

COMMUNICABLE DISEASE PLAN

Yoncalla School District



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Superintendent YSD**

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Introduction

The purpose of a Communicable Diseases Management Annex (CDM Annex) is to provide a general, comprehensive plan to help protect the whole school community (students, staff, and visitors) from new communicable diseases. This plan is not intended to build fear but to provide a thoughtful, measured response to help support health and safety in the school community.

Whether or not schools will be closed, or for how long, is impossible to say in advance since all communicable diseases are different in their scope and severity. However, it is well established that infectious disease outbreaks most often start in schools so the District may close schools early in an event. Any decision to close schools will be done in consultation with the Local Public Health Authority (LPHA.)

There is the potential for great impact on general community and school functions in relation to communicable disease(s). As such, the creation of this Communicable Diseases MPA is intended to help prepare the District to support the school community (students, staff, and visitors) to be safe and healthy *before, during, and after* a communicable disease(s) event.

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. 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, 2016).

Differences between seasonal flu and pandemic flu:

Seasonal Flu	Mild to Moderate Pandemic	Severe Pandemic
THE VIRUS <ul style="list-style-type: none">• Caused by influenza viruses that are closely related to viruses that have previously circulated; most people will have some immunity to it.• Symptoms include fever, cough, runny nose, and muscle pain.• Complications such as pneumonia are most common in the very young and very old and may result in death.• Vaccine is produced each season to protect people from the three influenza strains predicted to be most likely to cause illness. IMPACT ON THE COMMUNITY <ul style="list-style-type: none">• Seasonal flu kills about 36,000 Americans each year and hospitalizes more than 200,000 children and adults.	THE VIRUS <ul style="list-style-type: none">• Caused by a new influenza virus that has not previously circulated among people and that can be easily spread.• Because most people will have no immunity to the new virus, it will likely cause illness in high numbers of people and more severe illness and deaths than seasonal influenza.• Symptoms are similar to seasonal flu, but may be more severe and have more frequent serious complications.• Healthy adults may be at increased risk for serious complications. IMPACT ON THE COMMUNITY <ul style="list-style-type: none">• May cause a moderate impact on society (e.g., some short-term school closings, encouragement of people who are sick to stay home).	THE VIRUS <ul style="list-style-type: none">• A severe strain causes more severe illness, results in greater loss of life, and has a greater impact on society.• During the peak of a severe pandemic, workplace absenteeism could reach up to 40% due to people being ill themselves or caring for family members. IMPACT ON THE COMMUNITY <ul style="list-style-type: none">• Schools and day care/child care facilities may be closed.• Public and social gatherings will be discouraged.• The patterns of daily life could be changed for some time with basic services and access to supplies possibly disrupted.

(Image: CDC)

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

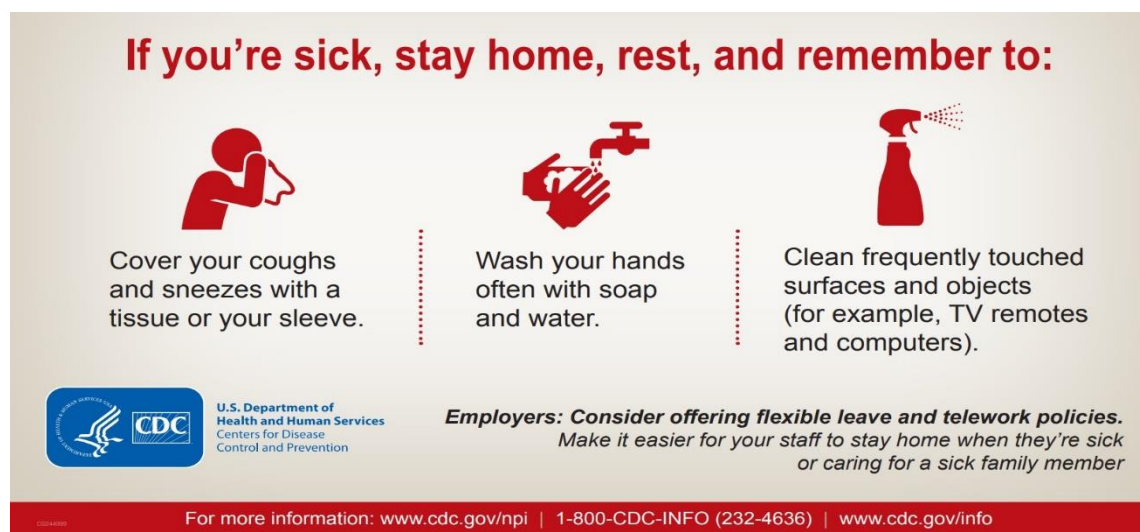
Control Measures

While prophylactic vaccine 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 24 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 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.

