School-Level COVID-19 Management Plan

Template For School Year 2022-23

South Umpqua
Unlocking the Potential in Every Student

School/District/Program Information

District or Education Service District Name and ID: _____ South Umpqua SD #19 _____

School or Program Name: ___ Tri-City Elementary School _____

Contact Name and Title: _____ Emily Veale _____ _____

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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.
School District Communicable Disease Management Plan OAR 581-022-2220	https://www.susd.k12.or.us/wp-content/uploads/2021/08/2021.22-communicable-disease-management-plan.pdf
Exclusion Measures Exclusion of students and staff who are diagnosed with certain communicable diseases OAR 333-019-0010	**School administrators in each building will exclude staff and students from school who are exhibiting symptoms of Covid-19. They have been instructed to follow the Symptoms-Based Exclusion Guidelines outlined in the Communicable Disease Guidance for Schools.**
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	**Each of our buildings has an appropriately supervised isolation areas for providing first aid and isolation of sick and/or injured children. We can test those students showing signs of Covid-19 who have parent permission. We adhere to all school exclusion processes in the Communicable Diseases Guidelines for schools.**
Educator Vaccination OAR 333-019-1030	**SUSD will follow OAR 333-019-1030 requiring proof of vaccination for various groups including employees who are in the presence of children. Those who wish to claim medical or religious exceptions will be required to meet individually with district staff to discuss their options. We have purchased N95 masks which are available as one potential mitigating option.**
Emergency Plan or Emergency Operations Plan OAR 581-022-2225	**Available upon request**

	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.
Additional documents reference here:	

SECTION 1. Clarifying Roles and Responsibilities

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

Table 2.   **Roles and Responsibilities**

School planning team members	Responsibilities:	Primary Contact (Name/Title):	Alternative Contact:
Building Lead / Administrator	• Educates staff, families, and students on policies regarding visitors and volunteers, ensuring health and safety are being maintained. • In consultation with district leadership and LPHA staff, determines the level and type of response that is required/necessary. • Acts as key spokesperson to communicate health-related matters within school community members, health partners, and other local partners.	Shilo White, Principal	

School planning team members	Responsibilities:	Primary Contact (Name/Title):	Alternative Contact:
School Safety Team Representative (*or staff member knowledgeable about risks within a school, emergency response, or operations planning*)	• Trains staff at the start of the academic year and at periodic intervals on communicable disease management procedures. • Leads debrief of communicable disease event, informing continuous improvement of the planning, prevention, response, and recovery system.	Shilo White, Principal	
Health Representative (*health aid, administrator, school/district nurse, ESD support*)	• Supports building lead/administrator in determining the level and type of response that is necessary. • Reports to the LPHA any cluster of illness among staff or students. • Provides requested logs and information to the LPHA in a timely manner.	Andy Johnson, Director of Student Services	
School Support Staff as needed (*transportation, food service, maintenance/custodial*)	• Advises on prevention/response procedures that are required to maintain student services.	Wendy Jarvis, First Student, bussing Kyle Mickens, Food services Joe Motta, Maintenance/custodial	

School planning team members	Responsibilities:	Primary Contact (Name/Title):	Alternative Contact:
Communications Lead (*staff member responsible for ensuring internal/external messaging is completed*)	• Ensures accurate, clear, and timely information is communicated including those who may have been exposed, a description of how the school is responding, and action community members can take to protect their health. • Shares communications in all languages relevant to school community.	Kate McLaughlin, Superintendent	Andy Johnson, Director of Student Achievement
District Level Leadership Support (*staff member in which to consult surrounding a communicable disease event*)	• Has responsibility over COVID-19 response during periods of high transmission. 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.	Andy Johnson, Dir. Of Student Achievement Kate McLaughlin, Superintendent	
Main Contact within Local Public Health Authority (LPHA)	• Notifies Building Lead/Administrator of communicable disease outbreak and offers recommendations for appropriate response. • Key spokesperson to communicate on health-related matters with community members, health facility staff, and other local community partners.	Dr. Bob Dannenhoffer	
Others as identified by team		Tabitha Roberts, Human Resources	

Section 2. Equity and Mental Health

Preparing a plan that centers equity and supports mental health

Preparing a school to manage COVID-19 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 COVID-19 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 COVID-19 (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 Consultation[1], etc.)

