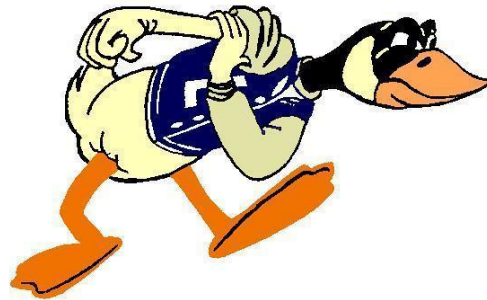


# School-Level COVID-19 Management Plan

## School Year 2022-23



### School/District/Program Information

District or Education Service District Name and ID: \_\_\_\_\_ Lake County School District # 7 \_\_\_\_\_ 2059

School or Program Name: A.D. Hay Elementary/Fremont Elementary

Contact Name and Title: Susan Warner, Elementary Principal, Michael Carter, Lake County School District # 7 Superintendent

Contact Phone: 541-947-3347 Contact Email: carter.michael@lakeview.k12.or.us

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.oregon.gov/OSDH/CommunicableDisease/CommunicableDiseaseManagementPlan.aspx)

A Communicable Disease Management committee was formed in July, 2020 to include the following stakeholders: **Michael Carter, Superintendent LCSD#7, Lane Stratton Principal/parent, Christopher Rose compliance/parent, Lonnie Chavez Student Services and Special Education Dir., Tandi Gerber district office/parent, Janet Melsness Business Mgr., Susan Warner, Evan Reese technology/parent, Tina Cobian, custodian, Quinn McKay compliance/maintenance, Judy Clarke and Jill Harlan LPHA, OSEA and LOEA union leadership.**

**The current stakeholders for this committee are: Michael Carter, Superintendent LCSD#7, Hilary Hulseman LHS Principal/parent, Challis Young, LHS Vice Principal/Athletic Director, Lloyd Hartley compliance/parent, Jennifer Schulze Student Services, Tandi Gerber Executive Assistant, Janet Melsness Business Mgr., Susan Warner Elementary Principal, Dusty Counts, Elementary Vice Principal/parent, Evan Reese Technology, Roger Buhrle, Custodian, Quinn McKay compliance/maintenance, Judy Clarke and Miranda Philibert Lake County Public Health, OSEA and LOEA union leadership. The committee will regularly review and update the Covid Management Plan , Communicable Disease Plan and LCSD#7 policy.**

#### **Introduction**

Students and staff health and safety is a priority of the Lake County School District #7. One area of health and wellness in the school setting includes controlling communicable diseases. Providing a safe, comfortable, and healthy environment facilitates the educational process, encourages social development, and allows children to acquire healthy attitudes toward school (NRC, 2020).

Illness and injury are not uncommon in the school setting, and thus, policies, procedures, and guidance in regards to infection control are of the utmost importance. When children are injured or feel unwell, it can create difficulties in the school setting in regards to both risk to others and the ability of a child to participate in class or educational activities fully. Like the Whole School, Whole Community, Whole Child model, staff collaborate for the best outcomes of the student population and individuals. In this regard, staff must be prepared to have accessible resources and materials to identify appropriate measures and interventions for child health issues. (ACSD, 2020)

The purpose of this comprehensive guide is to provide infection control guidance and practice standards to the employees of LCSD7. This document combines the district's Communicable Disease Plan, Exposure Control Plan, and Pandemic Plan with a COVID-19 Specific Addendum for a Comprehensive Communicable Disease Management Plan.

The role of the Communicable Disease Management safety was to review protocols to limit the spread of COVID-19 and respond to outbreaks of COVID-19 in the Lake County School District # 7. The committee will also write and revise policy to address the notification of any suspected outbreaks, trace contact logs, clustering or confirmed cases of COVID 19.



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

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We will conduct admin meetings in late July and early August 2022 discussing updates to the Covid Management Plan, Communicable Disease Management Plan and LCSD#7 policy. Training has been planned for all LCSD#7 staff during in-service week (August 24 – August 31, 2022) to provide appropriate safety and protocol training for communicable diseases. This training will include enhanced cleaning and disinfecting procedures, student and staff screening for all staff.

**Communicable Disease Plan:**

Communicable disease control and prevention is of significant importance in creating a safe and healthy environment for students and staff. A communicable disease is an infectious disease transmissible by contact with infected individuals or their bodily discharges or fluids, by contact with contaminated surfaces or objects, by ingestion of contaminated food or water, or by direct or indirect contact with disease vectors. Although the terms communicable disease and contagious disease are often used interchangeably, it is important to note that not all communicable diseases that are spread by contact with disease vectors are considered to be "contagious" diseases since they cannot be spread from direct contact with another person (ACPHD, 2013). In the school setting, there is a prevention-oriented approach for communicable disease, which is grounded in education, role modeling, and standard precautions and hygiene. However, the nature of a population-based setting lends to the need to establish practices for measures and interventions associated with exposures or potential exposure. This section focuses on a population-based set of practices for communicable disease prevention. The subsequent Exposure Control Plan discusses work practice control measures for staff.

**LCSD7 Board Policies:**

- Board Policy GBEB – Communicable Diseases-Staff
- Administrative Regulation GBEB-AR – Communicable Diseases-Staff
- Board Policy JHCC – Communicable Diseases-Students
- Administrative regulation JHCC-AR – Communicable Diseases-Students
- Board Policy ING – Animals in District Facilities · Administrative Regulation ING-AR – Animals in District Facilities



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

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- Board Policy EBC/EBCA – Emergency Procedures and Disaster Plan

Oregon Legislation:

OAR 333-019-0010 Disease-Related School, Child Care, and Worksite Restrictions: Imposition of Restrictions OAR 581-022-2200

Health Services ORS 410-133-0000 School-Based Health Services

Oregon Health Authority & Oregon Department of Education

Oregon Communicable Disease Guidelines for School

**Communicable Disease Prevention:**

There are a multitude of methods that can be applied to control communicable diseases at a variety of levels. Some of the most common include vector control, hygiene, sanitation, and immunization. Fully endorsing the control and prevention of communicable diseases requires a level of understanding of how communicable diseases can be spread.

How these communicable diseases are spread depends on the specific infectious agent. Common ways in which communicable diseases spread include:

- Physical contact with an infected person, such as through touch (staphylococcus), sexual intercourse (gonorrhea, HIV), fecal/oral transmission (hepatitis A), or droplets (influenza, TB);
- Contact with a contaminated surface or object (Norovirus), food (salmonella, E. coli), blood (HIV, hepatitis B, hepatitis C), or water (cholera, listeria);
- Bites from insects or animals capable of transmitting the disease (mosquito: malaria and yellow fever; flea: plague); and
- Travel through the air, such as measles.

In the school setting, the most frequent risks are associated with direct contact with ill individuals or contamination of surfaces or through airborne transmission. Primary sources of prevention include hand and surface hygiene, isolation, exclusion, and standard precautions. This section of the plan will provide a brief overview of: Common Childhood Infectious Disease, Vaccines, and



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Respiratory/Cough Etiquette.

This section will provide procedures for addressing the following communicable disease issues in the school setting.

The district **Exposure Control Plan** in this manual discusses **Standard Precautions** in detail as well as **Transmission Based Precautions**, which include contact, droplet, and airborne precautions. The District Pandemic Plan will address measures specific to novel virus response.

#### **Common Childhood Infectious Disease:**

There are a variety of Common Childhood Infectious Diseases that are regularly encountered in the school setting. Routine childhood respiratory illnesses such as the common cold (adenoviruses, coronaviruses, and rhinoviruses) or conditions such as bronchitis, sinusitis, and tonsillitis caused by a variety of bacteria and viruses occur throughout the year. Other conditions such as gastroenteritis (norovirus most frequently) and croup (most commonly parainfluenza) and influenza (A & B) most often occur seasonally. Other common conditions include strep throat, hand-foot, and mouth disease, fifth's disease, and staph skin infections. Other, more severe infectious diseases occur sporadically throughout the district throughout the school year (BCDC, 2009).

#### **Vaccines:**

In the school setting, vaccines are an important piece of communicable disease control. Vaccines are a requirement for attending school in Oregon. However, it is important to remark that certain populations may not be vaccinated because of medical contraindications or because of religious or philosophical decisions. Each school has a record of which students are and are not vaccinated with routine childhood immunizations as a primary control measure for outbreaks of vaccine-preventable diseases.

#### **Hygiene:**

Prevention oriented measures are grounded in education of how diseases are transmitted and practice application related to appropriate sanitizing measures and precautions. Hygiene and sanitation are some of the most important methods of disease prevention. Handwashing is one of the single most important methods of keeping germs at bay, specifically in the school setting. Appropriate handwashing practices should be taught, role-modeled, and practiced. Age appropriate hand hygiene curriculum can be found from a variety of resources and should be provided annually in the fall and as needed during peak illness season or specific increases of disease in the school setting. Hand sanitizer, while not effective against a large number of pathogens, should



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be made available for times that handwashing is not immediately accessible. Hand sanitizer should be easily accessible throughout the building, specifically in high contact areas and at entrances and exits as feasible. Hand sanitizers should be accessible in each area.

Students and staff should wash their hands:

- Before, during, and after preparing food
- Before eating food
- Before and after caring for someone at home who is sick with vomiting or diarrhea
- Before and after treating a cut or wound
- After using the toilet
- After changing diapers or cleaning up a child who has used the toilet
- After blowing your nose, coughing, or sneezing
- After touching an animal, animal feed, or animal waste
- After handling pet food or pet treats
- After touching garbage (CDC, 2020)

**Respiratory Hygiene/Cough Etiquette:**

Respiratory hygiene and cough etiquette are terms used to describe infection prevention measures to decrease the transmission of respiratory illness (e.g., influenza and cold viruses). A respiratory infection is spread when a person who is infected with a virus coughs or sneezes. The droplets released from an ill person's cough or sneeze can travel for several feet, reaching the nose or mouth of others and causing illness. Viruses can spread easily from person to person through direct contact via touching or shaking hands. Droplets can also live for a short time on a variety of objects such as high touch areas like doorknobs or desks. Because some individuals cough without having respiratory infections (e.g., persons with chronic obstructive lung disease), we do not



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always know who is infectious and who is not. Therefore, respiratory hygiene and cough etiquette are essential components to protecting yourself from illness and preventing others from becoming ill. Like hand hygiene, respiratory hygiene is part of the standard precautions that should be taught, practiced, and role-modeled to prevent the spread of disease.

