

Gaston School District Communicable Disease Management and Pandemic Response Plan



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Definition

A communicable disease is an infectious disease that can be spread from person to person by various routes such as contact with infected individuals or their bodily discharges or fluids, by contact with contaminated surfaces or objects, by ingestion of contaminated food or water, breathing in airborne viruses or by direct or indirect contact with disease vectors.

There are many infectious diseases regularly circulating in the school setting. Due to the various nature, contagiousness and mode of transmission of different communicable diseases, Oregon laws and the Oregon Health Authority has exclusion from school criteria for restrictable diseases and certain excludible symptoms. See the Oregon Department of Education and Oregon Health Authority's [Communicable Disease Guidance](#) for an up-to-date list of restrictable diseases and excludible symptoms.

Communicable Disease Prevention

Everyday measures to limit the spread of communicable diseases should be an active part of the school comprehensive and preventative health service plan. These measures include, but are not limited to:

- Washing hands with soap and water for 20 seconds
- Effectively cover your coughs and sneezes
- Routine sanitizing
- Stay home when you're sick
- Maintain social distancing
- Personal protective equipment

Other control measures include:

- Vaccines
- Food safety
- Proper school policies and training for staff
- Educating students and families on illness prevention and management

EVERYDAY PREVENTIVE ACTIONS
Everyone should always practice good personal health habits to help prevent flu.

-  **Stay home when you are sick.** Stay home for at least 24 hours after you no longer have a fever or signs of a fever without the use of fever-reducing medicines.
-  **Cover your coughs and sneezes with a tissue.**
-  **Wash your hands often with soap and water for at least 20 seconds.** Use at least a 60% alcohol-based hand sanitizer if soap and water are not available.
-  **Clean frequently touched surfaces and objects.**

NPIs RESERVED FOR A FLU PANDEMIC
*Educators should be prepared to take these additional actions, if recommended by public health officials.**

-  **Be prepared to allow your staff and students to stay home if someone in their house is sick.**
-  **Increase space between people at school to at least 3 feet, as much as possible.**
-  **Modify, postpone, or cancel large school events.**
-  **Temporarily dismiss students attending childcare facilities, K-12 schools, or institutions of higher education.**

*These additional actions may be recommended for severe, very severe, or extreme flu pandemics.

Environmental Surface Cleaning

Clean schools contribute to healthy environments and minimize the risk of communicable disease transmission. Some of the important concepts associated with 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 largely governed by facilities management and custodial services, there are certain 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.

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 state that certain populations may not be vaccinated because of medical contraindications or because of religious or philosophical decisions. Each school maintains records of which students are and are not vaccinated with routine childhood immunizations as a primary control measure for outbreaks of vaccine preventable diseases. Vaccine process is in accordance with Oregon Health Authority regulations, Washington County Public Health guidance, and Gaston SD board policy.

The district maintains appropriate records of each student's vaccination record, including medical and non-medical exemptions. These are reported annually to the Washington County Public Health Department. Students who do not have the appropriate vaccinations or exemptions will be excluded from school per Public Health procedures and Oregon State Laws.

In coordination with the district nurse:

- When a vaccine-preventable disease (pertussis, varicella) is identified in the school setting, designated staff should run immunization reports to identify unvaccinated students in the school setting who may have been exposed.
- When the circulation of a vaccine-preventable disease (measles) is increasing in incident in the community, identification of students and staff who are not fully immunized is important.
- The school district will provide information about the COVID-19 vaccine to families.
- The district works in partnership with health entities to provide access to vaccination clinics throughout the school year.
- Communication regarding vaccinations are provided in preferred languages.
- During periods of high transmission, the school district will collaborate with the LPHS, OHA, and CDC.

Communicable Disease Exclusion

Oregon public health law requires individuals who work in or attend school who are diagnosed with certain diseases or conditions be excluded from school until they are no longer contagious. However, a physician confirmed diagnosis is not always possible and schools may need to make exclusion decisions based on clearly identifiable signs and/or symptoms. The Oregon Health Authority and Oregon Department of Education's Exclusion Guidelines are an easy reference for staff and parents. Consult a school nurse as needed.

