

School-Level COVID-19 Management Plan  
For School Year 2022-23



**DAYVILLE SCHOOL DISTRICT 16J**

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**School/District/Program Information**

District or Education Service District Name and ID: 2011

School or Program Name: Dayville School District

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Table 1.

|   |  |
|---|--|
|    | <p><b>Policies, protocols, procedures and plans already in place</b></p> <p>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.</p>  |
| <p><b>School District Communicable Disease Management Plan</b><br/> <a href="#">OAR 581-022-2220</a></p>  | <p>OHA Communicable Disease Guidance for Schools (To Be Updated by 8/1 for 22-23): Communicable Disease Guidance for Schools COVID-19 Pandemic Addendum: <a href="https://www.oregon.gov/ode/students-and-family/healthsafety/Documents/commdisease.pdf">https://www.oregon.gov/ode/students-and-family/healthsafety/Documents/commdisease.pdf</a></p> <p>Oregon School Nurse Association (OSNA) toolkit samples:<br/> <a href="https://schoolnursenet.nasn.org/oregonschoolnurses/resources/covid-19-toolkit-main-page">https://schoolnursenet.nasn.org/oregonschoolnurses/resources/covid-19-toolkit-main-page</a></p> <p>Dayville Communicable Disease Plan - <a href="https://drive.google.com/file/d/13WK2AYF3vfFp4VWGbZP2p6x-JKp8LBDu/view">https://drive.google.com/file/d/13WK2AYF3vfFp4VWGbZP2p6x-JKp8LBDu/view</a></p>   |
| <p><b>Exclusion Measures</b><br/>         Exclusion of students and staff who are diagnosed with certain communicable diseases<br/> <a href="#">OAR 333-019-0010</a></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:</p> <p>OHA Communicable Disease Guidance for Schools: Communicable Disease Guidance for Schools</p> <ul style="list-style-type: none"> <li>o Symptom-Based Exclusion Guidelines</li> <li>o Transmission Routes</li> <li>o Prevention or Mitigation Measures</li> <li>o School Attendance Restrictions and Reporting</li> </ul> <p>Do Not Send Ill Student to School Letter link:<br/> <a href="https://drive.google.com/drive/folders/1qRLarskNdERUoOwGJwXkh6CMBok4zda4">https://drive.google.com/drive/folders/1qRLarskNdERUoOwGJwXkh6CMBok4zda4</a></p> <p>Exclusion guidelines: <a href="https://www.oregon.gov/ode/students-and-family/healthsafety/Documents/COVID-19%20Exclusion%20Summary%20Chart.pdf">https://www.oregon.gov/ode/students-and-family/healthsafety/Documents/COVID-19%20Exclusion%20Summary%20Chart.pdf</a></p> <p>RSSL Guidance - <a href="https://www.oregon.gov/ode/students-and-family/healthsafety/Pages/RSSL-Guidance.aspx">https://www.oregon.gov/ode/students-and-family/healthsafety/Pages/RSSL-Guidance.aspx</a></p> |
| <p><b>Isolation Space</b><br/>         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.</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><b>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?</b></p> <p>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</p>  |



## Policies, protocols, procedures and plans already in place

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[OAR 581-022-2220](#)

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.

### **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.

### **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:

- 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."
- 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").

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.

### **What about plans if a parent doesn't pick up a sick child?**

Student will remain in isolation.

### **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."



## Policies, protocols, procedures and plans already in place

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**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.

### **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."

### **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.

### **Do schools need more than one isolation space? ... What if screening on arrival leads to 5-10 students "isolated" at once?**

Guidance emphasizes taking measures to reduce exposure; decisions about size, location, and number of isolation spaces for a given school should reflect consideration of those required measures.