- SUSD Equity Lens
- 2022.23 Equity Teams

Suggested Resources:
1. Equity Decision Tools for School Leaders
2. Oregon Data for Decisions Guide
3. Oregon's COVID-19 Data Dashboards by Oregon Health Authority COVID-19
4. Data for Decisions Dashboard
5. Community Engagement Toolkit
6. Tribal Consultation Toolkit

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[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 Equity**

OHA/ODE Recommendation(s)	Response:
Describe how you identify those in your school setting that are disproportionately impacted by COVID-19 and which students and families may need differentiated or additional support.	School and district will actively monitor attendance of all students, and disaggregate the data as necessary to determine any impacted individuals and/or student groups. Student Services team (school psych, counselor, TOSAs) intervene in the event of family illness or crisis. School already has high functioning Response to Intervention (RTI) practices in place, and include attendance data. If/When a student is identified as needing additional support or intervention, the team works with the family to provide individualized supports. All students are monitored, but if a historically underserved group is identified as "at risk", those students are given priority for services.
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 COVID-19.	The school based RTI team will monitor all students. If/When a student is identified as needing additional support or intervention, the team works with the family to provide individualized/differentiated supports. School teams meet weekly to review data and monitor. All students are monitored, but if a historically underserved group is identified as "at risk", those students are given priority for services.
What support, training or logistics need to be in place to ensure that the named strategies are understood, implemented, and monitored successfully.	District Student Services team will assist building level RTI team, and provide PD, as needed. Early release time is provided to school staff every Wednesday for the purpose of reviewing data, and discussing individual student needs, implementation of plans, and monitoring

Mental Health Supports

Schools are encouraged to continue to prioritize cultivating care, connection, and community to support the mental, emotional, and social health and well-being of students, families, staff, and administrators.

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 COVID-19 (e.g., counseling services; partnerships with community mental and behavioral health providers; school district suicide prevention, intervention, and postvention plan; School Based Health Center resources; tribal resources, etc.)

Suggested Resources:
1. ODE Mental Health Toolkit
2. Care and Connection Program
3. Statewide interactive map of Care and Connection examples
4. Care and Connection District Examples
5. Oregon Health Authority Youth Suicide Prevention

Table 4.   **Mental Health Supports**

OHA/ODE Recommendation(s)	Response:
Describe how you will devote time for students and staff to connect and build relationships.	The District will follow the Mental Health Tool Kit and has established and scheduled detailed partnerships with local mental health providers that will be universal in all the buildings supporting individual, group and family needs. Staff have been trained on the new Character Strong SEL curriculums across all grade and ability levels. The District has planned and built into the master schedules time to prioritize students and staff connections. The District has started the unveiling of re-connecting with students and staff over the summer with a four (4) week SEL teaming with students and families. The District will be devoting slated time for PBIS and reward-based activities in addition to Character Strong. Lastly, all staff are offered trainings on First Hour Needs and related bonding experiences to support the planning. There is weekly PD and teams dedicated to the goals of building relationships. This includes mental health based SST supports in planning.
Describe how you will ensure class time, and individual time if needed, for creative opportunities that allow students and staff to explore and process their experiences.	Each school in the District has established and detailed times to address the return to school and address the changes and grieving that has occurred during the pandemic. The use of highly skilled and trained specialists in mental health are available to the District staff and students and accessed as needed each day. The District ran SEL groups over the summer and have openly informed students and parents or services for mental health and processing. The District has increased the focus and emphasis on being well and self-care with groups and activities and has built into the school year SEL priorities as both a part of instruction and recreation. Moreover, staff have access to materials, staff, agencies, and school-based teams to inspire and assist in the planning for daily discussions. The District uses agencies, and District employed specialists in the provision of these services and has a formed wraparound committee.
Describe how you will link staff, students and families with culturally relevant health and	The District will use the trainings and culturally relevant agencies and staffing we currently have to assess and prioritize the diversity of our children and parents. The District works collaboratively with equity teams and has a strong alliance with the local tribal staff and mental health teams through the Umpqua Band of Indians, primarily the Cow Creek Band. In addition, the District has trained with and has a close relationship with the county based LGBTQA who trains and has offered guidance for staff. The current PBIS staff, trainers, and SEL teams also work directly with inclusivity and culturally relevant practices and services. Finally, the District utilizes both a full-time