That being said, 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 entities based on the severity, the incidence and the proximity to the school setting leading to level based responses

Before a Communicable Disease Event

This is the point at which a communicable disease has been identified somewhere in Oregon, and is spreading, but is not yet impacting the school community.

Goal 1: To protect the school community from the spread of communicable diseases.

Objective	
Objective 1.A	Prepare the school community with ways to limit the spread of illness.
Objective 1.B	Maintain a clean environment in all school buildings and transportation vehicles.
Objective 1.C	Maintain clear communications with students, staff, parents, and the community on school communicable diseases efforts.
Objective 1.D	Track student and staff attendance and absenteeism rates.
Objective 1.E	Support mental wellbeing in school community.

Objective 1.A: Prepare the school community with ways to limit the spread of illness.

Courses of Action:

- Administrative team will review the hand hygiene and respiratory etiquette practices outlined by the Centers for Disease Control and Prevention (CDC) found at <https://www.cdc.gov/handwashing/index.html> with all members of the school community.
- Administrative team will post handwashing and respiratory etiquette health promotion materials from the CDC, found at <https://www.cdc.gov/handwashing/materials.html> in the common areas throughout each school building.
- The District will communicate information from the LPHA on infection symptoms and how to stop the spread of the communicable disease. The District will communicate this information to families.
- The Oregon Health Authority (OHA) website, found at <https://www.oregon.gov/oha/pages/index.aspx> can provide up-to-date information on communicable diseases.
- The administrative team will check district first aid and biohazard kits as needed.

Objective 1.B: Maintain a clean environment in all school buildings and transportation vehicles.

Courses of Action:

- Custodial staff will inventory hand washing, hand sanitizing, and cleaning supplies and notify the Supervisor of any needs.
- Ensure custodial staff has appropriate training on proper cleaning and disinfecting of work and play areas.
- Custodial staff will clean and disinfect all high frequency touch surfaces such as doorknobs, tabletops, telephones, and computers daily.
- Superintendent will ensure teaching and support staff have training on and access to proper disinfecting supplies.
- Teaching and support staff will use provided cleaning supplies to wipe down high touch surfaces during the school day.
- Transportation and support staff will use provided cleaning supplies to wipe down high touch surfaces during the school day.
- Hand sanitizing stations will be made available at the main entrances of each building with signs instructing people to sanitize their hands upon entering the building.
- Identify areas in buildings that can be used for short-term isolation or quarantine in the case an infected individual is identified to create separation from the general population prior to arrangements for their transportation off campus.

Objective 1.C: Maintain clear communications with children, students, staff, parents, and the community on school communicable diseases efforts.

Courses of Action:

- Make the Communicable Disease handbook available for access online by the general public via the District website.
- Link to information online, via the District website, regarding pandemic planning for families. If there are disease-specific recommendations available from the CDC or Oregon Health Authority (OHA) utilize those resources. If not, utilize the CDC published “Get Your Household Ready for Pandemic Flu April 2017” which can be found at <https://www.cdc.gov/nonpharmaceutical-interventions/pdf/gr-pan-flu-ind-house.pdf>.
- A one-page information sheet detailing the steps being taken by the District to prepare for a communicable disease(s) event. This will be posted on the school web site and Facebook pages.

- Review and/or test emergency communications protocols.
- Establish a direct line of communication with the LPHA during normal business hours at 541-440-3571 and after hours via the emergency phone number at 541-440-4471.

Objective 1.D: Track student and staff attendance and absenteeism rates.

Courses of Action:

- Identify a staff person, and backup individual, to be responsible for tracking attendance and absenteeism rates of both students and staff.
- Staff person to report weekly trends to District and School leadership individuals.
 - Principals at each building
 - Superintendent, Brian Berry
 - Transition Specialist, Erin Helgren
- The District will encourage staff and students with potential communicable disease symptoms to follow LPHA guidance on what steps should be taken by ill individuals.
- Staff, students, and visitors who observe potential pandemic symptoms in themselves or others while on school grounds are to notify the front office or a supervisor.

Objective 1.E: Support mental wellbeing in school community.