### **Can the school nurse [or other health staff] serve the student in isolation at the same time as healthy? Even if they properly remove PPE for the healthy visit, and then put PPE back on to return to the isolated student?**

Guidance talks about having designated staff to supervise. Not explicit, but could be read as requiring a separate individual. For nurse specifically, appropriate PPE for sick care is emphasized, along with removing and \*disposing\* of PPE after care -- so, similar to other health care settings, using appropriate hygiene between every "patient" is emphasized.

### **We're worried about stigma and the impact on mental health when these isolation measures are implemented.**

Guidance recommends taking measures to reduce fear, anxiety, and stigma related to isolation. Remember that isolation is not a diagnosis; it is recognition that someone is sick, and needs extra care. Take measures such as considering signage - labeling "Care space" instead of "Dirty room" etc. explain the use of PPE, "something we do to take care of one



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another, something I do with everyone."

**One of my principals was concerned about Isolation vs restraint - How do we choose the staff that will be in the isolation room and what risk are we putting them in? What if a student does not want to isolate until a parent picks them up, can we force them for the safety of everyone else in the cohort? What if a student does not have a parent to pick them up, can we send symptomatic students home by bus?**

Sent to ODE for clarification

**We need more detail about isolation recommendations. What are acceptable barriers to be used in the isolation space? Can it be divided off by a screen? hospital curtains? shower curtains? ...hanging curtains, screens, plastic walls, specific recommendations? Masks and 3 feet apart? Is it still 35 sq feet if masked?**

Sent to OHA for clarification

**Updated 7/31/2020:** Guidance version 3.0.1 requires 35sq feet AND face covering for all individuals age 5 and up.

**Educator Vaccination**  
[OAR 333-019-1030](#)

<https://secure.sos.state.or.us/oard/viewSingleRule.action?ruleVrsnRsn=286290>

**Emergency Plan or  
Emergency Operations  
Plan**  
[OAR 581-022-2225](#)

In process of developing, revisions will be in place by September 30, 2022.

**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"> <li>• Educates staff, families, and students on policies regarding visitors and volunteers, ensuring health and safety are being maintained.</li> <li>• In consultation with district leadership and LPHA staff, determines the level and type of response that is required/necessary.</li> <li>• Acts as key spokesperson to communicate health-related matters within school community members, health partners, and other local partners.</li> </ul> | Dr. Davida Irving             | same                 |
| School Safety Team Representative ( <i>or staff member knowledgeable about risks within a school, emergency response, or operations planning</i> ) | <ul style="list-style-type: none"> <li>• Trains staff at the start of the academic year and at periodic intervals on communicable disease management procedures.</li> <li>• Leads debrief of communicable disease event, informing continuous improvement of the planning, prevention, response, and recovery system.</li> </ul>   | Dr. Davida Irving             | same                 |

| School planning team members  | Responsibilities:  | Primary Contact (Name/Title): | Alternative Contact: |
|---|--|-------------------------------|----------------------|
| Health Representative<br><i>(health aid, administrator, school/district nurse, ESD support)</i>                         | <ul style="list-style-type: none"> <li>Supports building lead/administrator in determining the level and type of response that is necessary.</li> <li>Reports to the LPHA any cluster of illness among staff or students.</li> <li>Provides requested logs and information to the LPHA in a timely manner.</li> </ul>  | Dr. Davida Irving             | same                 |
| School Support Staff as needed<br><i>(transportation, food service, maintenance/custodial)</i>                          | <ul style="list-style-type: none"> <li>Advises on prevention/response procedures that are required to maintain student services.</li> </ul>  | Lori Smith                    | Dr. Davida Irving    |
| Communications Lead<br><i>(staff member responsible for ensuring internal/external messaging is completed)</i>          | <ul style="list-style-type: none"> <li>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.</li> <li>Shares communications in all languages relevant to school community.</li> </ul>                               | Dr. Davida Irving             | same                 |
| District Level Leadership Support<br><i>(staff member in which to consult surrounding a communicable disease event)</i> | <ul style="list-style-type: none"> <li>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.</li> <li>Responds to media inquiries during the communicable disease event and ensures that those responsible for communication are designated speakers.</li> </ul> | Dr. Davida Irving             | same                 |