**Environmental Surface Cleaning:**

Clean facilities contribute to healthy environments and minimize the risk of communicable disease transmission. Some of the important concepts associated with a reduction in illness include scheduling routine cleaning of each classroom and common areas, ensuring appropriate stock of appropriate sanitizers and disinfectants, ensuring garbage is emptied regularly, and ensuring any classrooms with pets have a cleaning plan in place to minimize odors or contamination. While environmental cleaning is primarily governed by facilities management and custodial services, there are specific classroom measures that can be practiced to improve cleanliness and reduce the risk of illness transmission during peak illness such as increasing access to sanitizing wipes, tissue and hand sanitizer.

**Exclusion Measures**

Exclusion of students and staff who are diagnosed with certain communicable diseases

[OAR 333-019-0010](#)

**Screening and Exclusion:** Safety and Health Plans will include information on COVID 19, quarantine protocol and responses to outbreaks. LCSD#7 maintains nursing services through the Lake County Health Department. The staff at Lake County Health Department has been partners through the process.

Students or staff demonstrating symptoms will be referred to the isolation room until office staff/school nurse can evaluate the student or staff. Parents/guardians will be notified. Staff will use face shields or face coverings and other appropriate PPE as necessary. Posters and literature will continue to be posted and available to review symptoms of Covid strains as needed.

Incorporating trace contact information into our student database system will quickly provide information to the Lake County Public Health Department to assess outbreaks. LCSD#7 has developed a response protocol with the Lake County Health Department in the case of an outbreak following the plan they have developed.

Incorporating trace contact information into our student database system will quickly provide information to the Lake County Public Health Department to assess outbreaks. Any outbreak would initiate a response team at multiple levels.

- Building administration and teaching staff would communicate with appropriate stakeholders.
- The student or staff would move into a quarantine status if screening determined they had symptoms or a test resulted in a positive outcome.
- An educational plan for student learning would initiate immediately with classroom teachers and technology staff.



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- Students would have a Chromebook checked out and the technology staff put on notice for technology support for students and parents as needed at home.
- Staff would communicate lesson plans and educational plans with the administration and substitute teacher.
- Appropriate written and oral communication would be initiated by stakeholders.
- A re-entry plan would be communicated to students or staff.

Due to the small size of our school and local community an outbreak could possibly affect our entire district, this is why we have chosen to keep our cohort/class sizes small and separate whenever possible. Education would immediately go into effect to implement distance learning for any students or staff affected.

**Common Childhood Infectious Disease:**

There are a variety of Common Childhood Infectious Diseases that are regularly encountered in the school setting. Routine childhood respiratory illnesses such as the common cold (adenoviruses, coronaviruses, and rhinoviruses) or conditions such as bronchitis, sinusitis, and tonsillitis caused by a variety of bacteria and viruses occur throughout the year. Other conditions such as gastroenteritis (norovirus most frequently) and croup (most commonly parainfluenza) and influenza (A & B) most often occur seasonally. Other common conditions include strep throat, hand-foot, and mouth disease, fifth disease, and staph skin infections. Other, more severe infectious diseases occur sporadically throughout the district throughout the school year (BCDC, 2009).

**Vaccines:**

In the school setting, vaccines are an important piece of communicable disease control. Vaccines are a requirement for attending school in Oregon. However, it is important to remark that certain populations may not be vaccinated because of medical contraindications or because of religious or philosophical decisions. Each school has a record of which students are and are not vaccinated with routine childhood immunizations as a primary control measure for outbreaks of vaccine-preventable diseases.

**Communicable Disease Exclusion:**

Communicable diseases are transmitted from person to person by various routes. While some conditions are restrictable based on diagnosis, more often early identification of signs and symptoms of communicable disease is of paramount importance to increase





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the health of the school population and decrease school absenteeism. In the school environment, many communicable diseases are easily transmitted from one individual to another. Effective control measures include education, avoidance of risk factors, sanitation, vaccination, early recognition of symptoms, health assessment, prompt diagnosis, and adequate isolation or treatment (ODE, 2020). Restriction of some communicable diseases may be imposed by the local public health authority for reportable conditions (Oregon Administrative Rule 333-019-0010), which is addressed in a subsequent section. Oregon public health law mandates that persons who work in or attend school who are diagnosed with certain diseases or conditions be excluded from school until no longer contagious. However, diagnosis often presumes a physician visit and specific testing, and schools must often make decisions regarding exclusion based on non-diagnostic but readily identifiable signs or symptoms.

#### Restrictable Diseases:

Restrictable diseases are specific infectious disease diagnoses that require students or staff to remain at home for a specified amount of time to limit transmission. Restriction is typically associated with the communicability or severity of a disease. Restrictable diseases are reportable to the local health department (LCHD). The local health department typically notifies school health services. Although there are occasions when the parent will notify the school first. Students with diagnoses of disease restrictable by the local public health authority (LCHA) under Oregon Administrative Rule (OAR) 333-019-0010 should return to school when documentation is obtained from the local health department (LHD) indicating they are no longer communicable including: Diphtheria, Measles, Salmonella, Tophi infection, Shigellosis, Shiga-toxigenic Escherichia coli (STEC) infection, Hepatitis A, Tuberculosis, Pertussis, Rubella, Acute Hepatitis B., and COVID-19 is also declared a restrictable condition under OAR 333-018-0900.

#### 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](https://www.oregon.gov/ODE/2020-03-02-03-03-04-05-06-07-08-09-10-11-12-13-14-15-16-17-18-19-20-21-22-23-24-25-26-27-28-29-30-31-32-33-34-35-36-37-38-39-40-41-42-43-44-45-46-47-48-49-50-51-52-53-54-55-56-57-58-59-60-61-62-63-64-65-66-67-68-69-70-71-72-73-74-75-76-77-78-79-80-81-82-83-84-85-86-87-88-89-90-91-92-93-94-95-96-97-98-99-100-101-102-103-104-105-106-107-108-109-110-111-112-113-114-115-116-117-118-119-120-121-122-123-124-125-126-127-128-129-130-131-132-133-134-135-136-137-138-139-140-141-142-143-144-145-146-147-148-149-150-151-152-153-154-155-156-157-158-159-160-161-162-163-164-165-166-167-168-169-170-171-172-173-174-175-176-177-178-179-180-181-182-183-184-185-186-187-188-189-190-191-192-193-194-195-196-197-198-199-200-201-202-203-204-205-206-207-208-209-210-211-212-213-214-215-216-217-218-219-220-221-222-223-224-225-226-227-228-229-230-231-232-233-234-235-236-237-238-239-240-241-242-243-244-245-246-247-248-249-250-251-252-253-254-255-256-257-258-259-260-261-262-263-264-265-266-267-268-269-270-271-272-273-274-275-276-277-278-279-280-281-282-283-284-285-286-287-288-289-290-291-292-293-294-295-296-297-298-299-300-301-302-303-304-305-306-307-308-309-310-311-312-313-314-315-316-317-318-319-320-321-322-323-324-325-326-327-328-329-330-331-332-333-334-335-336-337-338-339-340-341-342-343-344-345-346-347-348-349-350-351-352-353-354-355-356-357-358-359-360-361-362-363-364-365-366-367-368-369-370-371-372-373-374-375-376-377-378-379-380-381-382-383-384-385-386-387-388-389-390-391-392-393-394-395-396-397-398-399-400-401-402-403-404-405-406-407-408-409-410-411-412-413-414-415-416-417-418-419-420-421-422-423-424-425-426-427-428-429-430-431-432-433-434-435-436-437-438-439-440-441-442-443-444-445-446-447-448-449-450-451-452-453-454-455-456-457-458-459-460-461-462-463-464-465-466-467-468-469-470-471-472-473-474-475-476-477-478-479-480-481-482-483-484-485-486-487-488-489-490-491-492-493-494-495-496-497-498-499-500-501-502-503-504-505-506-507-508-509-510-511-512-513-514-515-516-517-518-519-520-521-522-523-524-525-526-527-528-529-530-531-532-533-534-535-536-537-538-539-540-541-542-543-544-545-546-547-548-549-550-551-552-553-554-555-556-557-558-559-560-561-562-563-564-565-566-567-568-569-570-571-572-573-574-575-576-577-578-579-580-581-582-583-584-585-586-587-588-589-590-591-592-593-594-595-596-597-598-599-600-601-602-603-604-605-606-607-608-609-610-611-612-613-614-615-616-617-618-619-620-621-622-623-624-625-626-627-628-629-630-631-632-633-634-635-636-637-638-639-640-641-642-643-644-645-646-647-648-649-650-651-652-653-654-655-656-657-658-659-660-661-662-663-664-665-666-667-668-669-670-671-672-673-674-675-676-677-678-679-680-681-682-683-684-685-686-687-688-689-690-691-692-693-694-695-696-697-698-699-700-701-702-703-704-705-706-707-708-709-710-711-712-713-714-715-716-717-718-719-720-721-722-723-724-725-726-727-728-729-730-731-732-733-734-735-736-737-738-739-740-741-742-743-744-745-746-747-748-749-750-751-752-753-754-755-756-757-758-759-760-761-762-763-764-765-766-767-768-769-770-771-772-773-774-775-776-777-778-779-780-781-782-783-784-785-786-787-788-789-790-791-792-793-794-795-796-797-798-799-800-801-802-803-804-805-806-807-808-809-810-811-812-813-814-815-816-817-818-819-820-821-822-823-824-825-826-827-828-829-830-831-832-833-834-835-836-837-838-839-840-841-842-843-844-845-846-847-848-849-850-851-852-853-854-855-856-857-858-859-860-861-862-863-864-865-866-867-868-869-870-871-872-873-874-875-876-877-878-879-880-881-882-883-884-885-886-887-888-889-890-891-892-893-894-895-896-897-898-899-900-901-902-903-904-905-906-907-908-909-910-911-912-913-914-915-916-917-918-919-920-921-922-923-924-925-926-927-928-929-930-931-932-933-934-935-936-937-938-939-940-941-942-943-944-945-946-947-948-949-950-951-952-953-954-955-956-957-958-959-960-961-962-963-964-965-966-967-968-969-970-971-972-973-974-975-976-977-978-979-980-981-982-983-984-985-986-987-988-989-990-991-992-993-994-995-996-997-998-999-1000)

Additional training will be provided during in-service week to address updated procedures for isolation of any ill or exposed students or staff. Isolation protocol, designated isolation rooms and staff for the isolation room will be presented during an in-service training for Lake County School District # 7 in each building or department. During this training protocol for reporting potential cases of COVID-19, cohorts, cross contamination and daily logs will also be presented.