Courses of Action:

- School-based Counselors will support child and student mental wellbeing. Any children and students who attest to or show visible signs of distress or unease are to be given the option of connecting with a mental health professional.
- All staff will maintain calm, supervise, and reassure children and students of the efforts and monitoring being done by the District and LPHA to take appropriate actions relating to communicable disease(s).
- Staff may only share information related to the communicable disease that has been verified by the LPHA as accurate and approved by the school for sharing within the school community. Approved information will be provided to school staff by District and/or school leadership.

During a Communicable Disease Event

This is the point at which a communicable disease is impacting the school community.

Goal 2: To mitigate the impact of the spread of communicable disease(s) on the school community.

Objective	
Objective 2.A	Prepare the school community with ways to limit the spread of communicable disease(s).
Objective 2.B	Prepare the school community for possible closure.
Objective 2.C	Maintain a clean environment in all school buildings and transportation vehicles.
Objective 2.D	Safely transport students to and from school.
Objective 2.E	Track student and staff attendance and absenteeism rates.
Objective 2.F	Maintain clear communications with students, staff, parents, and the community on school pandemic response efforts.
Objective 2.G	Support mental wellbeing in school community.

Objective 2.H Identify areas in school buildings that can be used for short-term isolation or quarantine.

Objective 2.A: Prepare the school community with ways to limit the spread of communicable disease(s).

Courses of Action:

- Repeat all “Courses of Action” listed in the “Before a Communicable Disease Event” section as appropriate.
- Educated the school community on “physical distancing” practices which are things that can be done to reduce the spread of communicable disease from person to person by discouraging people from coming into close contact with one another. For a list of potential physical distancing practices, please see Appendix A on page 17.
- Staff will work to maintain calm, supervise, and reassure all children and students of the efforts the school is taking to support health and limit the spread of communicable disease.
- When possible, during the day when weather and operations permit, increase ventilation to the facility to decrease spread of communicable disease.
- When possible, following each school day, the school should be thoroughly ventilated opening all doors and windows or turning the air conditioning/heating systems up.
- In the event a vaccine becomes available, the District may partner with the LPHA on vaccination availability.
- Staff, students, and visitors who observe potential communicable disease(s) symptoms in themselves or others while on school grounds are to notify the front office or a supervisor immediately.

Objective 2.B: Prepare the school community for possible closure.

Courses of Action:

- Encourage parents to have alternative childcare plans in the event of a building or district-wide closure.
- Inform the ESD community of the different kinds of potential closures:
 - Administrative closure – done in the event the school, or district, can no longer maintain staffing levels necessary to provide essential school functions and ensure student safety.
 - School Emergency Closure – done in the event a school in the school district comprised of more than one school is unsafe, unhealthy, inaccessible, or inoperable due to one or more unforeseen natural events, mechanical failures, or actions or inactions by one or more persons.
 - District-wide Emergency Closure – done in the event that all school buildings in the school district are unsafe, unhealthy, inaccessible, or inoperable due to one or more unforeseen natural events, mechanical failures, or actions or inactions by one or more persons.
- The District will work in consultation with the LPHA in order to decide whether or not a school closure is necessary at any point in relation to a communicable disease.
- In the event someone tests positive for the communicable disease of concern, and has been on school grounds, the district will work with the LPHA to determine the process moving forward and whether or not a school, or district closure, will occur.
- If, and when possible, the District will prepare the school community for hybrid education and/or distance education options.
- Essential District personnel, in partnership with LPHA representatives, will maintain regular contact with each other to stay up to date on any changes to the impact on school closure and functions.

Objective 2.C: Maintain a clean environment in all school buildings and transportation vehicles.

Courses of Action:

- Custodial staff will inventory hand washing, hand sanitizing, and cleaning supplies and notify the Supervisor of inventory counts and needs.
- Ensure custodial staff has appropriate training on proper cleaning and disinfecting of work and play areas.
- Custodial staff will clean and disinfect all high frequency touch surfaces such as doorknobs, tabletops, telephones, and computers daily.
- Ensure teaching and support staff have training on and access to proper disinfecting supplies.
- Teaching and support staff will use provided cleaning supplies to wipe down high touch surfaces during the school day.
- Ensure transportation support staff has appropriate training on proper cleaning and disinfection of transportation vehicles.
- Transportation and support staff will use provided cleaning supplies to wipe down high touch surfaces during the school day.
- Hand sanitizing stations will be made available at the main entrances of each school building with signs instructing people to sanitize their hands upon entering the building.
- Hand sanitizing stations will be made available in the cafeteria of each school building with signs instructing people to sanitize, or wash, their hands prior to eating.