| School planning team members                             | Responsibilities:  | Primary Contact (Name/Title): | Alternative Contact: |
|--|--|-------------------------------|----------------------|
| Main Contact within Local Public Health Authority (LPHA) | <ul style="list-style-type: none"> <li>• Notifies Building Lead/Administrator of communicable disease outbreak and offers recommendations for appropriate response.</li> <li>• Key spokesperson to communicate on health-related matters with community members, health facility staff, and other local community partners.</li> </ul> | Dr. Davida Irving             | same                 |
| Others as identified by team                             |  |                               |                      |



## 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<sup>1</sup>, etc.)

<sup>1</sup> 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.

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**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](#)

**Table 3. Centering Equity**

| OHA/ODE Recommendation(s)   | Response:  |
|---|--|
| <p>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.</p> | <ul style="list-style-type: none"> <li>• By Aug. 31, 2022, 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.</li> <li>• By Oct. 15, 2022, Dr. Irving in partnership with teachers will complete the empathy interview processes to understand student barriers within all populations of students in the school.</li> <li>• By Oct. 31, 2022, 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.</li> </ul> |

| OHA/ODE Recommendation(s)   | Response:   |
|---|---|
| <p>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.</p> | <ul style="list-style-type: none"> <li>• By Sept. 1, 2022, 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.</li> <li>• By Oct. 1, 2022, 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.</li> </ul>   |
| <p>What support, training or logistics need to be in place to ensure that the named strategies are understood, implemented, and monitored successfully.</p>   | <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"> <li>• Each quarter (Oct. 7, Jan. 13, &amp; 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.</li> </ul> <p>OHA/ODE Recommendation(s) Response:</p> <ul style="list-style-type: none"> <li>• Dr. Irving in partnership with the teacher, will review the progress of identified students once a quarter (Nov. 11, Feb. 10, &amp; April 28) to ensure the implemented support is achieving the desired result. That evaluation will be shared with students and families.</li> </ul> |

## 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.)

- Community Counseling Solutions – we have contracted with CCS to provide counseling services 10 hours per week.



**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:   |
|---|---|
| <p>Describe how you will devote time for students and staff to connect and build relationships.</p>   | <p>The school commits to creating learning opportunities that foster creative expression, make space for reflection and connection, and center on the needs of the whole child by:</p> <ul style="list-style-type: none"> <li>• Create a process where belonging and connection can be enhanced.</li> <li>• Host a “Meet and Greet Event” for students and parents before the school year begins. This is an Ice Cream social scheduled for August 23, 2022 open to community, families, staff, and students.</li> <li>• Family support nights hosted by Administrators, counselors, and specialists</li> <li>• Because of our limited population, student-led affinity club spaces that are supported by school staff are limited in nature. Our shining star is the Buddy Program that pairs students in grades 7-12 with a younger student for SEL activities.</li> </ul>  |
| <p>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.</p> | <ul style="list-style-type: none"> <li>• Dedicated the first week of school to care and connection, with appropriate social-emotional learning tools to create relationships. This will mean that academic demands are intentionally reduced to ensure that reconnecting with peers and teachers are at the forefront.</li> <li>• Continue with social-emotional curriculum, which provides quality learning experiences, creating deep interpersonal relationships that focus on inclusion.</li> </ul>   |
| <p>Describe how you will link staff, students and families with culturally relevant health and mental health services and supports.</p>   | <ul style="list-style-type: none"> <li>• By Sept. 30, 2022, Dr. Irving will collaborate with district leaders and community partners to share resources and opportunities with our Latinx families, including partnership and collaboration with our local community partner that focuses on supporting this community. Currently, we have three students who have self-identified as Latinx.</li> <li>• By Sept. 30, 2022, Dr. Irving will have on hand a list of referrals to multicultural resources for both physical and mental health services.</li> <li>• By Sept. 1, 2022, Dr. Irving will reach out to community partnerships for mental health services, medical services, food, and shelter to assist students and their families.</li> <li>• By Sept. 1, 2022, all school staff will complete training in QPR (Question, Persuade, and Refer) for suicide prevention and student support.</li> <li>• By Sept. 30, 2022, Dr. Irving will ensure support resources provided to students and families will be made available in multiple languages.</li> </ul> |

