school when: * At least 3 days (72 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications; and * Improvement in respiratory symptoms (e.g. cough, shortness of breath); and * At least 10 days have passed since symptoms first appeared. ☐ If person has had a negative COVID-19 test, they can return to school once there is no fever without the use of fever-reducing medicines and they have felt well for 24 hours. ☐ Staff can participate in remote teaching (if applicable).

Actions Promoting the Reduction of COVID-19 Spread and Other Viruses

Promoting Behaviors that Reduce Spread

There is currently no vaccine to prevent coronavirus disease 2019 (COVID-19). Keep in mind the more people a student or staff member interacts with, and the longer the interaction, the higher the risk of COVID-19 spread. The risk of COVID-19 spread increases in school settings as follows:

Lowest Risk	More Risk	Moderate Risk
Students and teachers engage in virtual-only classes, activities, and events	Small, in-person classes, activities, and events. Groups of students stay together and with the same teacher throughout/across school days and groups (cohorts) do not mix. Students remain at least 6 feet apart and do not share objects (e.g., hybrid virtual and in-person class structures, or staggered/rotated scheduling to accommodate smaller class sizes)	Full sized, in-person classes, activities, and events. Groups of students stay together in cohorts, but may have different teachers throughout the day. Limited student interaction between cohorts. Students remain 6 feet apart whenever possible, and do not share objects unless cleaned/sanitized in between. Staggered passing times and/or one-way hallway passing.

The best way to prevent illness is to avoid being exposed to this virus.

- ♦ Staff and Students should stay at home if they have tested positive for or are showing COVID-19 symptoms.
- ♦ Be alert for symptoms. Watch for fever (100.4 or higher), cough, runny nose, shortness of breath, sore throat, nausea, vomiting or other symptoms.
 - This is especially important if you are running essential errands, going into the workplace, and in settings where it may be difficult to keep a physical distance of 6 feet.
- ♦ Take your temperature if symptoms develop.
 - Don't take your temperature within 30 minutes of exercising or after taking medications that could lower your temperature, like acetaminophen.



MONITOR YOUR HEALTH

♦ Symptom Comparison for Cold, Flu, and COVID-19

Symptom	Common Cold	Influenza	Covid-19
Incubation Period	1-3 days	1-4 days	1-14 days
Symptom Onset	Gradual	Sudden	Gradual or Sudden
Fever	Rare	Common	Common (100% or above)
Cough	Mild to Moderate	Common	Common
Fatigue	Sometimes	Common	Common
Shortness of Breath	Mild	Sometimes	Common
Respiratory Issues	Sometimes	Sometimes	Common
Chills	Uncommon	Common	Sometimes
Headache	Rare	Common	Sometimes
Body aches	Slight	Common	Sometimes
Runny nose	Common	Sometimes	Common
Nasal Congestion	Common	Sometimes	Sometimes
Sneezing	Common	Sometimes	Sometimes
Nausea	Rare	Sometimes	Sometimes
Diarrhea	Rare	Sometimes	Sometimes
Sore throat	Common	Sometimes	Common
Loss of Appetite	Sometimes	Common	Sometimes
Loss of taste or smell			Sometimes

	Most Frequent Common Symptoms
	Secondary Symptoms

Symptom comparison information from CDC

♦ IF symptoms develop – Follow CDC guidance:

- **STAY HOME** – Most people will have mild illness and can recover at home without medical care. **DO NOT leave your home**, except to get medical care. Do not visit public places.
 - As much as possible, stay in a specific room and away from other people and pets in your home. If around others wear a face covering.
 - Avoid sharing personal household items (dishes, drinking glasses, cups, eating utensils, towels or bedding). Wash these items thoroughly after using them with soap and water or put in the dishwasher.
- **Stay in touch with your doctor.** Call before you get medical care.
 - Follow care instructions from your healthcare provider and local health department.
- **Take care of yourself.** Get rest and stay hydrated. Take over-the-counter medicines, such as acetaminophen, to help you feel better.