Objective 2.D: Safely transport students to and from school.

Courses of Action:

- See “Course of Action: Maintain a clean environment in all school buildings and transportation vehicles” for cleaning instructions.
- Any transportation staff with communicable disease symptoms are not to transport students in any capacity.
- If a staff member or student displays new communicable disease-like symptoms, based on LPHA guidelines, while on a transportation vehicle, the driver is to:
 - If someone is in need of emergency services call 911.
 - Notify the transportation office immediately to inform them of the situation.
 - The transportation office is to inform the District administration office of the situation.
 - The individual’s emergency contact person(s) will be notified per District policy.
 - The District administration office will call the LPHA for consultation on next best steps.
 - Upon arrival to the school building, any isolation protocols in place will be followed.
- The transportation staff will account for all students and personnel on their vehicle at that time and report this information to the transportation office.

Objective 2.E: Track student and staff attendance and absenteeism rates.

Courses of Action:

- Identify a staff person, and backup individual, to be responsible for tracking attendance and absenteeism rates of both students and staff.
- Staff person to report daily trends to District and School leadership individuals.
 - Teachers,
 - Administrative Assistants,

- Superintendent

- Encourage staff and students with potential symptoms to follow LPHA guidance on ill individuals.

Objective 2.F: Maintain clear communications with students, staff, parents, and the community on school communicable disease response efforts.

Courses of Action:

- Ensure that all communications are available.
- Provide information to the public regarding any changes in school functions.
- Identify a liaison to communicate with County Emergency Response Incident Command Center on behalf of the District.
- In the case of individual building(s) closure, communicate with the public via available concise information on:
 - Reason for closure.
 - Planned length of closure.
 - How the decision was made.
 - Agencies involved in the decision-making process.
 - Date it is anticipated school will restart.
 - Impact on student schoolwork, how students can obtain necessary materials, and plan for distance education options.
 - How updates will be communicated.

Objective 2.G: Support mental wellbeing in school community.

Courses of Action:

- School-based Counselors will support child and student mental wellbeing. Any students who attest to or show visible signs of distress or unease are to be given the option of connecting with a mental health professional.
- All staff will maintain calm, supervise, and reassure students of the efforts and monitoring being done by the District and LPHA to take appropriate actions relating to the pandemic.
- Staff may only share information related to the communicable disease that has been verified by the LPHA as accurate and approved by the school for sharing within the school community.
- The District will contact the LMHA for support services and resources.

Objective 2.H: Identify areas in school buildings that can be used for short-term isolation or quarantine in the case an infected, or exposed, individual is identified on school grounds to create separation from the general population prior to their transportation off campus.

Courses of Action:

- If someone is in need of emergency services call 911.
- If someone is identified with possible communicable disease symptoms, and is not in need of emergency services, they are to be temporarily isolated from the rest of the school community with appropriate supervision.
- Notify the LPHA of the potential infection by calling 541-440-3571.
- Follow the directions of the LPHA on next steps.
- Follow school protocols for parent/guardian notification.

- The Family Educational Rights and Privacy Act (FERPA) and Health Insurance Portability and Accountability Act (HIPAA) will be followed as appropriate in relation to communicable disease infections and outbreaks.

After a Communicable Disease Event

This is the point at which the community has either been declared free of the disease, the disease has become endemic in the population, or a vaccine been administered and herd immunity achieved.

Goal 3: Return the school community to normal, daily functions.

Objective	
Objective 3.A	Inventory and stock supplies needed for daily function.
Objective 3.B	Maintain a clean environment in all school buildings and transportation vehicles.
Objective 3.C	Support the school community to return to the learning environment.
Objective 3.D	Continue messaging and education to the school community on ways to limit the spread of illness.
Objective 3.E	Support mental wellbeing in school community.

Objective 3.A: Inventory and stock supplies needed for daily function.

Courses of Action:

- Custodial staff to inventory all cleaning and disinfecting materials and supplies making note of any products that need to be ordered. Inform supervisor of inventory numbers and needs.
- Custodial staff to inventory hand sanitizer supplies. Supervisors, in collaboration with school leadership and custodial staff, are to determine the necessary amount of hand sanitizer needed to be prepared for future communicable disease(s) events. Product is to be ordered, stocked, and cycled through on a regular basis so as not to expire.
- Food services staff are to inventory all remaining perishable and non-perishable food items taking note of any foods or products that need to be ordered. Inform supervisor of inventory numbers and needs.

Objective 3.B: Maintain a clean environment in all school buildings and transportation vehicles.