| OHA/ODE Recommendation(s)  | Response:  |
|--|--|
| Describe how you will foster peer/student lead initiatives on wellbeing and mental health. | The school will prioritize authentic student voice on social-emotional learning; this will be co-designed with students. SEL will include interactive monthly lessons focused on removing the stigma around mental health and the importance of emotional well-being and belonging. Lessons will be shared in the form of a handout that can be discussed at home with families. |



### 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**

| <p><b>OHA/ODE Recommendation(s)</b><br/>Layered Health and Safety Measures</p> | <p><b>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?</b></p>  |
|--|--|
| <p>COVID-19 Vaccination</p>  | <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.</i></p> <ul style="list-style-type: none"> <li>• By Aug. 29, 2022, the school will promote vaccination by providing information about the COVID-19 vaccine to families encouraging evidence-based information, trust and confidence in vaccines. Utilizing the COVID-19 Pediatric Vaccination Toolkit families will receive a letter and students will bring home a flier during the first week of school.</li> <li>• By Aug. 26, 2022, Dr. Irving will request accessibility kits from OHA to ensure information is accessible in preferred languages in preparation for our first vaccination clinic event.</li> <li>• By Sept. 23, 2022, Dr. Irving will coordinate with Jessica Winegar at Grant County Health Department to host a vaccination clinic on-site.</li> <li>• By March 1, 2022, Dr. Irving will coordinate with Jessica Winegar at the Grant County Health Department to host a spring vaccination clinic on-site during spring conferences.</li> </ul>  |
| <p>Face Coverings</p>  | <p>For all individuals, the use of face coverings is welcomed and encouraged.</p> <ul style="list-style-type: none"> <li>• By Aug. 29, 2022, Dr. Irving will create and post signage and place face coverings at the front door, creating an environment where face coverings are truly welcomed.</li> <li>• By Aug. 26, 2022, Dr. Irving in collaboration with Lonnie Dickens, will identify designated health care spaces within the school and Dr. Irving will create and post signage alerting all students and staff that face coverings are required within the health care space per OAR 333-019-1011.</li> <li>• By Sept. 1, 2022, Dr. Irving will communicate to families that at some point during the school year the school may need to require masking, based on federal, state, or local laws and policies, or to ensure that students with immunocompromising conditions or other conditions that increase their risk for getting very sick with COVID-19 can access in-person learning. The communication will reiterate that students with immunocompromising conditions or other conditions or disabilities that increase risk for getting very sick with COVID-19 will not be placed into separate classrooms or otherwise segregated from other students.</li> <li>• Within 24 hours of when our school-community or county experiences an increase in communicable disease or when the COVID-19 Community Level is high, Dr. Irving will send a communication to all families recommending the use of OHA/ODE Recommendation(s) Layered Health and Safety Measures</li> </ul> |
| <p>Isolation</p>   | <p>Per OAR 581-022-2220 schools must maintain supervised space to isolate the sick that is separate from the space where other health care tasks take place.</p> <ul style="list-style-type: none"> <li>• By Aug. 26, 2022, Dr. Irving and Lonnie Dickens will identify designated isolation spaces for every school day and additional spaces in the event of a communicable disease outbreak.</li> <li>• By Sept. 1, 2022, Dr. Irving will train school staff in isolation protocols for sick students and staff identified at the time of arrival or during the school day according to the CDMP. Individuals with COVID-19 symptoms will be isolated, offered a test, and sent home.</li> </ul>  |