LCSD#7 in partnership with LBL, our data service provider has developed daily student logs and cohort logs to include all the required components.

**All logs shall include:**



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**Student's name**

**Drop off/pick-up time**

**Student and parent contact information**

**All persons and contact information the student was in contact with**

School secretaries have developed procedures for maintaining logs, forms with LBL and protocol to address school reports, response to potential outbreaks.

**District Compliance Officer (social distancing and PPE): Lloyd Hartley**

**Contact Tracing and Daily Logs: Bonnie Langum, Carlee Albertson, Tandilan Gerber**

**Isolation Room Staff: Bonnie Langum, Carlee Albertson**

**On-site nurse: Miranda Philibert**

**A.D. Hay Elementary Isolation Room: Room # 201**

**(Room to the south of office)**

**Fremont Elementary Isolation Room: Annex room off of main office**

**\*\*All occupants will use appropriate PPE when in the isolation rooms.**

**Isolation Spaces:**

As per OAR 581-022-2220, the school district is required to maintain a prevention oriented program which included a health care space that is appropriately supervised and adequately equipped for first aid and isolation of ill or injured child from the student body. When students are identified with restrictable diseases or excludable symptoms, LCSD7 will isolate the student in an appropriate space until they can be released to home.

**Educator Vaccination**

[OAR 333-019-1030](https://www.legis.or.gov/legislation/bills/2019/0333/033301030)

Students: In the school setting, vaccines are an important piece of communicable disease control. Vaccines are a requirement for attending school in Oregon. However, it is important to remark that certain populations may not be vaccinated because of medical contraindications or because of religious or philosophical decisions. Each school has a record of which students are and are not vaccinated with routine childhood immunizations as a primary control measure for outbreaks of vaccine-preventable diseases.

Staff: In the school setting, vaccines are an important piece of communicable disease control. Vaccines or exemption are a





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Outbreaks are most often defined as compatible diagnoses or syndromes in individuals from 2 or more households in the same time period. Because of the nature of the ongoing congregate setting of school, this definition is insufficient for the purposes of seasonal illness; rather an increase in morbidity or severity should be indicators to report to the district RN for consideration of outbreak reports or control measure implementation.

The attention to outbreaks, interventions, and resources are highly dependent on the severity or communicability of the syndrome or pathogen identified. Outbreak response including surveillance, infection control measures, and potentially exclusion are also diagnoses specific and may be indicated when: A single significant infectious diagnosis is confirmed in the school setting, clusters of compatible syndromes or diagnoses associated with an infectious condition are identified within the school setting, significant absenteeism is identified to be associated with compatible syndromes, community transmission of an infectious disease is significant in the community and the school nurse has deemed increased surveillance or response to outbreak a necessary measure.

Outbreak investigations will be facilitated through the district RN and the Lake County Health Department in collaboration with administration with the use of Oregon Health Authority Outbreak Toolkits for Schools.

**Gastroenteritis.**

An outbreak of gastroenteritis is defined as more cases than expected for a specific percentage of the population and time period. For example, two children in a 25-person classroom with vomiting or diarrhea within one week could potentially indicate an outbreak. Because the nature of norovirus (viral gastroenteritis) is common, seasonal, and highly infectious, it is unlikely to result in an outbreak investigation unless the number infected, frequency, or duration is unusual. Because symptoms of bacterial gastroenteritis may start with a similar presentation, it is important to evaluate the severity for the duration of illness all indicators will be report to the district RN and building administrator and should include:

- Multiple children with compatible symptoms in 48 hours within the same cohort, but separate households.
- More than 2 cases of diarrhea with bloody stool in the school setting.
- Sudden onset of vomiting in multiple persons in the same cohort.



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· Any unusual combination of gastrointestinal symptoms, severity, duration, or incidence.

**Other Circumstances:**

Less common outbreaks of skin infections, novel diseases, or unusual infectious disease circumstances arise. In efforts to ensure appropriate disease control, interventions, and follow up occur, these other situations should be referred to the District RN or administration immediately. These circumstances will be handled on a case by case basis. Examples of these circumstances may include:

- More than two students from separate households with reported compatible skin infections in the same school setting or athletic team.
- Any student or staff member coming into contact with blood, saliva, or feces from a nondomestic animal.
- Any student or staff coming into contact with blood that is not their own.
- Any combination of illness, symptoms, severity, duration, or frequency that seems unusual as compared to routine seasonal illness.

The District RN or administrator may decide that additional control measures or data collection is necessary and will consult with administration and LHD as needed, in regards to determined outbreaks or novel diagnoses. The District RN or administration should always be consulted regarding any written communication that may be developed to notify parents about illness, disease outbreaks, and risks to students, families, and staff and/or control measures specific to the outbreak. Any presentation of illness or combination of illnesses as described above should be reported to the district RN and administrator.

**Exposure Control Plan:**

This plan provides the employees of Lake County School District 7 (LCSD7) with guidelines for handling any exposure to blood or other potentially infectious materials (OPIM). These established procedures are in accordance with local and state requirements, as well as federal occupational safety and health requirements. Standard precautions shall be observed in all Lake County School District 7 sites in order to prevent contact with all body fluids and other potentially infectious materials.

All body fluids or other potentially infectious materials will be considered infectious at all times. Transmission based precautions



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should be endorsed in special circumstances where specific risk is anticipated based on health status or incident with a student or staff. ALL district employees are reasonably anticipated to have “occupational exposure” to blood or other potentially infectious material.

**Board Policies:**

- Board Policy EBBA – First Aid
- Board Administrative Regulation EBBA-AR – First Aid-Infection Control
- Board Policy GBEB – Staff-HIV,AIDS and HBV
- Board Policy JHCCA – Students-HIV, HBV and AIDS
- Board Policy GBEB – Communicable Diseases-Staff
- Administrative Regulation GBEB-AR – Communicable Diseases-Staff
- Board Policy JHCC – Communicable Diseases-Students
- Administrative regulation JHCC-AR – Communicable Diseases-Students

**Universal & Standard Precautions:**

The premise of universal precautions is to treat all body fluids as potentially infectious. A standard precaution aligns with this and provides a set of standards for the hygiene and barrier protection or Personal Protective Equipment with any and all encounters with body fluids. Standard Precautions are regarded as the minimum infection prevention practices that apply to all direct care or exposure to body fluids, regardless of suspected or confirmed infection status of the individual, in any setting where there is an expected risk of body fluid exposure. In the school setting body fluid exposures most frequently occur with physical injury but may also occur relative to a health related issue or procedure or developmental issue or disability.

Standard precautions endorse the appropriate use of personal protective equipment (PPE) and practices such as hand hygiene and respiratory etiquette as well as work practice controls such as sharps safety and environmental disinfection.

When Standard Precautions alone cannot prevent transmission, they are supplemented with transmission- based Precautions. This second tier of infection prevention is used when there is a specific risk related to an ill student or staff in the school setting that can spread through contact, droplet or airborne routes (e.g., skin contact, sneezing, coughing) and are always used in addition to Standard Precautions. While transmission- based Precautions are typically isolated to the health room with specific conditions, the



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exposure risk is still possible in the school setting and will be addressed as well.

#### **Personal Protective Equipment (1h)**

Personal protective equipment (PPE) refers to wearable equipment that is designed to protect staff from exposure to or contact with infectious agents. PPE that is appropriate for various types of interactions and effectively covers personal clothing and skin likely to be soiled with blood, saliva, or other potentially infectious materials (OPIM) should be available. These include gloves, face masks, protective eyewear, face shields, and protective clothing (e.g., reusable or disposable gown, jacket, laboratory coat).

Examples of appropriate use of PPE for adherence to Standard Precautions include:

- Use of gloves in situations involving possible contact with blood or body fluids, mucous membranes, non-intact skin (e.g., exposed skin that is chapped, abraded, or with dermatitis) or OPIM.
- Use of protective clothing to protect skin and clothing during procedures or activities where contact with blood or body fluids is anticipated.
- Use of mouth, nose, and eye protection during procedures that are likely to generate splashes or sprays of blood or other body fluids.
- Use of mask when respiratory transmission is of concern.

**Transmission-Based Precautions:** Contact precautions, droplet precautions, airborne precautions.

Transmission-Based Precautions are the second tier of basic infection control and are to be used in addition to Standard Precautions for individuals in certain infectious circumstances to prevent the potential spread of infectious agents for which additional precautions are needed to prevent infection transmission beyond standard precautions.

#### **Contact Precautions:**

Contact Precautions are limited in the school setting but may be required when an open and draining lesion is identified at school. When an open and draining lesion, such as a cyst, boil or abscess are identified in the school setting the following precautions should be taken:

- Ensure appropriate student placement. The student should be removed from the classroom setting and placed in the health room



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while awaiting parent arrival. Open and draining skin wounds are an excludable condition.

- Use personal protective equipment (PPE) appropriately, if the student requires care. This means that gloves must be worn. Unlike a clinical setting it is unlikely that gowns or masks will need to be used for contact precautions because staff should not be providing wound care or procedures.

- Limit transport and movement of students once an open and draining lesion is identified, the student's activity should be limited to reduce additional opportunity for contamination of surfaces.

- Prioritize cleaning and disinfection once the student has been dismissed to home, ensure the area the student was located during direct care is appropriately sanitized. If there was a risk of contamination in other settings such as the classroom, cafeteria, or playground, for example ensure areas are appropriately addressed.