Guidelines for cleaning and disinfection of rooms or areas used in school facilities are based on CDC recommendations.

- ♦ **Staying Home when Appropriate**
 - Staff and Students who are sick or who have recently had close contact (close contact being less than 6 feet distance for more than 15 minutes) with a person with COVID-19 or person displaying COVID-19 symptoms should stay home and monitor their health.
 - **CDC defines monitoring your health, as:**
 - Staying home until 14 days after your last exposure.
 - Checking your temperature twice a day and watching for symptoms of COVID-19.
 - If possible, staying away from people who are at higher-risk for getting very sick from COVID-19.
 - **Staff and Students stay home when sick and until 72 hours fever free**, without the use of fever-reducing medication.
- ♦ **Practicing Hand Hygiene.**
- ♦ **Practicing Respiratory Etiquette.**
- ♦ **Wearing Face Coverings/ Shields.**
- ♦ Modifying classroom and facility layouts to **promote social distancing.**
- ♦ Posting signs and messages in highly visible locations which promote everyday protective measures and describe how to stop the spread of germs.
- ♦ **Maintaining healthy environments; daily cleaning and disinfecting of facilities, including transportation vehicles.**
- ♦ Identifying small groups and keeping them together (cohorting).
- ♦ Discouraging the sharing of items that are difficult to clean or disinfect, keeping personal belongings separated from others and in individually labeled containers, cubbies or areas.
- ♦ Using physical barriers and guides.
- ♦ Limiting nonessential visitors, volunteers, and activities.
- ♦ Discourage use of close communal shared spaces (such as playgrounds with shared playground equipment, and cafeterias).
- ♦ Increase circulation of outdoor air as much as possible, by opening windows and doors.
- ♦ Encourage students and staff to bring their own water or water bottles to minimize use and touching of water fountains.
- ♦ Notification to local health officials, staff and families immediately of any case of COVID-19.

Following Measures to Protect Yourself and Others



WASH YOUR HANDS

- ♦ **Wash your hands often** with soap and water for 20 seconds.
 1. **Wet** your hands with clean, running water (warm or cold), turn off the tap, and apply soap.
 2. **Lather** your hands by rubbing them together with the soap. Lather the backs of your hands, between your fingers, and under your nails.
 3. **Scrub** your hands for at least 20 seconds. Need a timer? Hum the “Happy Birthday” song from beginning to end twice.
 4. **Rinse** your hands well under clean, running water.
 5. **Dry** your hands using a clean towel or air dry them.

♦ **KEY TIMES to Wash Hands:**

- After blowing one's nose, coughing, or sneezing.
 - After using the restroom.
 - Before, during, and after preparing food.
 - Before eating or preparing food.
 - Before and after providing routine care for another person who needs assistance (e.g., a child).
 - Before and after treating a cut or wound.
 - After contact with animals or pets.
 - After touching garbage.
 - After you have been in a public place and touched an item or surface that may be frequently touched by other people, such as door handles, tables, faucets, drinking fountains, copiers, phones, desks, tabletops, etc.
 - Before touching your eyes, nose, or mouth.
- ♦ **Hand sanitizer:** If soap and water are not available and hands are not visibly dirty, an alcohol-based hand sanitizer that contains at least 60% alcohol may be used. However, if hands are visibly dirty, always wash hands with soap and water.
- Be aware sanitizers do not get rid of all types of germs and may not be as effective when hands are visibly dirty or greasy.
 - Hand sanitizers should always be kept out of the reach of young children and use of sanitizers should be under supervision.



PHYSICAL DISTANCING -- AVOID CLOSE CONTACT

The best way to prevent illness is to avoid being exposed.