| OHA/ODE Recommendation(s)<br>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?   |
|---|---|
| Symptom Screening   | <p>In communication with families and regularly in our weekly newsletter the school will include information to watch their student for symptoms of communicable disease, including COVID-19, influenza, respiratory syncytial virus (RSV), and gastrointestinal infections. If symptoms are present families are asked to keep their student home and get tested for COVID-19.</p> <ul style="list-style-type: none"> <li>• By Aug. 29, 2022, Dr. Irving will train school staff on the district’s flexible, non-punitive, and supportive paid sick leave policies and practices, designed to encourage sick workers to stay home without fear of retaliation, loss of pay, loss of employment, or other negative impacts. Leave policies per the CBA are in effect.</li> <li>• By Aug. 29, 2022, Dr. Irving will work with Lori Smith to proactively plan to grow substitute teacher capacity by identifying a list of part-time staff who may be able to temporarily fill-in and by utilizing ESSER funds to incentivize applicants.</li> <li>• By Aug. 29, 2022, Dr. Irving will train school staff on district policies related to excused absences for students who are sick, having adopted policies that allow flexible, non-punitive grading practices that support children who are learning at home due to illness.</li> <li>• By Sept. 1, 2022, Lori Smith will create a weekly newsletter template which includes symptoms for communicable disease and instructions to families if/when symptoms are present.</li> <li>• By Sept. 1, 2022, Dr. Irving will create a letter template for notifying families of illness within a classroom. The communication will include the message that staying home when sick can lower the risk of spreading communicable diseases, including the virus that causes COVID-19, to other people.</li> </ul> |
| COVID-19 Testing  | <p>Dayville School District offers access to testing for those with symptoms or exposure to a person with confirmed COVID-19 in an indoor setting through OHA diagnostic and screening testing programs. Both programs are opt-in and families will have the opportunity to enroll their student throughout the school year by completing consent forms.</p> <ul style="list-style-type: none"> <li>• By Aug. 5, 2022, Mrs. La Pine will incorporate consent forms for diagnostic testing and screening testing into the registration system for the school. Details will be given to families regarding each of the testing programs.</li> <li>• Diagnostic testing will 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 or at the direction of local public health, such as during an outbreak response.</li> </ul> <p>This essential access to free testing can help diagnose COVID-19 infection early. Screening testing is 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> <ul style="list-style-type: none"> <li>• By Aug. 26, 2022, Dr. Irving will distribute consent forms for diagnostic testing and screening testing to staff.</li> <li>• By Sept. 1, 2022, Dr. Irving will update student and staff records to reflect who has consented to testing programs.</li> </ul>  |
| Airflow and Circulation   | <ul style="list-style-type: none"> <li>• By Aug. 26, 2022, Lonnie Dickens will schedule monthly service checks of the HVAC system to optimize ventilation. Checks will ensure the system is meeting code requirements, providing acceptable indoor air quality as defined by ASHRAE Standard 62.1 for the current occupancy level for each space in the school.</li> <li>• By Sept. 1, 2022, Dr. Irving will train school staff on increasing ventilation and outdoor air supply by opening windows and doors, using fans and air purifying units in spaces where OHA/ODE Recommendation(s) Layered Health and Safety Measures</li> </ul> <p>BASELINE MEASURES: Outdoor air supply is limited. To the greatest extent possible, outdoor spaces will be utilized for breaks, lunches, and learning.</p>  |