**Droplet Precautions:**

Use Droplet Precautions for patients known or suspected to be infected with pathogens transmitted by respiratory droplets that are generated by a patient who is coughing, sneezing, or talking. In the school setting, this may be relevant during influenza season and specifically during the circulation of novel viruses.

- Source control for droplet precautions includes putting a mask on the sick individual.

- Ensure appropriate student placement is feasible, a student who becomes symptomatic when the risk of specific viruses is increased, should be placed in a room individually, if possible. Students may routinely be located in the health room with acute respiratory illness in typical seasons. During severe respiratory illness seasons and when the circulation of novel viruses has been identified, isolation rooms should be identified.

- Use personal protective equipment (PPE) appropriately. For staff screening ill students, masks should be donned upon entry into the isolation space.

- Limit transport and movement of ill persons outside of the isolation room, the student or staff's activity should be restricted, except travel as needed to be discharged to home.





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#### **Airborne Precautions:**

Airborne Precautions for individuals known or suspected to be infected with pathogens transmitted by the airborne route (e.g., measles, chickenpox) will rarely be used in the school setting; however, it is important to identified control measures as increases of vaccine-preventable respiratory diseases are on the rise related to increase in vaccine hesitancy.

- Source control for airborne precaution includes putting a mask on the ill individual.
- Ensure appropriate patient placement in the isolation room as feasible. If an isolation room is not available, ensure the student is isolated from other students and staff.
- Use personal protective equipment (PPE) appropriately, including a fit-tested NIOSH-approved N95 or higher level respirator for individuals having direct care contact with the student. If these masks are not available, routine surgical masks should be worn.
- Limit transport and movement of students aside from travel to be dismissed to home.
- Following contact with an individual identified as having a vaccine preventable disease, individuals susceptible to any diagnosed infection, such as measles or varicella should be advised to immunize against infection (school nurse). It is important to note that the school district cannot compel anyone to immunize their children, but students and staffs that are unvaccinated can be excluded for the maximum incubation period of a vaccine-preventable disease (up to 21 days) from their last exposure.

#### **Pandemic Plan:**

A pandemic occurs when an infectious disease has spread globally. Most pandemics occur from novel viruses associated with influenza. Other viruses, such as coronaviruses, are routinely surveyed due to the propensity for mutations, human to animal transmission, and potential for pandemic events.

Seasonal      Respiratory      Illness and Seasonal Influenza

#### **Seasonal Respiratory Illness:**

There are several viruses that routinely circulate in the community to cause upper viral respiratory illnesses. These viruses include rhinoviruses, coronaviruses, adenoviruses, enteroviruses, respiratory syncytial virus, human metapneumovirus, and parainfluenza.



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The “common cold” is caused by rhinoviruses, adenoviruses, and coronaviruses. The symptoms of these seasonal illnesses may vary in severity but include cough, low- grade fever, sore throat (SDDH, 2019; Weatherspoon, 2019).

**Seasonal Influenza:**

Influenza (flu) is a contagious respiratory illness caused by influenza viruses. There are two main types of influenza (flu) virus: Types A and B. The influenza A and B viruses that routinely spread in people (human influenza viruses) are responsible for seasonal flu epidemics each year. Influenza can cause mild to severe illness. Serious outcomes of flu infection can result in hospitalization or death. Some people, such as older people, very young children, and people with underlying health conditions or weak immune systems, 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 (CDC, 2020).

**Novel, Variant and Pandemic Viruses:**

Novel viruses refer to those not previously identified. A novel virus may be a new strain or a strain that has not previously infected human hosts. When a virus that has historically infected animals begins to infect humans, this is referred to as a variant virus. Pandemic refers to the global circulation of a novel or variant strain of respiratory viruses. The most common viruses associated with novel and pandemic outbreaks are influenza A and human coronavirus. A flu pandemic occurs when a new virus that is different from seasonal viruses emerges and spreads quickly between people, causing illness worldwide. Most people will lack immunity to these viruses. Pandemic flu can be more severe, causing more deaths than seasonal flu. Because it is a new virus, a vaccine may not be available right away. A pandemic could, therefore, overwhelm normal operations in educational settings (CDC, 2016b).

**PURPOSE:**

The purpose of this document is to provide a guidance process to non-pharmaceutical interventions (NPIs) and their use during a novel viral respiratory pandemic. NPIs are actions, apart from getting vaccinated and taking antiviral medications, if applicable, that people and communities can take to help slow the spread of respiratory illnesses such as pandemic flu or novel coronaviruses. NPI’s, specifically in regards to pandemic planning, are control measures that are incrementally implemented based on the level of threat to a community. This document should be used as a contingency plan that is modified with a response planning team based on the current level of pandemic threat.



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**Control Measures:**

While prophylactic vaccines and antiviral medication are appropriate interventions in some viral respiratory conditions, specifically seasonal influenza, these are not always accessible for novel strains. Non- pharmaceutical interventions (NPI's) are essential actions that can aid in the reduction of disease transmission. It is important to note that disease that is widely spread in the community has many options for transmission beyond the school setting, and the school district can only account for NPI's in the school setting and at school-sponsored events (CDC, 2017).

**Everyday Measures:**

Control measures to limit the spread of communicable diseases should be an active part of the school comprehensive and preventative health services plan. Routine control measures include:

- Hand hygiene (washing your hands for 20 seconds with soap and water with appropriate friction).
- Respiratory etiquette (cover your coughs and sneezes and throw the tissue in the garbage each use)
- Routine sanitizing of shared areas and flat surfaces
- Stay home when you are sick and until 72 hours fever free, without the use of fever reducing medication.

**Control Measures for Novel or Variant Viruses:**

Control measures associated with novel or variant viruses are based on the severity and incident of the specific virus. Some novel viruses are so mild they may go undetected, while others may present with more transmissibility or severity. Since new viruses have no historical context, public health guidance evolves as increased numbers of cases are identified, and patterns and risks are identified, and thus the guidance is unique to each specific event, respectively.

Historical pandemic responses have provided a baseline set of evidence-based guide to create a framework for response plan for such events in the school setting. Control measures are incremental based on the current situation. The current situation will be defined by the public health official based on the severity, the incidence and the proximity to the school setting lending to level based responses. When cases of novel viruses are identified globally when the novel disease is identified, it is the due diligence of school health services personnel and school administration to pay close attention to trends. When a novel strain is identified,



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routine control and exclusion measures should continue. As various situations arise, including foreign travel by students or staff, this may result in extended absenteeism as a precautionary measure. In cases where student or staff travel is restricted secondary to pandemic events, it is the staff and parent's responsibility to communicate this restriction to the school district. Routine infection control and communication should continue.

**When cases of novel viruses are identified regionally or nationally:**

When the novel disease is identified in the U.S., it is important to identify the geographical location and the specific public health messaging and direction. The Centers for Disease Control and Prevention (CDC) will have current guidance. When novel viruses emerge in the state, the Oregon Health Authority (OHA) will provide direct guidance. OHA will have an alert for pandemic specific content that can be subscribed to for updates. An individual within the district should be subscribed to this alert to keep the team updated. If the region impacted is in Lake County, the Lake County Health Department will provide school-centered communication and will potentially host conference calls. When cases are identified in the local region, a response team should be assembled within the district and responsibilities assigned within the school district. Response team should consist of individuals who can fulfill roles with expertise in district policy and administration, clinical information, human resources, building-level management, risk management, and facilities at minimum to meet the general structure of Incident Command. When public health has deemed a novel virus a pandemic threat, defer to the CDC checklist for schools in order to establish a specific emergency response framework with key stakeholders. During this time, preparedness planning will need to be initiated on the continuity of education in the event of school closure. The response team should hold regular meetings with the LCSD7 and the LCHD.

**When cases of novel viruses are identified in the community or incidence is increasing:**

When novel viruses are identified in the community, but not in a student or staff, the district will defer to local public health guidance. Increased public health guidance will also ensue if the overall incidence is increasing despite the proximity to the school. This guidance will vary by event based on transmissibility, severity, and incidence. It is important to note that the LCSD7 can only apply controls around the school sponsored events and activities. LCSD7 cannot advise control measures around private clubs, organizations, or faith communities. Each of these congregate settings is responsible to follow local public health guidance as well. When the local transmission is detected, planning for cancellation of events and potential for dismissal and academic continuity should be prioritized. As well, plans for potential prolonged staff absences should be prioritized.



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**When cases of novel viruses are identified in the school setting:**

When novel viruses are identified in the school setting, and the incidence is low, the Lake County Health Department (LCHD) will provide a direct report to the district nurse on the diagnosed case. Likewise, the Lake County Health Department will impose restrictions on contacts. However, it is important to note that if the incidence is high in disease trends, the LCHD may not have the manpower to impose individual restrictions and may create public statements that the school district should reiterate.

**School Closures:**

If school closure is ordered by the state, the district will abide by executive order. If closure is advised by the local public health department, consultation should occur between legal, union, and district administration to ensure processes are consistent with legal preparedness processes.

**Immunocompromised Students:**

Students with immunocompromising health conditions and treatments may require exclusion from school outside of public health guidance. These students should provide documentation from their provider. This change in placement should be accommodated as appropriate under IDEA and FAPE.

**Glossary of Terms Administrative controls:**

Administrative controls: Are measures used in conjunction with engineering controls that eliminate or reduce the hazard, by following established safe work practices and procedures for accomplishing a task safely.

Airborne precautions: Precautions that are required to protect against airborne transmission of infectious agents. Diseases requiring airborne precautions include, but are not limited to: Measles, Severe Acute Respiratory Syndrome (SARS), Varicella (chickenpox), and Mycobacterium tuberculosis Antibody: A protein produced as an immune response against a specific antigen.

Antigen: A substance that produces an immune response.

Bacteria: Microscopic living organisms. Some bacteria are beneficial, and some are harmless, but some can pathogenic (cause disease).



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**Biological Hazard:** Any viable infectious agent that presents a potential risk to human health. Blood borne pathogens: Microorganisms which are spread through contact with infected blood that can cause diseases such as human immunodeficiency virus (HIV) and hepatitis B (HBV).