- ♦ Maintain good social distance (about 6 feet or about 2 arms' length) from other people. Keeping space between you and others is one of the best tools to avoid being exposed and to slow the spread of a virus.
- ♦ Minimize time standing in lines and take steps to ensure that six feet of distance between persons is maintained, including marking spacing on floor, one-way traffic flow in constrained spaces, etc.
- ♦ Plan to provide additional support in learning how to maintain physical distancing requirements. Providing instruction, not discipline.
- ♦ Avoid close contact with people who are sick, even inside your home. If possible, maintain 6 feet between the person who is sick and other household members.
- ♦ Put distance between yourself and other people outside of your home.
 - Remember that some people without symptoms may be able to spread the virus.



USE A FACE COVERING

Your face covering may protect others, their face covering may protect you. You could spread COVID-19 to others even if you do not feel sick. Face coverings and face shields should cover the users mouth and nose.

- ♦ **REQUIRED** wearing of **Face Coverings or Face Shields** for:
 - Staff who are regularly within 6 feet of students and/or staff.
 - May include staff who support personal care, feeding, or instruction requiring direct physical contact.
 - Staff who will sustain close contact and interactions with students
 - Bus Drivers.
 - Staff preparing and/or serving meals.
- ♦ **REQUIRED** wearing of **Face Shields or clear plastic barriers** for:
 - Speech Language Pathologists, Speech Language Pathologists Assistants, or other adults providing articulation therapy.
 - Front office staff.
- ♦ **RECOMMENDED** is wearing of **Face Coverings** for:
 - All staff (in accordance with local public health authority and CDC guidelines).
 - Staff who interact with the public (e.g., mail deliveries, varied support personnel).
 - Staff who interact with multiple stable cohorts.
 - Students in 6th – 12th grade and especially in circumstances when physical distancing cannot be maintained.

Face coverings should be washed daily, or a new covering worn daily.

- ♦ Encourage students who wear face coverings to follow recommendations for the CDC face coverings (<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/div-cloth-face-coverings.html>).
- ♦ Children of any age should not wear a face covering:
 - If they have a medical condition that makes it difficult for them to breathe with a face covering;
 - If they experience a disability that prevents them from wearing a face covering;
 - If they are unable to remove or mangle the face covering independently; or
 - While sleeping.



COVER COUGHS AND SNEEZES

- ♦ If you are around others and do not have on a cloth face covering, remember to always cover your mouth and nose with a tissue when you cough or sneeze or use the inside of your elbow and do not spit.
- ♦ Throw used tissues in the trash immediately, do not place in your pocket for use later.
- ♦ Immediately wash your hands with soap and water for at least 20 seconds. If soap and water are not readily available, clean your hands with a hand sanitizer that contains at least 60% alcohol.



CLEAN AND DISINFECT

- ♦ **Clean AND disinfect frequently touched surfaces daily.** This includes tables, doorknobs, light switches, countertops, handles, desks, phones, keyboards, toilets, faucets and sinks.
- ♦ **If surfaces are dirty, clean them.** Use detergent or soap and water prior to disinfection.
- ♦ Then use a household disinfectant.

Everyday Steps

When Cleaning

- ♦ Wear disposable gloves for all tasks in the cleaning process, including handling trash.
- ♦ Additional protective equipment (PPE) might be required based on the cleaning disinfectant products being used and whether there is a risk of splash.
- ♦ Gloves and other protective equipment should be removed carefully to avoid contamination of the wearer and the surrounding area.
- ♦ Wash your hands often with soap and water for 20 seconds.
 - Always wash immediately after removing gloves and after contact with a person who is sick.
 - Hand sanitizer: If soap and water are not available and hands are not visibly dirty, an alcohol-based hand sanitizer that contains at least 60% alcohol may be used. However, if hands are visibly dirty, always wash hands with soap and water.
 - Always store hand sanitizer out of reach of children.
 - Keep hand sanitizers away from fire or flame.