| OHA/ODE Recommendation(s)<br>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?  |
|---|--|
| 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   | <ul style="list-style-type: none"> <li>All teachers will be asked to arrange learning and other spaces so at least 3 feet of distance exists between students to the extent possible to encourage distancing.</li> </ul>   |
| Hand Washing  | During the first month, the school will teach and reinforce proper handwashing and covering coughs and sneezes to lower the risk of spreading viruses, including the virus that causes COVID-19. Throughout the year, the school staff will monitor and reinforce these behaviors. Handwashing will be done before and after meal or snack times and after using the bathroom.   |
| Cleaning and Disinfection                                       | <ul style="list-style-type: none"> <li>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.</li> <li>Surfaces (e.g., door handles, sink handles, drinking fountains, transport vehicles) will be cleaned daily to reduce the risk of germs spreading by touching surfaces.</li> </ul>   |
| Training and Public Health Education                            | <p>The school has a communication protocol that includes informing families of COVID-19 cases within the school community. These communications are meant to provide clarity and supporting materials to community members (in their preferred language) about the specific health and safety protocols in place at the school, and why these might differ from those of nearby schools or be different across school districts.</p> <ul style="list-style-type: none"> <li>By Aug. 29, 2022, Dr. Irving will work with the school safety committee to ensure that staff have a safe place to bring implementation questions and suggestions forward.</li> <li>By Aug. 29, 2022, Dr. Irving will train staff on the district’s health and safety protocols and Lonnie Dickens will introduce the school safety committee for the upcoming school year. The school safety committee oversees the implementation of the health and safety protocols that are inclusive of all staff.</li> <li>By Sept. 15, 2023, teachers will introduce the district’s health and safety protocols to students.</li> <li>By March 1, 2023, Dr. Irving will retrain staff on the district’s health and safety protocols.</li> <li>By April 7, 2023, home room teachers will reteach the district’s health and safety protocols to students.</li> </ul> |

**Table 6.**

**COVID-19 Mitigating Measures**

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| <p><b>OHA/ODE Recommendation(s)</b><br/>Layered Health and Safety Measures</p> | <p><b>MEASURES DURING PERIODS OF HIGH TRANSMISSION*:</b> 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?<br/>*Within the community, high transmission is defined at the county level through <a href="#">CDC COVID-19 Community Levels</a>. 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).</p>   |
| <p>COVID-19 Vaccination</p>  | <p>Dayville School District has approximately 65 kids and 15 staff. Those staff who desire vaccination have already been vaccinated as have students. We will encourage and host booster clinics during periods of high transmission.</p>  |
| <p>Face Coverings</p>  | <p>During periods of high transmission:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Within 1 school day, Dr. Irving in consultation with Jessica Winegar (Director, Grant County Health Clinic), will strongly recommend universal indoor masking. Dr. Irving will create and post signage at all entrance doors, and Ms. Baker will ensure face coverings continue to be available at entrance doors. Per OAR 333-019-1011 face covering are required within health care spaces. These spaces within the school are designated by signage.</li> <li><input type="checkbox"/> Within 1 school day, Dr. Irving will send a message to families when the COVID-19 Community Level is high, or when our school experiences a large outbreak or high absenteeism. The message will ask school community members to wear masks or respirators (such as N95s or KN95s) while indoors to provide greater protection to all. Wearing a well-fitting mask consistently and correctly reduces the risk of spreading the virus that causes COVID-19.</li> </ul> <p><b>*** Understand that the metric for high transmission rates is extremely inequitable and biased in a county with a population density of 1.2 ppl/mi<sup>2</sup>. When 20 positive cases are confirmed, our numbers are silly stupid per OHA when scaling to the ridiculous “per 100,000” metric that they report. This is extremely biased, inequitable and unfair due to idiots sitting in Salem. Twenty cases is not unheard of when an entire community will show up to funeral for one individual.</b></p> |
| <p>Isolation</p>   | <p>Per OAR 581-022-2220 schools must maintain space which isolates the sick or injured.</p>  |
| <p>Symptom Screening</p>   | <p>During periods of high transmission:</p> <ul style="list-style-type: none"> <li>• Within 1 school day, Dr. Irving will send a message to families about the active outbreak or COVID-19 Community Level categorization of high (see face coverings message).</li> </ul> <p>In family communications these messages will be reinforced:</p> <ul style="list-style-type: none"> <li>• 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.</li> <li>• Staying home when sick can lower the risk of spreading infectious diseases, including the virus that causes COVID-19, to other people.</li> <li>• The school has adopted flexible, non-punitive, and supportive policies and practices, designed to encourage sick individuals to stay home without negative impacts.</li> </ul> <p>Within 2 school days, Dr. Irving will retrain staff on identifying symptoms of illness associated with communicable disease and asked to monitor themselves and students daily. Per OAR, schools must maintain space which isolates the sick or injured.</p>   |