Courses of Action:

- The District will consult with the LPHA to determine whether or not supplemental contracted custodial staff and/or specialized training is necessary to properly disinfect the school prior to returning to normal daily functions.
- Custodial staff will clean and disinfect all high frequency touch surfaces such as doorknobs, tabletops, telephones, and computers daily on an ongoing basis.
- Hand sanitizing stations will be made available at the main entrances of each school building with signs instructing people to sanitize their hands upon entering the building.
- Hand sanitizing stations will be made available in the cafeteria of each school building with signs instructing people to sanitize, or wash, their hands prior to eating.

Objective 3.C: Support the school community to return to the learning environment in the case a closure was necessary.

Courses of Action:

- The District will work with the Oregon Department of Education (ODE) to determine appropriate courses of action following school closures.
- School District Leadership is to document and share with the school community information on any waivers from the Oregon Department of Education.
- Continue working with the County Emergency Response Incident Command Center via the identified liaison.
- Communicate the reopening plan to the school community.

Objective 3.D: Continue messaging and education to the school community on ways to limit the spread of illness.

Courses of Action:

- The District will review the hand hygiene practices outlined by the Centers for Disease Control and Prevention (CDC) found at <https://www.cdc.gov/handwashing/index.html> with all members of the school community.
- Superintendent will post handwashing health promotion materials from the CDC, [found at https://www.cdc.gov/handwashing/materials.html](https://www.cdc.gov/handwashing/materials.html) in the common areas throughout each school building.
- Safety Committee will check district first aid and biohazard kits as needed.

Objective 3.E: Support mental wellbeing in school community.

Courses of Action:

- School-based Counselors, will support student mental wellbeing. Any students who attest to or show visible signs of distress or unease are to be given the option of connecting with a mental health professional.
- All staff will maintain calm, supervise, and reassure students of the efforts and monitoring being done by the District and LPHA to take appropriate actions relating to the communicable disease.
- Staff may only share information related to the communicable disease that has been verified by the LPHA as accurate and approved by the school for sharing within the school community.
- The District will contact the LMHA for support services and resources.

Special Considerations

Employee Sick Leave

Administration and human resources should work together to determine the need to temporarily revise or flex sick leave to accommodate any public health guidance in regards to lost work, such as maximum incubation period exclusion (10-14 days). Prolonged exclusion may occur with individuals who are contacts to identified cases, who are immunocompromised or who are identified as potential cases.

School Closures

If school 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.

Procedures

Communicable Disease Control Measures – Guidelines for Exclusion

Part 1: EXPANDED GUIDELINES FOR SCHOOL STAFF

Symptoms described in the EXPANDED GUIDELINES FOR SCHOOL STAFF should be considered reasons for exclusion until symptoms are resolved for the length of time indicated below OR until the student has been cleared by a licensed healthcare provider, unless otherwise noted.

School personnel considering a student exclusion should also consider the following:

- Only a licensed health care provider can determine a diagnosis or prescribe treatment.
- The school administrator has the authority to enforce exclusion. [[OAR 333-019-0010](#)]
- The registered nurse (RN) or school nurse* can be a valuable resource. Collaboration with the RN may be legally required, especially if health issues relate to a student's chronic condition.
 - "A registered nurse or school nurse is responsible for coordinating the school nursing services provided to an individual student." [[ORS 336.201](#)]
 - A RN is licensed to provide "services for students who are medically fragile or have special health care needs" [[OAR 581-022-2220](#); ORS 336.201].
 - *School nurse: an RN certified by the Teacher Standards and Practices Commission to conduct and coordinate school health services. [[ORS 342.455](#)]
- Messages about health should be created in collaboration with those licensed or trained in the health field. The registered nurse practicing in the school setting or the local public health authority should be consulted regarding notifying parents/guardians about health concerns, including describing risks and control measures.

- During times of increased concern about a specific communicable disease, such as a local flu outbreak or another emergent disease, changes to this guidance may be warranted. School administrators should work with local public health authorities regarding screening for illness, reporting of illness, and length of exclusion related to specific symptoms of concern.