OHA/ODE Recommendation(s)	Response:
mental health services and supports.	Social Emotion, and Behavioral Coordinator and School Psychologist to address the necessary skill-based adjustments needing to be made grades k-21 and across all ethnicity-based groups in the District.
Describe how you will foster peer/student lead initiatives on wellbeing and mental health.	The District will foster and work on peer student led initiatives with the following: • Use of Character Strong curriculums and group led activities built into the daily lessons and group leaders' components • Peer led and assisted LQBTQA sessions and groups for youth • Collaboration with Wraparound and peer led Restoratives Justice phases/practices that are often interlinked with wellbeing and mental health • Peer and students led involvement with Adapt Mental Health steering committee teams supporting community and school-based therapy for consumer and client feedback • PBIS teams that incorporate and identify the cultural and climate changes • Surveys and empathy interviews • Use of school-based therapists and District placed school counselors • Group and interest-based developments • Community engagement with ESD partnerships

Section 3. COVID-19 Outbreak Prevention, Response & Recovery:

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 COVID-19 transmission within the school environment for students, staff, and community members. COVID-19 will continue to circulate in our communities and our schools for the indefinite future. Schools will utilize different mitigation measures based on COVID-19 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 COVID-19 transmission, and as they roll back the increased mitigating measures, incorporating lessons learned.

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

Table 5.   **COVID-19 Mitigating Measures**

OHA/ODE Recommendation(s) Layered Health and Safety Measures	BASELINE MEASURES: describe what mitigating measures will the school implement all of the time, each and every day of the school year to reduce the spread of COVID-19 and protect in-person instruction?
COVID-19 Vaccination	*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.* Staff who work with children are required to be vaccinated or have a religious or medical exception
Face Coverings	Not required. When a person demonstrates symptoms they will be asked to wear a mask until they exit the building.
Isolation	Students who exhibit signs of Covid-19 will be sent to the isolation room and parents will be called to pick them up
Symptom Screening	Staff will watch for signs of Covid-19
COVID-19 Testing	*OHA offers both diagnostic and screening testing programs to all public and private K-12 schools in Oregon. Please include whether your school will offer diagnostic and screening testing, respectively.* Covid-19 testing is available for staff and students who exhibit symptoms.
Airflow and Circulation	Windows will be open when appropriate. Fans are available to circulate air.
Cohorting	We are not cohorting at this time.
Physical Distancing	Students will practice three feet physical distancing when possible
Hand Washing	Hand washing will be encouraged multiple times each day, with special emphasis on restroom, eating, and recess.
Cleaning and Disinfection	Surfaces will be cleaned a minimum of once daily. High touch areas will be cleaned throughout the day.

OHA/ODE Recommendation(s) Layered Health and Safety Measures	BASELINE MEASURES: describe what mitigating measures will the school implement all of the time, each and every day of the school year to reduce the spread of COVID-19 and protect in-person instruction?
Training and Public Health Education	Staff and students will be educated on the symptoms of Covid-19 and the importance of handwashing, cleaning, and physical distancing.