| <b>OHA/ODE Recommendation(s)</b><br>Layered Health and Safety Measures | <b>MEASURES DURING PERIODS OF HIGH TRANSMISSION*:</b> 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?<br>*Within the community, high transmission is defined at the county level through <a href="#">CDC COVID-19 Community Levels</a> . 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 Testing   | Dr. Irving will send a message to families (see face coverings and symptom screening message) offering the opportunity to opt-in to the diagnostic testing or screening programs by completing consent forms.   |
| Airflow and Circulation  | Lonnie Dickens will ensure the HVAC system is optimizing ventilation by checking service records and code recommendations. An extra effort will be made to increase ventilation and outdoor air supply by opening windows and doors, using fans and air purifying units.  |
| Cohorting <sup>2</sup>   | Dayville School District will 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: <ol style="list-style-type: none"> <li>1. At the school level: ≥ 30% absenteeism, with at least 10 students and staff absent</li> <li>2. At the cohort level: ≥ 20% absenteeism, with at least 3 students and staff absent – this number is arbitrary and doesn’t mean much when we may have a class of six students. If two students are absent, we are automatically above the threshold, even if the students are out of town with parents.</li> </ol> |
| Physical Distancing  | During periods of high transmission:<br>Within 2 school days, Dr. Irving will retrain teachers and students about the importance of physical distancing. The following steps will be taken: <ul style="list-style-type: none"> <li>• All school waiting spaces, eating spaces, and classroom desks will be spaced at least 3 feet between students.</li> <li>• Where lines need to form, spaces will be marked reminding those waiting to maintain distance.</li> <li>• When and where possible indoor activities will be moved outdoors to increase distance and ventilation.</li> </ul>   |
| Hand Washing   | Within 1 school day, home room teachers will reteach proper handwashing and covering coughs and sneezes. Additionally, teachers will monitor students to encourage handwashing before entering the classroom, and before and after mealtimes.   |
| Cleaning and Disinfection  | During periods of high transmission: <ul style="list-style-type: none"> <li>• Within 1 school day, Lonnie Dickens and school custodial staff will ensure clean surfaces (e.g., door handles, sink handles, drinking fountains, transport vehicles) twice a day (before school and at lunch time) to reduce the risk of germs spreading by touching surfaces.</li> <li>• If a classroom has had a sick person or someone who tested positive for COVID-19 within the last 24 hours, Lonnie Dickens and school custodial staff will ensure the space will be cleaned and disinfected.</li> </ul>  |
|  | During periods of high transmission:  |

<sup>2</sup> 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.

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| <b>OHA/ODE Recommendation(s)</b><br>Layered Health and Safety Measures | <b>MEASURES DURING PERIODS OF HIGH TRANSMISSION*:</b> 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?<br>*Within the community, high transmission is defined at the county level through <a href="#">CDC COVID-19 Community Levels</a> . 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).   |
| Training and Public Health Education                                   | <ul style="list-style-type: none"> <li>• Within 1 school day, Dr. Irving will continue communication protocol which includes informing families of COVID-19 cases within the school community. These communications provide clarity and supporting materials to community members (in their preferred language) about the specific health and safety protocols in place at the school, and why these might differ from those of nearby schools or be different across school districts.</li> <li>• Within 1 school day, Dr. Irving will retrain staff to ensure that health and safety protocols are reviewed and strengthened. All staff will be asked to reteach lessons on the health and safety protocols to students.</li> </ul> |