**Communicable Disease:** Illness that spreads from one person to another through contact with the infected person or their bodily fluids, or through contaminated food/water or disease vectors, such as mosquitos or mice.

**Contact Tracing:** Working with an infected person to determine who they have had contact with and potentially exposed, to an illness.

**Disinfection:** High level cleaning intended to kill germs on surfaces

**Droplet precautions:** Safety measures used for diseases or germs that are spread in tiny droplets caused by coughing and sneezing (examples: pneumonia, influenza, whooping cough, bacterial meningitis).

**Epidemic:** A disease affecting a large number of people in a community or region.

**Exclusion:** Preventing someone from entering a place or participating in an activity

**Engineering Controls:** Measures to protect individuals through engineering interventions that can be used to eliminate or reduce hazard.

**Immunocompromised:** Having a weakened immune system that cannot respond normally to an infectious agent. This limits the body's ability to fight disease.

**Isolation:** Being kept separate from others. A method of controlling the spread of a disease. **Medical Wastes/Infectious Wastes:**

Blood, blood products, bodily fluids, any waste from human and animal tissues; tissue and cell cultures; human or animal body parts.

**Novel:** New—in medical terms, previously unidentified, as in, novel coronavirus

**Other Potentially Infectious Materials (OPIM):** Human bodily fluid or tissue that can harbor or spread blood borne pathogens,



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including but not limited to: saliva, cerebrospinal fluid, semen, vaginal secretions.

Pandemic: An epidemic that spreads over countries or continents.

Pathogen: A microorganism that can cause disease.

Personal Protective Equipment (PPE):

Physical barriers used when exposure to hazards cannot be engineered completely out of normal operations and when safe work practices and administrative controls cannot provide sufficient protection from exposure to infectious or hazardous conditions.

PPE includes such items as gloves, gowns, and masks

Restrictable Diseases: Diseases that require exclusion from work, school, childcare facilities, for the protection of public health. According to the Oregon Health Authority, restrictable disease include: diphtheria, measles, Salmonella enterica serotype Tophi infection, shigellosis, Shigatoxigenic Escherichia coli (STEC) infection, hepatitis A, tuberculosis, open or draining skin lesions infected with Staphylococcus aureus or Streptococcus pyogenes, chickenpox, mumps, pertussis, rubella, scabies, and any illness accompanied by diarrhea or vomiting.

Sanitize: Reduce contaminants (viruses, bacteria) on an object or surface.

Seasonal Illness: Illnesses whose occurrence appears to be associated with environmental factors (temperature and humidity changes). For example, colds, and other upper respiratory illness are more common during the winter months when people are more often indoors.

Sharps: Any devices that can be used to cut or puncture skin. Examples include: needles, syringes, and lancets (used for checking blood sugar). Sharps must be disposed of in an approved container, to avoid blood borne pathogen exposure.

Standard Precautions: A set of infection control practices used to prevent transmission of diseases that can be acquired by contact with blood, body fluids, non-intact skin (including rashes), and mucous membranes. These measures are to be used when providing care to all individuals, whether or not they appear infectious or symptomatic.



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Surveillance: Collecting and analyzing data related to a disease in order to implement and evaluate control measures

Transmission: How a disease spreads. There are four modes of transmission:

- Direct—physical contact with infected host or vector
- Indirect—contact with infected fluids or tissues · Droplet—contact with respiratory particles sprayed into the air (sneezed or coughed)
- Droplet Nuclei—dried droplets that can remain suspended in the air for long periods of time (e.g., tuberculosis)

The mode of transmission of a disease will determine what PPE is required.

Universal Precautions: Preventing exposure to blood borne pathogens by assuming all blood and bodily fluids to be potentially infectious, and taking appropriate protective measures.

Vaccine: A preparation containing a weakened or killed germ. Vaccines stimulate the immune system to produce antibodies to prevent a person from contracting the illness.

Variant: A difference in the DNA sequence, a mutation. Viruses can change and mutate, and these variant forms can be intractable to established treatments.

Vector: A carrier of a pathogen (germ) that can transmit the pathogen to a living host. Mosquitoes, fleas, ticks, and rodents are examples of vectors.

Work practice controls: Measures intended to reduce the likelihood of exposure by changing the way a task is performed. They include appropriate procedures for handwashing, sharps disposal, lab specimen handling, laundry handling, and contaminated material cleaning.





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**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**

<b>School planning team members</b>	<b>Responsibilities:</b>	<b>Primary Contact (Name/Title):</b>	<b>Alternative Contact:</b>
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</li></ul>	Michael Carter, Superintendent Lloyd Hartley, Special Education Director/Compliance Officer Hilary Hulseman, Principal Susan Warner, Principal	Tandalin Gerber, Executive Assistant Miranda Philibert, Lake County Public Health Judy Clark, Lake County Public Health

School planning team members	Responsibilities:	Primary Contact (Name/Title):	Alternative Contact:
	matters within school community members, health partners, and other local partners.		
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 events, informing continuous improvement of the planning, prevention, response, and recovery system.</li> </ul>	Michael Carter, Superintendent Lloyd Hartley, Special Education Director/Compliance Officer Hilary Hulseman, Principal Susan Warner, Principal	Tandalin Gerber, Executive Assistant Miranda Philibert, Lake County Public Health Judy Clark, Lake County Public Health
Health Representative <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>	Michael Carter, Superintendent Lloyd Hartley, Special Education Director/Compliance Officer Hilary Hulseman, Principal  Susan Warner, Principal	Tandalin Gerber, Executive Assistant Miranda Philibert, Lake County Public Health Judy Clark, Lake County Public Health
School Support Staff as needed <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>	Michael Carter, Superintendent Hilary Hulseman, Principal Challis Young, Vice Principal Susan Warner, Principal Dusty Counts, Vice Principal Janet Melsness, Transportation Supervisor Roger Buhrle, Custodial	Tandalin Gerber, Executive Assistant Miranda Philibert, Lake County Public Health Judy Clark, Lake County Public Health

School planning team members	Responsibilities:	Primary Contact (Name/Title):	Alternative Contact:
Communications Lead (staff member responsible for ensuring internal/external messaging is completed)	<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 the school community.</li> </ul>	Susan Warner, Principal Michael Carter, Superintendent Lloyd Hartley, Special Education Director/Compliance Officer Janet Melsness, Transportation Supervisor Jenifer Shulze, Student Services Director	Tandalin Gerber, Executive Assistant Miranda Philibert, Lake County Public Health Judy Clark, Lake County Public Health
District Level Leadership Support (staff member in which to consult surrounding a communicable disease event)	<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>	Michael Carter, Superintendent Hilary Hulseman, Principal Challis Young, Vice Principal Susan Warner, Principal Dusty Counts, Vice Principal Janet Melsness, Transportation Supervisor Roger Buhrle, Custodial	Tandalin Gerber, Executive Assistant Miranda Philibert, Lake County Public Health Judy Clark, Lake County Public Health
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>	Michael Carter, Superintendent Hilary Hulseman, Principal Challis Young, Vice Principal Susan Warner, Principal Dusty Counts, Vice Principal Janet Melsness, Transportation Supervisor Roger Buhrle, Custodial	Tandalin Gerber, Executive Assistant Miranda Philibert, Lake County Public Health Judy Clark, Lake County Public Health
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.)

#### Equity

Equity is a primary focus of our Covid Management Plan and our district has prided itself on serving the needs of every student. We are a very rural school district (frontier) with a substantial student population in poverty.

Administration and staff have identified students who need additional support and fall into the following categories: ELL, high poverty, geographically isolated, foster children, minority students, unidentified homeless, and the highly mobile students who do not have stable home environments. Through the Covid closures or quarantine the close relationships that we have with stakeholders informed us of the specific hurdles and obstacles that families encountered during closures or quarantine. Because of these obstacles, we have a higher level of awareness of equity issues and barriers that may arise.

**Equity in Academics** - We have provided one on one computers for all Lake County School District # 7 students. All students have access to “hot spots”, Chromebooks and technical assistance during a closure or quarantine as needed.

We have also provided a K-12 comprehensive district online program. This program will afford flexibility for students who require or request this level of distance learning. This program will have certified teachers, specialized tutoring, and access to all K-12 district resources. The biggest challenge for our Lakeview Academy is the same challenge the district/community faces as whole- internet connectivity.

We have organized and equipped our classrooms so that teachers will be able to more seamlessly provide instruction for students during a closure or quarantine. We have also organized professional development opportunities to improve Google classroom skills.

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<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.

## Mental Health

Covid Management Plan, Communicable Disease Plan and Safety and Health Protocols include information on COVID 19, quarantine protocol, and response to outbreaks. These plans also identify sources of mental health tools and local resources.

Our SIA plan identified the need for additional mental health support. It is difficult to find certified staff to fill this need, but we are committed to providing these services. With the SIA funding we were able to hire 2 behavioral specialists to serve elementary students and contract with the local ESD to provide two behavioral specialists at the secondary level.

Building administration and staff meet twice monthly to address student mental health and counseling needs. In addition, our behavioral specialists have been conducting specialized training for our staff to address supporting students. For example, (Trauma Informed Practice, Mental Health First Aid, Assist Training and QPR). As a small school district we are also able to provide home visits during closures, quarantines and summer programs for students receiving mental health services. We believe regular and consistent interaction with students with mental health needs are critical with our students.

LCSD#7 maintains nursing services through the Lake County Health Department. The staff at Lake County Health Department has been partners through the process. Since we are in a rural (frontier) status we have a very strong working relationship, face to face, with all of our health partners, this includes our local hospital. We are able to contact each other on a daily basis, and if need be, almost instantaneously.