Communicable Disease Control Measures – Guidelines for Exclusion

Students and school staff who are diagnosed with a school-restrictable disease must be excluded from work or attendance. Susceptible students and school staff may also be excluded following exposure to selected diseases, per instructions to the school administrator from the local public health authority or per OHA state-wide posted notices. [OAR 333-019-0010; 333-019-0100]

Students should also be excluded from school if they exhibit:

- 1) **Fever**: a measured oral temperature of 100.4°F, with or without the symptoms below.
 - a) Stay home until temperature is below 100.4°F for 72 hours **WITHOUT** the use of fever reducing medication such as ibuprofen (Advil), acetaminophen (Tylenol), aspirin.
- 2) **Skin rash or sores**: **ANY** new rash if not previously diagnosed by a health care provider **OR** if rash is increasing in size **OR** if new sores or wounds are developing day-to-day **OR** if rash, sores or wounds are draining and cannot be completely covered with a bandage.
 - a) Stay home until rash is resolved **OR** until sores and wounds are dry or can be completely covered with a bandage **OR** until diagnosis and clearance are provided by a licensed healthcare provider.
- 3) **Difficulty breathing or shortness of breath** not explained by situation such as exercise: feeling unable to catch their breath, gasping for air, breathing too fast or too shallowly, breathing with extra effort such as using muscles of the stomach, chest, or neck.
 - a) Seek medical attention; return to school when advised by a licensed healthcare provider.
- 4) **Concerning cough**: persistent cough that is not yet diagnosed and cleared by a licensed healthcare provider **OR** any acute (non-chronic) cough illness **OR** cough that is frequent or severe enough to interfere with active participation in usual school activities.
 - a) Stay home until 72 hours after cough resolves.
 - b) If pertussis (“whooping cough”) is diagnosed by a licensed healthcare provider, student must be excluded from school until completion of a 5-day course of prescribed antibiotics or until cleared for return by the local public health authority. If COVID-19 is diagnosed, exclude until cleared for return by the local public health authority.
- 5) **Diarrhea**: three or more watery or loose stools in 24 hours **OR** sudden onset of loose stools **OR** student unable to control bowel function when previously able to do so a) Stay home until 48 hours after diarrhea resolves.

- 6) **Vomiting**: at least 1 episode that is unexplained
 - a) Stay home until 48 hours after last episode
- 7) **Headache with a stiff neck and fever OR headache with recent head injury** not yet seen and cleared by licensed health provider.
 - a) Recent head injury: consider [ODE concussion guidance](#).
- 8) **Jaundice**: yellowing of the eyes or skin (new or uncharacteristic)
 - a) Must be seen by a licensed prescriber and cleared before return to school
- 9) **Concerning eye symptoms**: colored drainage from the eyes **OR** unexplained redness of one or both eyes **OR** eye irritation accompanied by vision changes **OR** symptoms such as eye irritation, pain, redness, swelling or excessive tear production that prevent active participation in usual school activities.
 - a) Students with eye symptoms who have been seen and cleared by a licensed prescriber may remain in school after indicated therapy has been started.
- 10) **Behavior change**: unexplained uncharacteristic irritability, lethargy, decreased alertness, or increased confusion **OR** any unexplained behavior change accompanied by recent head injury not yet assessed and cleared by a licensed healthcare provider.
 - a) In case of head injury, consider [ODE concussion guidance](#).
- 11) **Major health event**: may include an illness lasting more than 2 weeks; a surgical procedure with potential to affect vital signs or active participation in school activities; or a new or changed health condition for which school staff is not adequately informed, trained, or licensed to provide care.
 - a) Student should not be at school until health and safety are addressed.
 - b) School staff should follow appropriate process to address reasonable accommodations and school health service provision in accordance with applicable federal and state laws.
- 12) **Student requiring more care than school staff can safely provide**:
 - a) Student should not be at school until health and safety are addressed.
 - b) School staff should follow appropriate process to address reasonable accommodations and school health service provision in accordance with applicable federal and state laws.

Communicable Disease Control Measures – Guidelines for Exclusion

When Should I Keep My Student Home?

NOTE: These are school instructions, not medical advice. Please contact your doctor with health concerns.

Student's Symptoms or Illness	Student May Return to School When*
Fever: temperature by mouth greater than 100.4 degrees	No fever for at least 72 hours without the use of fever-reducing medicine.
Skin rash or open sores	Rash is gone; sores are dry or can be completely covered by a bandage; or with orders from doctor to school nurse.
New Cough illness	In general, when symptom-free for 72 hours. If pertussis (whooping cough) is diagnosed, after taking 5-day course of prescribed antibiotics, or when cleared for return by local public health authority. If COVID-19 is diagnosed, with orders from local public health authority.
Diarrhea: 3 loose or watery stools in one day OR newly not able to control bowel movements	Symptom-free for 48 hours.
Vomiting	Symptom-free for 48 hours.
Headache with stiff neck and fever; OR with recent head injury	Symptom-free or with orders from doctor to school nurse.
Jaundice: (new) yellow color in eyes or skin	After orders from doctor or local public health authority to school nurse.
Red eyes or eye discharge: yellow or brown drainage from eyes	Redness and discharge is gone OR with orders from doctor to school nurse.
Acting different without a reason: unusually sleepy or grumpy OR acting differently after a head injury	After return to normal behavior OR with orders from doctor to school nurse.
Major health event, like surgery OR an illness lasting 2 or more weeks	After orders from doctor to school nurse.
Student's health condition requires more care than school staff can safely provide	After measures are in place for student's safety.