**Table 7. COVID-19 Mitigating Measures**

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| <b>OHA/ODE Recommendation(s)</b><br>Layered Health and Safety Measures | <b>STEPS FOR GRADUAL RETURN TO BASELINE RESPONSE:</b> 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   | As the school transitions out of periods of high transmission slowly returning to baseline: <ul style="list-style-type: none"> <li>• For 4 weeks after the outbreak subsides or the COVID-19 Community Level is categorized as low, Dr. Irving will provide information within the weekly school newsletter informing families of where they can get vaccinated or boosted in the community. Dr. Irving will use tools and resources to inform families of the benefits of being vaccinated and boosters against COVID-19.</li> </ul>   |
| Face Coverings   | As the school transitions out of periods of high transmission slowly returning to baseline: <ul style="list-style-type: none"> <li>• For 10 school days after the outbreak subsides or the COVID-19 Community Level is categorized as low,</li> <li>• 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.</li> <li>• 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).</li> </ul> |
|  | Per OAR 581-022-2220 schools must maintain space which isolates the sick or injured.  |

| <b>OHA/ODE Recommendation(s)</b><br>Layered Health and Safety Measures | <b>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?</b>   |
|--|---|
| Isolation  |   |
| 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"> <li>• 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.</li> <li>• Staying home when sick can lower the risk of spreading infectious diseases, including the virus that causes COVID-19, to other people.</li> <li>• The school has adopted flexible, non-punitive, and supportive policies and practices, designed to encourage sick individuals to stay home without negative impacts.</li> </ul> |
| COVID-19 Testing   | <p>As the school transitions out of periods of high transmission slowly returning to baseline:</p> <ul style="list-style-type: none"> <li>• 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.</li> <li>• 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.</li> </ul>   |
| 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"> <li>• After the COVID-19 Community Level is categorized as low, activities where the school community comes together can be held indoors.</li> </ul>  |
| Cohorting  | <p>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.</p>   |
| Physical Distancing  | <p>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:</p> <ul style="list-style-type: none"> <li>• 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.</li> <li>• Minimize time standing in lines, including marking spaces on floor, or encouraging one-way traffic flow in constrained spaces.</li> </ul>   |
| Hand Washing   | <p>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.</p> <ul style="list-style-type: none"> <li>• 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.</li> <li>• 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.</li> </ul>   |

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| <p><b>OHA/ODE Recommendation(s)</b><br/>Layered Health and Safety Measures</p> | <p><b>STEPS FOR GRADUAL RETURN TO BASELINE RESPONSE:</b> 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?</p>   |
|  | <ul style="list-style-type: none"> <li>• Five days after the outbreak subsides, Lonnie Dickens will restock every classroom with a supply of hand sanitizer containing at least 60% alcohol for use. Hand sanitizers will be stored up, away, and out of sight of students.</li> </ul>   |
| <p><b>Cleaning and Disinfection</b></p>  | <p>As the school transitions out of periods of high transmission slowly returning to baseline:</p> <ul style="list-style-type: none"> <li>• 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.</li> <li>• 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.</li> </ul> |
| <p><b>Training and Public Health Education</b></p>                             | <p>As the school transitions out of periods of high transmission slowly returning to baseline:</p> <ul style="list-style-type: none"> <li>• After the outbreak subsides, Dr. Irving will communicate to families the process of return to baseline activities. These communications will provide clarity and supporting materials to community members (in their preferred language) about the specific health and safety protocols in place at the school, and why these might differ from those of nearby schools or be different across school districts.</li> </ul>  |

## 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.

Plan is available at <https://www.dayvilleschools.com/communicable-disease>

Date Last Updated: **August 12, 2022**

Date Last Practiced: **n/a**