Table 6.   COVID-19 Mitigating Measures

OHA/ODE Recommendation(s) Layered Health and Safety Measures	MEASURES DURING PERIODS OF HIGH TRANSMISSION*: describe what mitigating measures the school will implement during periods of high transmission to reduce the spread of COVID-19 and protect in- person learning? *Within the community, high transmission is defined at the county level through CDC COVID-19 Community Levels. Within a school, high transmission may be defined as high absenteeism or unusual spread within a cohort (e.g., a large outbreak in a classroom).
COVID-19 Vaccination	Staff who work with children are required to be vaccinated or have a religious or medical exception
Face Coverings	*CDC, OHA, and ODE recommend universal use of face coverings during periods of high transmission. Please include whether your school will implement this critical recommendation.* Face coverings will be offered and available to staff and students, will follow local public health guidelines
Isolation	Students who exhibit signs of Covid-19 will be sent to the isolation room and parents will be called to pick them up, will follow local public health guidelines
Symptom Screening	Staff will watch for signs of Covid-19, will follow local public health guidelines
COVID-19 Testing	Covid-19 testing is available for staff and students who exhibit symptoms, will follow local public health guidelines
Airflow and Circulation	Windows will be open when appropriate. Fans are available to circulate air, will follow local public health guidelines

OHA/ODE Recommendation(s) Layered Health and Safety Measures	**MEASURES DURING PERIODS OF HIGH TRANSMISSION*: describe what mitigating measures the school will implement during periods of high transmission to reduce the spread of COVID-19 and protect in- person learning?** *Within the community, high transmission is defined at the county level through <u>CDC COVID-19 Community Levels</u>. Within a school, high transmission may be defined as high absenteeism or unusual spread within a cohort (e.g., a large outbreak in a classroom).
Cohorting[2]	*Schools should notify their LPHA about unusual respiratory disease activity if the following absence thresholds are met and at least some students are known to have influenza or COVID-like symptoms:* *1. At the school level: ≥ 30% absenteeism, with at least 10 students and staff absent* *2. At the cohort level: ≥ 20% absenteeism, with at least 3 students and staff absent* Local public health will be informed of unusual respiratory disease activity. We will follow local public health guidelines
Physical Distancing	Students will practice three feet physical distancing when possible, we will follow local public health guidelines
Hand Washing	Hand washing will be encouraged multiple times each day, with special emphasis on restroom, eating, and recess, we will follow local public health guidelines
Cleaning and Disinfection	Surfaces will be cleaned a minimum of once daily, we will follow local public health guidelines. High touch surfaces will be cleaned throughout the day.
Training and Public Health Education	Staff and students will be educated on the symptoms of Covid-19 and the importance of handwashing, cleaning, and physical distancing, we will follow local public health guidelines

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[2] Cohorting refers to establishing a consistent group of students that stay together for a significant portion of the school day. Examples include stable mealtime cohorts, classrooms, table groups, lunch bunches, and other group situations. Cohorts should be as small as feasible to minimize exposure.

Table 7.   COVID-19 Mitigating Measures

OHA/ODE Recommendation(s) Layered Health and Safety Measures	STEPS FOR GRADUAL RETURN TO BASELINE RESPONSE: describe how does the school will gradually return to a baseline response. Describe how the school team will decide what measure(s) should remain at an increased level which others may not, prioritizing some measure(s) over others. How does the school reduce or make permanent implementation of enhanced mitigation measures once high transmission has ended?
COVID-19 Vaccination	Decisions will be made in consort with our local public health department.
Face Coverings	Decisions will be made in consort with our local public health department.
Isolation	Decisions will be made in consort with our local public health department.
Symptom Screening	Decisions will be made in consort with our local public health department.
COVID-19 Testing	Decisions will be made in consort with our local public health department.
Airflow and Circulation	Decisions will be made in consort with our local public health department.
Cohorting	Decisions will be made in consort with our local public health department.
Physical Distancing	Decisions will be made in consort with our local public health department.
Hand Washing	Decisions will be made in consort with our local public health department.

OHA/ODE Recommendation(s) Layered Health and Safety Measures	STEPS FOR GRADUAL RETURN TO BASELINE RESPONSE: describe how does the school will gradually return to a baseline response. Describe how the school team will decide what measure(s) should remain at an increased level which others may not, prioritizing some measure(s) over others. How does the school reduce or make permanent implementation of enhanced mitigation measures once high transmission has ended?
Cleaning and Disinfection	Decisions will be made in consort with our local public health department.
Training and Public Health Education	Decisions will be made in consort with our local public health department.

PRACTICING PLAN TO IMPROVE PROCESS

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 www.susd.k12.or.us

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