### **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>	<p><b>Disproportionately Impacted Students:</b></p> <p>Students can choose on-site learning or Lakeview Academy (online). Parents will be contacted on an individual basis to thoroughly explain school choices and identify any barriers to enrollment or attendance for any students identified with barriers to education.</p> <p>Tracking procedures, attendance, grades and policies continue to change as necessary in our School Safety and Management Plan. <b>The LBL student information system is evaluated, revised and redesigned to address these changes as needed. This is especially true for our vulnerable student population. The procedures and protocols to reduce educational barriers are designed to ensure equity.</b></p> <p>LCSD#7 will follow all ODE attendance guidelines. All students in underrepresented populations will have a certified teacher and additional staff assigned to monitor their academic rigor and progress regardless of Comprehensive Distance Learning or On-Site enrollment. In addition, resources will be provided at multiple levels to ensure at-risk populations, vulnerable populations, minority populations, and students who are disadvantaged at any level are afforded the same opportunity to access their education. As a small school district we are able to accommodate these identify, design and implement special considerations very rapidly and usually within 24 hours.</p> <p><b>Special Education and 504 Students:</b></p> <p>LCSD#7 students and parents will have the choice to attend the Lakeview Academy (online) or onsite 5 days a week. IEP and 504 teams will contact each parent to discuss the best fit for students in the high risk population prior to the beginning of school. A case manager will be assigned to each student on an IEP or 504 to include regular email or phone contact and home visits as necessary.</p> <p>These students' school choice and needs will be staffed on a case by case basis with LCSD#7 staff and school nurse, Miranda Philibert. During August, 2022, special education and 504 staff will contact each parent/student to offer educational options and discuss plans for their student.</p> <p>LCSD#7 staff and Miranda Philibert will audit all student files to ensure accurate records. Stakeholders will evaluate the needs of special education and medically fragile students and their education.</p>

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>	<p>1)Lake County School District # 7 will be offering at least two educational settings for our students to ensure equity and to meet their individual education needs, maintaining the rigor that our district expects from our students.</p> <p>To accommodate students who prefer an alternative setting we have established the Lakeview Academy which will provide a comprehensive K-12 online learning option. This program will provide extra resources for students to be successful including certified teachers, approved curriculum, extra tutorial help, and individual education plans to ensure equity for all students who will be served in the program.</p> <p>2)Students enrolled in the Lakeview Academy (on-line), will be monitored for attendance and academic growth on the same regular intervals as the on-site students.</p> <p>3)The RTI model at the elementary level has been evaluated by the RTI Team with a focus on identifying underserved students, improving the identification process for special education and requiring the most effective interventions during the reading block.</p> <p>4)Summer programs were held in the summer of 2021 and again in 2022 to provide enrichment, engagement and remediation Lake County School District # 7 students. The summer programs strengthen relationships with stakeholders. Our community experiences a high level of poverty so many of our students can't access summer activities. We have formed partnerships with the swimming pool, horse facility, outdoor school, dance studio and theater to offer enrichment activities for students. Several classroom activities in art and scientific inquiry are planned. Transportation and supervision will be provided for all of these activities.</p>
<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>The Lakeview Academy offered as an educational option has been evaluated and restructured by the administrative team. The model originally put together during Covid needed to be evaluated for effectiveness as the Covid Management Plan changed. Comprehensive Distancing Learning training for distance learning models will be provided during in-service each year for all teaching staff. A Google platform has been designated district wide for Comprehensive Distance Learning.</p> <p>The RTI model continues to provide a reading and math consultant to evaluate and train teachers in Lake County School District # 7. Data from the previous year is evaluated annually by the RTI team to adjust the RTI program.</p> <p>Summer programs are supported by the reading and math consultant by providing professional development that identifies the weak academic areas for students and targeting those areas. Class sizes are small during summer</p>

OHA/ODE Recommendation(s)	Response:
	programs with a large emphasis on remediation at the elementary level. Summer program reporting provides the opportunity for program evaluation by admin.

## 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.)

- ODE [Mental Health Toolkit](#)

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### 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.	<p>All Lake County schools use a PBIS based system to build relationships with students and recognize positive behavior. These programs collect data consistently to evaluate equity in recognizing achievement, improvement and removing educational barriers.</p> <p>We identified the need for additional mental health support through Covid planning, and during reevaluation of our Covid Management Plan. Although it is difficult to find certified staff to fill this need, we hired two mental health specialists at the elementary level and contracted with the ESD for 1.5 FTE mental health services at the</p>



OHA/ODE Recommendation(s)	Response:
	<p>secondary level. As a district we have doubled the amount of mental health staff. During 2022 - 2023, we will develop a formal program for behavioral specialists to follow with students. Training in Trauma Informed Practice, First Aid Mental Health, QPR and Assist have already taken place.</p>
<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>	<p>Students: Through our strong PBIS systems district wide, we provide character education and social emotion time built into our daily schedules. For example, at the elementary level we use Covid Management Plan, Communicable Disease Plan and Safety and Health Protocols include information on COVID 19, quarantine protocol, and response to outbreaks. These plans also identify sources of mental health tools and local resources. Our SIA plan identified the need for additional mental health support. It is difficult to find certified staff to fill this need, but we are committed to providing these services. With the SIA funding we were able to hire 2 behavioral specialists to serve elementary students and contract with the local ESD to provide two behavioral specialists at the secondary level.</p> <p>Building administration and staff meet twice monthly to address student mental health and counseling needs. In addition, our behavioral specialists have been conducting specialized training for our staff to address supporting students. For example, (Trauma Informed Practice, Mental Health First Aid, Assist Training and QPR). As a small school district we are also able to provide home visits during closures, ning meetings to create an environment to express emotions and regulate ourselves and be ready to learn for the day.</p> <p>Staff: Lake County School District is a leader in the state in employee wellness. Through our wellness grant, we are able to offer an exercise and weight room for employees and their spouses, summer recreation programs, release time on Wednesdays to socialize and explore personal and professional development.</p>
<p>Describe how you will link staff, students and families with culturally relevant health and mental health services and supports.</p>	<p>Covid Management Plan, Communicable Disease Plan and Safety and Health Protocols include information on COVID 19, quarantine protocol, and response to outbreaks. These plans also identify sources of mental health tools and local resources.</p> <p>Our SIA plan identified the need for additional mental health support. It is difficult to find certified staff to fill this need, but we are committed to providing these services. With the SIA funding we were able to hire 2 behavioral specialists to serve elementary students.</p> <p>Building administration and staff meet twice monthly to address student mental health and counseling needs. In addition, our behavioral specialists have been conducting specialized training for our staff to address supporting students. For example, (Trauma Informed Practice, Mental Health First Aid, Assist Training and QPR). As a small</p>

OHA/ODE Recommendation(s)	Response:
	<p>school district we are also able to provide home visits during closures, quarantines and summer programs for students receiving mental health services. We believe regular and consistent interaction with students with mental health needs are critical with our students.</p> <p>LCSD#7 maintains nursing services through the Lake County Health Department. The staff at Lake County Health Department has been partners through the process. Since we are in a rural (frontier) status we have a very strong working relationship, face to face, with all of our health partners, this includes our local hospital. We are able to contact each other on a daily basis, and if need be, almost instantaneously.</p>
Describe how you will foster peer/student lead initiatives on wellbeing and mental health.	<p>Lake County School District # 7 has a strong leadership program at the secondary level. High school students design and deliver curriculum in agriculture and social emotional content areas at the elementary school. Our student councils at the elementary and secondary drive the kind of social emotional activities in PBIS and advisory groups. The elementary school received a “Kindness Grant” for the 22 - 23 school year to be planned and implemented by students. All of the planned activities center around mental health, kindness and our student’s emotional wellbeing.</p>



### 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	<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> <p>Students: In the school setting, vaccines are an important piece of communicable disease control. Vaccines are a requirement for attending school in Oregon. However, it is important to remark that certain populations may not be vaccinated because of medical contraindications or because of religious or philosophical decisions. Each school has a record of which students are and are not vaccinated with routine childhood immunizations as a primary control measure for outbreaks of vaccine-preventable diseases.</p> <p>Staff: In the school setting, vaccines are an important piece of communicable disease control. Vaccines or exemption are a requirement for working in schools in Oregon. However, it is important to remark that certain populations may not be vaccinated because of medical contraindications or because of religious or philosophical decisions. Each school has a record of which staff are and are not vaccinated with required Covid vaccines as a primary control measure for outbreaks of vaccine-preventable diseases.</p>
Face Coverings	<p>Staff interacting with students at less than 6 feet, to include bus drivers, school nurse, food service staff, office staff and speech personnel, will use face shields or face coverings as supplied by LCSD#7 as required by the State of Oregon if necessary. Additional masks will be on hand and on the buses for students whose masks have become unusable. If a student is unable to wear a mask the district has protocols in place to provide face shields as necessary.</p>

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?
Isolation	<p>Public Health staff will train elementary staff on visual screening for symptoms and best practices for safety protocols. Bus drivers will provide initial visual screening as they pick students up, prior to arriving at school. If a student is deemed medically at risk then the student will not be allowed to enter the general cohort of the elementary school building. Isolation protocols will be followed. Upon suspicion of illness, students or staff must report to the isolation room. Office staff and school nurse will evaluate symptoms and initiate appropriate protocols. Parents will be notified, and trace contact protocol will be initiated as deemed necessary.</p> <p>Protocol includes information on COVID 19, quarantine protocol and monitoring time before re-entry to school given to parents or guardians when they pick up their student. This same information will be given to the staff who are sent home as a precautionary measure.</p> <p>Additional training will be provided as needed to address procedures for isolation of any ill or exposed students or staff. Isolation protocol, designated isolation rooms and staff for the isolation room will be presented during an in-service training for Fremont/A.D. Hay Elementary. During this training protocol for reporting potential cases of COVID-19, cohorts, cross contamination and logs will also be presented.</p> <p><b>All logs shall include:</b>  <b>Child's name</b>  <b>Drop off/pick-up time</b>  <b>Student and parent contact information</b>  <b>All persons and contact information the student was in contact with</b></p> <p><b>District Compliance Officer (social distancing and PPE): Lloyd Hartley</b>  <b>Contact Tracing and Daily Logs: Bonnie Langum and Carlee Albertson</b>  <b>Isolation Room Staff: Bonnie Langum, Carlee Albertson, Susan Warner</b>  <b>On-site nurse: Miranda Philibert</b></p> <p><b>A.D. Hay Elementary Isolation Room: Room # 201</b>  <b>(Room to the south of office)</b></p> <p><b>Fremont Elementary Isolation Room: Annex room off of main office</b></p> <p><b>**All occupants will use appropriate PPE when in the isolation rooms.</b></p>