To notify the school about your student's illness, please call (541) 849-2175.

To contact the school nurse or health office please call or email the Yoncalla District Office.

APPENDIX A

Physical Distancing

COVID-19 Specific Requirements (Section 1c of Guidance)

- Establishing a minimum of 35 square feet per person when determining room capacity.
- Support physical distancing in all daily activities and instruction, maintaining at least six feet between individuals to the maximum extent possible.
- Minimize time standing in lines and work to maintain six feet distance including marking spacing on floor, one-way traffic flow in constrained spaces, etc.
- Schedule modifications to limit the number of students in the building.
- Plan for students who will need additional support in learning how to maintain physical distancing requirements.
- Adults and K-12 students should wear face coverings to prevent the spread of disease.

Physical distancing may include, but is not limited to, the following examples:

- Not holding hands.
- Not sharing writing or eating utensils.
- Not sharing beverages.
- When possible, maintaining of distance of 6 or more feet between all individuals.
- Not shaking hands, hugging, or kissing.
- Wearing of cloth facial coverings.
- Stopping non-essential functions in the school and administrative offices.
- Encouraging students and staff to eat lunches in the classroom instead of gathering together in the cafeteria.
- Cancelling after school activities and fieldtrips.
- Cancelling special functions such as dances, theater presentations, assemblies, etc.
- Allowing only essential school visitors.
- Prohibit congregation of students and staff in the hallways.
- Stagger class changes to avoid gathering of students in the hallways.
- Stagger daily arrival and dismissal to avoid gatherings of students.
- Separate student desks and work areas when possible.
- Closure of school buildings and/or the entire district.
- Designation of one-way only movement through hallways and rooms.

APPENDIX B

Protocol for Isolating Ill or Exposed Persons

- If someone is in need of emergency services call 911.
 - Emergency signs that require immediate medical attention:
 - Trouble breathing
 - Persistent pain or pressure in the chest
 - New confusion or inability to awaken
 - Bluish lips or face
 - Other severe symptoms
- If someone is identified with COVID-19 symptoms, and is not in need of emergency services, they are to be temporarily isolated from the rest of the school community.
- COVID-19 symptoms are as follows:
 - Primary symptoms of concern: cough, fever or chills, shortness of breath, or difficulty breathing.
 - Note that muscle pain, headache, sore throat, new loss of taste or smell, diarrhea, nausea, vomiting, nasal congestion, and runny nose are also symptoms often associated with COVID-19. More information about COVID-19 symptoms is available [from CDC](https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html) and at <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>
- Notify the LPHA of the potential infection by calling 541-440-3671.
- Follow the directions of the LPHA on next steps.
- Follow school protocols for parent/guardian notification.
- Staff and students will follow privacy guidelines and maintain anonymity of any individuals identified as having potential symptoms.

APPENDIX C

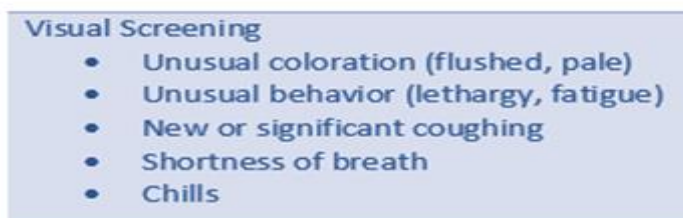
Protocol for Assessing Students & Staff Identified as Sick Whole on School/District Grounds

1. All staff will receive training on the signs of COVID and when they should remain home, when to quarantine and when to isolate.
2. Upon arrival, staff will sign in the office self-affirming that they have no signs of COVID
3. If a staff member is exhibiting signs of COVID, they will be asked to return home and work from their until they have been tested and or are symptom free. If a staff member needs assistance they will be isolated in the pre-designated spot while they await someone to assist them in returning home. If needed an ambulance will be called.
4. Upon arrival, any child or student will be visually scanned and asked questions to determine if they are exhibiting any of the signs of COVID.
5. If a child or staff member is exhibiting signs of COVID. They will move to an isolation room until a family member can come to pick the child up. If needed an ambulance will be called.