Clean and Disinfect Surfaces

- ♦ Wear disposable gloves.
- ♦ Clean surfaces using soap and water, then use disinfectant. Cleaning with soap and water reduces number of germs, dirt and impurities on the surface. Disinfecting kills germs on surface.
- ♦ Practice routine cleaning of frequently touched surfaces.
- ♦ More frequent cleaning and disinfection may be required based on level of use.
- ♦ Surfaces and objects should be cleaned and disinfected before each use.
- ♦ High touch surfaces include tables, doorknobs, light switches, countertops, handles, desks, phones, keyboards, toilets, faucets, sinks, and copiers, etc.

Disinfect

Recommend use of EPA-registered household disinfectant (<https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2-covid-19>) and follow instructions on the label (e.g. concentration, application method, and contact time, etc.) **All cleaning products used in schools must be on the approved list for safety.**

- ♦ Wear disposable gloves.
- ♦ Ensure adequate ventilation.
- ♦ Many products recommend keeping surface wet for a period of time (see product label).
- ♦ Use no more than the amount recommended on the label.
- ♦ Use water at room temperature for dilution (unless stated otherwise on the label).
- ♦ Avoid mixing chemical products.
- ♦ Label diluted cleaning solutions.
- ♦ Store and use chemicals out of the reach of children.

- ♦ **Diluted household bleach solutions may also be used** if appropriate for the surface.
 - Check the label to see if your bleach is intended for disinfection and has a sodium hypochlorite concentration of 5%–6%. Ensure the product is not past its expiration date. Some bleaches, such as those designed for safe use on colored clothing or for whitening may not be suitable for disinfection.
 - Unexpired household bleach will be effective against coronaviruses when properly diluted.

Follow manufacturer's instructions for application and proper ventilation. Never mix household bleach with ammonia or any other cleanser.
Leave solution on the surface for **at least 1 minute**.

To make a bleach solution, mix:

- 5 tablespoons (1/3rd cup) bleach per gallon of room temperature water
- OR
- 4 teaspoons bleach per quart of room temperature water

- ♦ Bleach solutions will be effective for disinfection up to 24 hours.
- ♦ **Alcohol solutions with at least 70% alcohol may also be used.**

Cleaning Soft Surfaces

For soft (porous) surfaces such as carpeted floor, rugs, and drapes

- ♦ Clean the surface using soap and water or with cleaners appropriate for use on these surfaces.
- ♦ Launder items (if possible) according to the manufacturer's instructions. Use the warmest appropriate water setting and dry items completely. OR
- ♦ Disinfect with an EPA-registered household disinfectant. These disinfectants (<https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2-covid-19>) meet EPA's criteria for use against Covid-19.
- ♦ Vacuum as usual.

Electronics

For electronics, such as tablets, touch screens, keyboards, and remote controls:

- ♦ Consider putting a wipeable cover on electronics
- ♦ Follow manufacturer's instruction for cleaning and disinfecting.
 - ~~If no guidance~~ Use alcohol-based wipes ~~or sprays~~ containing at least 70% alcohol. Dry surface thoroughly.

Laundry

For clothing, towels, lines and other items

- ♦ Launder items according to the manufacturer's instructions. Use the warmest appropriate water setting and dry items completely.
- ♦ Wear disposable gloves when handling dirty laundry from a person who is sick.
- ♦ Dirty laundry from an ill person can be washed with other people's items.
- ♦ Clean and disinfect dirty laundry containers according to guidance above for surfaces.
- ♦ Do not shake dirty laundry.
- ♦ Remove gloves, and wash hands with soap and water right away.

Outbreak of Covid-19 and Other Infectious Viruses

Notification will be made to the Local Public Health Authority regarding clusters of any illness among staff or students.

Notification will be made to the Local Public Health Authority (if not already made) of any confirmed Covid-19 cases among staff and students.

Notification will be made to staff and families of potential Covid-19 exposure, while protecting the identity of individuals and their families ill with Covid-19. Notification will include reminders of symptoms to be aware of.

Local Public Health Authority recommendations will be used and requests for contact information will be supplied to the LPHA in a timely manner.