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?
Symptom Screening	<p>In-service training will include:</p> <ul style="list-style-type: none"> <li>· guidance for staff on symptoms</li> <li>· protocols to stay home</li> <li>· parent meetings and the importance of communication of health status</li> </ul> <p>The School Messenger system, Facebook and school websites will provide guidance to students and parents about symptoms, and when to stay home. Our district survey said this is one of the success stories of our implementation of our online program in the spring of 2020.</p> <p>Bus drivers and teaching staff will follow all state guidelines concerning visual screening for students and actions to take. Visional screening of all staff and students will take place each day. Parents will be notified, and trace contact protocol initiated when necessary.</p> <p>Hand washing, social distancing, and face covering protocol will be implemented for each cohort group during regular intervals during the day (bathroom, recess, music, P.E. lunch, breakfast, and upon entering school) as necessary. Hand sanitizing stations will be placed in higher traffic areas and at the entrance to each school.</p> <p>Custodial crews will be on a rotation to work around our secondary school schedule to disinfect throughout the day if necessary due to an outbreak. Special emphasis will be placed on high traffic areas. After school in the evening, the entire complex will be disinfected and ventilation filters will be replaced multiple times a week to ensure maximum performance if an outbreak occurs and is deemed necessary by stakeholders.</p> <p>Sign in and out procedures will use sanitized pens labeled whether or not they have been sanitized. All visitors/parents/students will have access to hand sanitizer when arriving or departing from school.</p> <p>Additional staff will be assigned to entry and exit points to monitor social distancing if necessary.</p>
COVID-19 Testing	<p>OHA offers both <a href="#">diagnostic and screening testing programs</a> to all public and private K-12 schools in Oregon. Please include whether your school will offer diagnostic and screening testing, respectively.</p> <p>Lake County School District offers initial screening and Covid testing for students and staff onsite.</p>
	<p>Open windows for increased ventilation will be considered and replacing filters at a higher frequency. We will also monitor air quality to ensure maximum circulation. Air scrubbers were purchased for A.D. Hay and Fremont</p>

OHA/ODE Recommendation(s) Layered Health and Safety Measures	<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>
Airflow and Circulation	Elementary School to provide additional protection.
Cohorting	<p>LCSD# 7 facilities will be open minimally to the public and community groups during school hours if an outbreak occurs and is deemed necessary by stakeholders.</p> <p>Grade level cohorts of less than 60 will be maintained during passing times, scheduled breaks, and lunches to the extent feasible.</p>
Physical Distancing	<p>LCSD#7 has been working towards smaller classroom sizes in past years. Classroom sizes average 23 students or less. This approach lends itself to greater social distancing. All elementary school classrooms have been measured and analyzed for square footage. LCSD#7 School buildings tend to be older and built with larger square footage than more modern facilities.</p> <p>All unnecessary furniture will be removed from classrooms if deemed necessary.</p> <p>Additional staff will be assigned in high traffic areas to monitor social distancing. For example, lunch periods, entering and exiting the building and safety drills as needed.</p> <p>Additional signage and physical markers will be used with training to assist students in physical social distancing as needed.</p>
Hand Washing	All staff and students will be required to wash hands and/or sanitize hands on a regular basis. Staff and students will attend training on appropriate hand washing. Additional signage will be put up in buildings. Fully stocked classrooms and bathrooms with soap for hand washing, monitor supplies more frequently by custodial staff.
Cleaning and Disinfection	Staff will be asked to perform cleaning and sanitizing tasks as deemed necessary. All school surfaces will be disinfected on a daily basis and in some locations multiple times throughout the day as necessary. This sanitation schedule will be modified as needed to ensure safety of our students and staff as needed.

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	<p>In order to enhance our communication with stakeholders and community partners, we will use mass media to keep everyone informed on appropriate changes to safety protocols and procedures as necessary. During Covid operations, We have learned the value of communication with parents, students and all stakeholders in our community. We have designed a system that will continue to keep everyone informed and up to date as needed. This is especially important for our at risk populations, our ELL students, and other disadvantaged groups. We have discovered that we must use a multimedia approach because some stakeholders only access information through one source.</p> <p>All Lake County Schools will use School Messenger, Facebook and parent email to communicate new safety measures in place at school, changes in school procedures, outbreak protocols and information pertaining to COVID 19 as needed. ELD staff put information in additional languages, and call ELD parents.</p> <p>Public Health staff will train all staff on visual screening for symptoms and best practices for safety protocols as needed. Protocol includes information on COVID 19, symptom screening, quarantine protocol and monitoring time before re-entry to school given to parents or guardians when they pick up their student as needed. This same information will be given to the staff who are sent home as a precautionary measure.</p>

**Table 6.** COVID-19 Mitigating Measures



<b>OHA/ODE Recommendation(s)</b> 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? <i>*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).</i>
COVID-19 Vaccination	<p>Students: In the school setting, vaccines are an important piece of communicable disease control. Vaccines are a requirement for attending school in Oregon. However, it is important to remark that certain populations may not be vaccinated because of medical contraindications or because of religious or philosophical decisions. Each school has a record of which students are and are not vaccinated with routine childhood immunizations as a primary control measure for outbreaks of vaccine-preventable diseases.</p> <p>Staff: In the school setting, vaccines are an important piece of communicable disease control. Vaccines or exemption are a requirement for working in schools in Oregon. However, it is important to remark that certain populations may not be vaccinated because of medical contraindications or because of religious or philosophical decisions. Each school has a record of which staff are and are not vaccinated with required Covid vaccines as a primary control measure for outbreaks of vaccine-preventable diseases.</p>
Face Coverings	<p><i>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.</i></p> <p>Staff interacting with students at less than 6 feet, to include bus drivers, school nurse, food service staff, office staff and speech personnel, will use face shields or face coverings as supplied by LCSD#7 as required by the State of Oregon if necessary. Additional masks will be on hand and on the buses for students whose masks have become unusable. If a student is unable to wear a mask the district has protocols in place to provide face shields as necessary.</p>
Isolation	<p>Public Health staff will train all staff on visual screening for symptoms and best practices for safety protocols. Bus drivers will provide initial visual screening as they pick students up, prior to arriving at school. If a student is deemed medically at risk then the student will not be allowed to enter the general cohort of the elementary school building. Isolation protocols will be followed. Upon suspicion of illness, students or staff must report to the isolation room. Office staff and school nurse will evaluate symptoms and initiate appropriate protocols. Parents will be notified, and trace contact protocol will be initiated as deemed necessary.</p> <p>Protocol includes information on COVID 19, quarantine protocol and monitoring time before re-entry to school</p>

<b>OHA/ODE Recommendation(s)</b> 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? *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>given to parents or guardians when they pick up their student. This same information will be given to the staff who are sent home as a precautionary measure.</p> <p>Additional training will be provided as needed to address procedures for isolation of any ill or exposed students or staff. Isolation protocol, designated isolation rooms and staff for the isolation room will be presented during an in-service training for all staff. During this training protocol for reporting potential cases of COVID-19, cohorts, cross contamination and logs will also be presented.</p> <p><b>All logs shall include:</b>  <b>Child's name</b>  <b>Drop off/pick-up time</b>  <b>Student and parent contact information</b>  <b>All persons and contact information the student was in contact with</b></p> <p><b>District Compliance Officer (social distancing and PPE): Lloyd Hartley</b>  <b>Contact Tracing and Daily Logs: Bonnie Langum and Carlee Albertson</b>  <b>Isolation Room Staff: Bonnie Langum, Carlee Albertson, Susan Warner</b>  <b>On-site nurse: Miranda Philibert</b></p> <p><b>A.D. Hay Elementary Isolation Room: Room # 201</b>  <b>(Room to the south of office)</b></p> <p><b>Fremont Elementary Isolation Room: Annex room off of main office</b></p> <p><b>**All occupants will use appropriate PPE when in the isolation rooms.</b></p>
Symptom Screening	In-service training will include: <ul style="list-style-type: none"> <li>· guidance for staff on symptoms</li> <li>· protocols to stay home</li> <li>· parent meetings and the importance of communication of health status</li> </ul>

<b>OHA/ODE Recommendation(s)</b> 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? *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>The School Messenger system, Facebook and school websites will provide guidance to students and parents about symptoms, and when to stay home. Our district survey said this is one of the success stories of our implementation of our online program in the spring of 2020.</p> <p>Bus drivers and teaching staff will follow all state guidelines concerning visual screening for students and actions to take for isolation. Visional screening of all staff and students will take place each day. Parents will be notified, and trace contact protocol initiated when necessary.</p> <p>Hand washing, social distancing, and face covering protocol will be implemented for each cohort group during regular intervals during the day (bathroom, recess, music, P.E. lunch, breakfast, and upon entering school) as required. Hand sanitizing stations will be placed in higher traffic areas and at the entrance to each school.</p> <p>Custodial crews will be on a rotation to work around our secondary school schedule to disinfect throughout the day if necessary due to an outbreak. Special emphasis will be placed on high traffic areas. After school in the evening, the entire complex will be disinfected and ventilation filters will be replaced multiple times a week to ensure maximum performance if an outbreak occurs and as required by stakeholders.</p> <p>Sign in and out procedures will use sanitized pens labeled whether or not they have been sanitized. All visitors/parents/students will have access to hand sanitizer when arriving or departing from school.</p> <p>Additional staff will be assigned to entry and exit points to monitor social distancing if necessary.</p>
COVID-19 Testing	Lake County School District offers initial screening and Covid testing for students and staff onsite.
Airflow and Circulation	Open windows for increased ventilation will be considered and replacing filters at a higher frequency. We will also monitor air quality to ensure maximum circulation. Air scrubbers were purchased for A.D. Hay and Fremont Elementary School to provide additional protection.