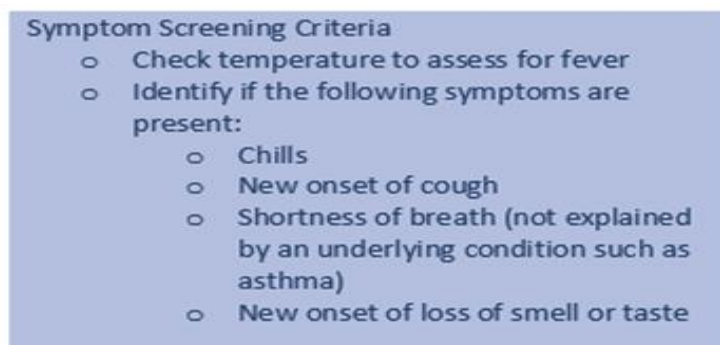
APPENDIX D

Instructions for Daily Visual Symptom Screening Upon Entry

- Individuals should be *visually* screened by designated staff each day upon entry to the school bus or the school building, to determine if illness may be present. (Individuals should remain 6 feet apart as they enter the building or school bus, and staff must ensure that they are not shamed or subjected to bias based on race, ethnicity, clothing, or perceived socioeconomic status.) If individuals are positive for any items listed in *Visual Screening*, they should be sent to the office to be further screened by designated staff.
- Any student who reports or is visually assessed to be ill during the course of the day should be referred to designated staff for further screening and isolation.



- Students presenting to the office should be logged into the health room log.
- Health checks will be conducted safely and respectfully, and in accordance with any applicable privacy laws and regulations.
- Designated health staff will specifically screen students as per the *Symptom Screening Criteria* (and algorithm) to determine if symptoms are present that require isolation and dismissal as per *Communicable Disease Plan* and previously listed *Exclusion Criteria*.



Students meeting exclusion criteria should be dismissed to home.

- Ill students must be placed in separate isolation space until picked up by parents.
- Symptomatic individuals will be logged into a symptom tracker shared by the front office, health room, and isolation space.

References

- 1) Centers for Disease Control and Prevention. (2020). *Influenza*. Retrieved from <https://www.cdc.gov/flu/about/index.html>
- 2) Centers for Disease Control and Prevention. *Definitions of Symptoms for Reportable Illnesses*. <https://www.cdc.gov/quarantine/air/reporting-deaths-illness/definitionssymptoms-reportable-illnesses.html> . Published June 30, 2017.
- 3) Centers for Disease Control and Prevention. *Type of Duration of Precautions Recommended for Selected Infections and Conditions*. <https://www.cdc.gov/infectioncontrol/guidelines/isolation/appendix/type-durationprecautions.html> Published July 22, 2019.
- 4) CDC (2016) *Variant Influenza Viruses: Background and CDC Risk Assessment and Reporting*. Retrieved from <https://www.cdc.gov/flu/swineflu/variant.htm>
- 5) CDC (2017) *Getting your school ready for pandemic flu*. Retrieved from <https://www.cdc.gov/nonpharmaceutical-interventions/pdf/gr-pan-flu-ed-set.pdf>
- 6) Columba Gorge ESD (2020), Emergency Operation Plan. <https://www.cgesd.k12.or.us/>
- 7) Douglas ESD (2020), Instructions for Daily Visual Symptom Screening Upon Entry. <https://douglassesd.k12.or.us/>
- 8) Helix School District (2020), Helix School District Communicable Disease Management Plan. <https://www.helix.k12.or.us/operational-blueprint-for-reentry>
- 9) Oregon Health Authority (2017). *Communicable Disease Reporting*. Retrieved from <http://public.health.oregon.gov/diseasesconditions/communicabledisease/reportingcommunicabledisease/>
- 10) Oregon Department of Education (2016) *Exclusion Guidelines*. Retrieved from: <http://www.ode.state.or.us/search/page/?id=397>
- 11) South Dakota Department of Health (2019) Seasonal Respiratory Viruses. Retrieved from <https://doh.sd.gov/diseases/infectious/diseasefacts/viral-respiratory.aspx> Weatherspoon, D. (2019) *Acute Viral Respiratory Infections*. Retrieved from <https://www.healthline.com/health/acute-respiratory-disease>