In addition to the everyday steps of cleaning, if someone is sick with Covid-19 or another infectious virus the additional actions should be taken:

- ♦ Close off affected areas used by the person who is sick.
- ♦ Open outside doors and windows to increase air circulation in the area.
- ♦ Wait 24 hours before you clean or disinfect with an EPA-registered product. If 24 hours is not feasible, wait as long as possible.
- ♦ Clean and disinfect all areas used by the person who is sick, such as offices, bathrooms, common areas, shared electronic equipment like tablets, touch screens, keyboards, remote controls, copiers, phone, etc.
- ♦ Vacuum the space if needed. Use vacuum equipped with high-efficiency particular air (HEHPA) filter, if available.
 - Do not vacuum a room or space that has people in it. Wait until the room or space is empty to vacuum, such as at night, for common spaces, or during the day for private rooms.
 - Consider temporarily turning off room fans and the central HVAC system that services the room or space, so that particles that escape from vacuuming will not circulate through the facility.
- ♦ Once the area has been appropriately disinfected; it can be opened for use.
 - Workers without close contact with the person who is sick can return to work immediately after disinfection.
- ♦ If more than 7 days since the person who is sick visited or used the facility, additional cleaning and disinfection is not necessary.
 - Continue routine cleaning and disinfection. This includes everyday practices that businesses and communities normally use to maintain a healthy environment.

******In addition to regular cleaning and sanitizing activities, facilities and custodial crews will use virus-killing ozone machines on a rotating basis in classrooms and office spaces, as a precautionary measure. In the event of an outbreak in a student cohort or school, the whole school will be deep cleaned and sanitized.***

RESOURCES

Douglas County Public Health Network
Oregon Health Authority
Centers for Disease Control and Prevention
Oregon Department of Education:

<http://doughspubhealthnetwork.org/>

<https://www.oregon.gov/oha/pages/index.aspx>

<https://www.cdc.gov/flu/pandemic-resources/index.htm>

<https://www.oregon.gov/ode/students-and-family/healthsafety/Pages/COVID-19-FAQ.aspx>

Appendix C

Position :

with a running four-week history of their time in each school building and who they were in contact with at each site.

[illegible]

Cohort Identifiers

Cohort Location: _____
Grade(s) _____

Grade(s) _____

Dates of log:

[illegible]

(

[illegible]

Daily Attendance Log – COVID-19

Date: _____

Stable Cohort:

[illegible]

***Entrance Screening** – Must include: checking for fever and cough (this can be a verbal confirmation), and a confirmation that the child, staff, or any family member has not been exposed to a suspected or confirmed case of COVID-19.

****Staff Name** – The name of any staff member, or adult who comes in contact with the students throughout their day.

Daily Illness Log – COVID-19

Date: _____

Stable Cohort:

[illegible]

***Entrance Screening** – Must include: checking for fever and cough (this can be a verbal confirmation), and a confirmation that the child, staff, or any family member has not been exposed to a suspected or confirmed case of COVID-19.

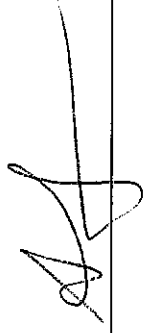
****Staff Name** – The name of any staff member, or adult who comes in contact with the students throughout their day.

Appendix D

Attestation:

The South Umpqua School District #19 attests that we have all of the following in each of our buildings:

1. Adequate supply of face coverings, located in the main office.
2. Designated space to isolate student or staff members who develop COVID-19 symptoms. Isolate students and staff who report or develop symptoms, with staff supervision and symptom monitoring by a school nurse or other school-based health care provider, until they are able to go home. While waiting to go home, people displaying symptoms should wear a face covering, as should supervising staff.
3. Designated space for students to receive non-COVID-19 health services that is separate from COVID-19 isolation space.



Andy Johnson, Director of Student Achievement

8.27.2021

Date