<b>OHA/ODE Recommendation(s)</b> 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? *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).
Cohorting <sup>2</sup>	<p><i>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:</i></p> <ol style="list-style-type: none"> <li><i>1. At the school level: ≥ 30% absenteeism, with at least 10 students and staff absent</i></li> <li><i>2. At the cohort level: ≥ 20% absenteeism, with at least 3 students and staff absent</i></li> </ol> <p>LCSD# 7 facilities will be closed to the public and community groups during school hours if an outbreak occurs and is deemed necessary by stakeholders.</p> <p>Grade level/classroom cohorts will be reduced to 25 or less and be maintained during all times during an outbreak, for example passing times, scheduled breaks, and lunches to the extent feasible.</p>
Physical Distancing	<p>LCSD#7 has been working towards smaller classroom sizes in past years. Classroom sizes average 23 students or less. This approach lends itself to greater social distancing. All classrooms have been measured and analyzed for square footage. LCSD#7 School buildings tend to be older and built with larger square footage than more modern facilities.</p> <p>All unnecessary furniture will be removed from classrooms if deemed necessary.</p> <p>Additional staff will be assigned in high traffic areas to monitor social distancing and safety protocols. For example, lunch periods, entering and exiting the building and safety drills as needed.</p>
Hand Washing	<p>All staff and students will be required to wash hands and/or sanitize hands on a regular basis. Staff and students will attend training on appropriate hand washing. Additional signage will be put up in buildings. Fully stocked classrooms and bathrooms with soap for hand washing, monitor supplies more frequently by custodial staff.</p>
Cleaning and Disinfection	<p>Staff will be asked to perform cleaning and sanitizing tasks as required. All school surfaces will be disinfected on a daily basis and in some locations multiple times throughout the day as necessary. This sanitation schedule will be</p>

<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.

<b>OHA/ODE Recommendation(s)</b> 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? *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).
	modified as needed to ensure safety of our students and staff as deemed necessary by stakeholders.
Training and Public Health Education	<p>In order to enhance our communication with stakeholders and community partners, we will use mass media to keep everyone informed on appropriate changes to safety protocols and procedures as necessary. During Covid operations, We have learned the value of communication with parents, students and all stakeholders in our community. We have designed a system that will continue to keep everyone informed and up to date as needed. This is especially important for our at risk populations, our ELL students, and other disadvantaged groups. We have discovered that we must use a multimedia approach because some stakeholders only access information through one source.</p> <p>All Lake County Schools will use School Messenger, Facebook and parent email to communicate new safety measures in place at school, changes in school procedures, outbreak protocols and information pertaining to COVID 19 on a daily basis as needed. ELD staff put information in additional languages, and call ELD parents.</p> <p>Public Health staff will train all staff on visual screening for symptoms and best practices for safety protocols as needed. Protocol includes information on COVID 19, symptom screening, quarantine protocol and monitoring time before re-entry to school given to parents or guardians when they pick up their student as needed. This same information will be given to the staff who are sent home as a precautionary measure.</p>

Table 7.

## COVID-19 Mitigating Measures

OHA/ODE Recommendation(s) 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	<p>Students: In the school setting, vaccines are an important piece of communicable disease control. Vaccines are a requirement for attending school in Oregon. However, it is important to remark that certain populations may not be vaccinated because of medical contraindications or because of religious or philosophical decisions. Each school has a record of which students are and are not vaccinated with routine childhood immunizations as a primary control measure for outbreaks of vaccine-preventable diseases.</p> <p>Staff: In the school setting, vaccines are an important piece of communicable disease control. Vaccines or exemption are a requirement for working in schools in Oregon. However, it is important to remark that certain populations may not be vaccinated because of medical contraindications or because of religious or philosophical decisions. Each school has a record of which staff are and are not vaccinated with required Covid vaccines as a primary control measure for outbreaks of vaccine-preventable diseases.</p>
Face Coverings	<p>Staff interacting with students at less than 6 feet, to include bus drivers, school nurse, food service staff, office staff and speech personnel, will use face shields or face coverings as supplied by LCSD#7 as required by the State of Oregon if necessary. Additional masks will be on hand and on the buses for students whose masks have become unusable. If a student is unable to wear a mask the district has protocols in place to provide face shields as necessary.</p>
Isolation	<p>Public Health staff will train elementary staff on visual screening for symptoms and best practices for safety protocols. Bus drivers will provide initial visual screening as they pick students up, prior to arriving at school. If a student is deemed medically at risk then the student will not be allowed to enter the general cohort of the elementary school building. Isolation protocols will be followed. Upon suspicion of illness, students or staff must report to the isolation room. Office staff and school nurse will evaluate symptoms and initiate appropriate protocols. Parents will be notified, and trace contact protocol will be initiated as deemed necessary.</p> <p>Protocol includes information on COVID 19, quarantine protocol and monitoring time before re-entry to school given to parents or guardians when they pick up their student. This same information will be given to the staff who are sent home as a precautionary measure.</p> <p>Additional training will be provided as needed to address procedures for isolation of any ill or exposed students or</p>

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	<p>staff. Isolation protocol, designated isolation rooms and staff for the isolation room will be presented during an in-service training for Fremont/A.D. Hay Elementary. During this training protocol for reporting potential cases of COVID-19, cohorts, cross contamination and logs will also be presented.</p> <p><b>All logs shall include:</b>  <b>Child's name</b>  <b>Drop off/pick-up time</b>  <b>Student and parent contact information</b>  <b>All persons and contact information the student was in contact with</b></p> <p><b>District Compliance Officer (social distancing and PPE): Lloyd Hartley</b>  <b>Contact Tracing and Daily Logs: Bonnie Langum and Carlee Albertson</b>  <b>Isolation Room Staff: Bonnie Langum, Carlee Albertson, Susan Warner</b>  <b>On-site nurse: Miranda Philibert</b></p> <p><b>A.D. Hay Elementary Isolation Room: Room # 201</b>  <b>(Room to the south of office)</b></p> <p><b>Fremont Elementary Isolation Room: Annex room off of main office.</b></p> <p><b>**All occupants will use appropriate PPE when in the isolation rooms.</b></p>
Symptom Screening	<p>In-service training will include:</p> <ul style="list-style-type: none"> <li>· guidance for staff on symptoms</li> <li>· protocols to stay home</li> <li>· parent meetings and the importance of communication of health status</li> </ul> <p>The School Messenger system, Facebook and school websites will provide guidance to students and parents about symptoms, and when to stay home. Our district survey said this is one of the success stories of our implementation of our online program in the spring of 2020.</p> <p>Bus drivers and teaching staff will follow all state guidelines concerning visual screening for students and actions to take. Visional screening of all staff and students will take place each day. Parents will be notified, and trace contact</p>

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	<p>protocol initiated when necessary.</p> <p>Hand washing, social distancing, and face covering protocol will be implemented for each cohort group during regular intervals during the day (bathroom, recess, music, P.E. lunch, breakfast, and upon entering school) as necessary. Hand sanitizing stations will be placed in higher traffic areas and at the entrance to each school.</p> <p>Custodial crews will be on a rotation to work around our secondary school schedule to disinfect throughout the day if necessary due to an outbreak. Special emphasis will be placed on high traffic areas. After school in the evening, the entire complex will be disinfected and ventilation filters will be replaced multiple times a week to ensure maximum performance if an outbreak occurs and is deemed necessary by stakeholders.</p> <p>Sign in and out procedures will use sanitized pens labeled whether or not they have been sanitized. All visitors/parents/students will have access to hand sanitizer when arriving or departing from school.</p> <p>Additional staff will be assigned to entry and exit points to monitor social distancing if necessary.</p>
COVID-19 Testing	Lake County School District offers initial screening and Covid testing for students and staff onsite.
Airflow and Circulation	Open windows for increased ventilation will be considered and replacing filters at a higher frequency. We will also monitor air quality to ensure maximum circulation. Air scrubbers were purchased for A.D. Hay and Fremont Elementary School to provide additional protection.
Cohorting	<p>LCSD# 7 facilities will be open minimally to the public and community groups during school hours if an outbreak occurs and is deemed necessary by stakeholders.</p> <p>Grade level cohorts of less than 60 will be maintained during passing times, scheduled breaks, and lunches to the extent feasible.</p>
Physical Distancing	LCSD#7 has been working towards smaller classroom sizes in past years. Classroom sizes average 23 students or less. This approach lends itself to greater social distancing. All elementary school classrooms have been measured and analyzed for square footage. LCSD#7 School buildings tend to be older and built with larger square footage than more modern facilities.



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	<p>All unnecessary furniture will be removed from classrooms if deemed necessary.</p> <p>Additional staff will be assigned in high traffic areas to monitor social distancing. For example, lunch periods, entering and exiting the building and safety drills as needed.</p> <p>Additional signage and physical markers will be used with training to assist students in physical social distancing as needed.</p>
Hand Washing	<p>All staff and students will be required to wash hands and/or sanitize hands on a regular basis. Staff and students will attend training on appropriate hand washing. Additional signage will be put up in buildings. Fully stocked classrooms and bathrooms with soap for hand washing, monitor supplies more frequently by custodial staff.</p>
Cleaning and Disinfection	<p>Staff will be asked to perform cleaning and sanitizing tasks as deemed necessary. All school surfaces will be disinfected on a daily basis and in some locations multiple times throughout the day as necessary. This sanitation schedule will be modified as needed to ensure safety of our students and staff as needed.</p>
Training and Public Health Education	<p>Stakeholders will design and implement a plan for reentry to on site education for each quarantine group. For example, our methods of quarantining whole classrooms proved effective to stop the spread of Covid.</p> <p>During Covid operations, We have learned the value of communication with parents, students and all stakeholders in our community. We have designed a system that will continue to keep everyone informed and up to date as needed. This is especially important for our at risk populations, our ELL students, and other disadvantaged groups. We have discovered that we must use a multimedia approach because some stakeholders only access information through one source.</p> <p>All Lake County Schools will use School Messenger, Facebook and parent email to communicate new safety measures in place at school, changes in school procedures, outbreak protocols and information pertaining to COVID 19 on a daily basis as needed. ELD staff put information in additional languages, and call ELD parents.</p> <p>Our district stands ready to serve students on site within 24 hours of stakeholder's determining schools safe for onsite instruction. While students are quarantined, online instruction through a Google platform will be administered by the classroom teacher.</p>

## 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.

<https://www.lakeview.k12.or.us/> where this plan is available for public viewing.

Date Last Updated: **8/25/2022**

Date Last Practiced: **8/25/2022**



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