PLEASE KEEP STUDENTS WITH SYMPTOMS OUT OF SCHOOL

This list is school instructions, not medical advice. Please contact your health care provider with health concerns.

| SYMPTOMS OF ILLNESS | THE STUDENT MAY RETURN AFTER... |
|--|---|
|  Fever: temperature of 100.4°F (38°C) or greater | *Fever-free for 24 hours without taking fever-reducing medicine AND per guidance for primary COVID-19 symptoms. |
|  New cough illness | * Symptoms improving for 24 hours (no cough or cough is well-controlled) AND per guidance for primary COVID-19 symptoms. |
|  New difficulty breathing | * Symptoms improving for 24 hours (breathing comfortably) AND per guidance for primary COVID-19 symptoms. Urgent medical care may be needed. |
|  Diarrhea: 3 loose or watery stools in a day OR not able to control bowel movements | *Symptom-free for 48 hours OR with orders from doctor to school nurse. |
|  Vomiting: one or more episode that is unexplained | *Symptom-free for 48 hours OR with orders from doctor to school nurse. |
|  Headache with stiff neck and fever | *Symptom-free OR with orders from doctor to school nurse. Follow fever instructions above. Urgent medical care may be needed. |
| Skin rash or open sores | *Symptom free , which means rash is gone OR sores are dry or can be completely covered by a bandage OR with orders from doctor to school nurse. |
| Red eyes with colored drainage | *Symptom-free , which means redness and drainage are gone OR with orders from doctor to school nurse. |
| Jaundice: new yellow color in eyes or skin | *After the school has orders from doctor or local public health authority to school nurse. |
| Acting differently without a reason: unusually sleepy, grumpy, or confused. | *Symptom-free , which means return to normal behavior OR with orders from doctor to school nurse. |
| Major health event , like an illness lasting 2 or more weeks OR a hospital stay, OR health condition requires more care than school staff can safely provide. | *After the school has orders from doctor to school nurse AND after measures are in place for the student's safety. Please work with school staff to address special health-care needs so the student may attend safely. |



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 Washington County Public Health. 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 Washington County Public Health 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
- Typhi infection
- Shigellosis
- Shiga-toxigenic Escherichia coli (STEC) infection
- Hepatitis A

- Tuberculosis
- Pertussis
- Rubella
- Acute Hepatitis B
- COVID-19 is also declared a restrictable condition under OAR 333-018-0900

If a report is made to the school office, administration or other school staff in regards to any communicable disease diagnosis in students or staff, this should immediately be referred to the School Nurse.

The School Nurse and Administration will identify the need for communication, surveillance or control measures, including potential communication with Washington County Public Health.

The interventions and communication are driven by multiple factors including the diagnosis, student health status, risk of exposure, number of individuals infected and risk to cohort or specific students.

In compliance with FERPA and HIPPA, school staff receiving reports *should not* inform any other students, staff or parents of the report.

Outbreak

When to call Washington County Public Health for School Outbreaks

- Unusually high absenteeism in students or staff with vomiting and/or diarrhea in the same classroom or across the school within a two-week period
- Evidence of severe illness (i.e. multiple students or staff hospitalized with similar symptoms)
- Unusually high absenteeism in students or staff with fever and cough and/or sore throat
 - 10 or more people or 20% or more of facility, absence is prolonged 3 or more days
 - In school, 40% or more of students in any one classroom absent

For further guidance on specific outbreaks including respiratory and gastrointestinal disease outbreaks, consult the district nurse, Washington County Public Health and utilize the Oregon Health Authority [Outbreak Toolkits](#).

Seasonal Respiratory Illness and Seasonal Influenza

Seasonal Respiratory Illness

There are several viruses that routinely circulate in the community to cause upper respiratory illnesses. The "common cold" is caused by rhinoviruses, adenoviruses, and coronaviruses. The symptoms of these viruses may vary in severity but include cough, low-grade fever, runny nose and sore throat.

Seasonal Influenza

Influenza (flu) is a contagious respiratory illness caused by influenza viruses. There are two main types of influenza viruses: Types A and B. The flu A and B viruses that routinely spread in people are responsible for seasonal flu epidemics each year. The flu can cause mild to severe illness. Serious cases of the flu can result in hospitalization or even death. Routine symptoms associated with flu include fever, cough, sore throat, runny nose, muscle aches, headaches, fatigue and sometimes vomiting.

Pandemic Specific Response Plan

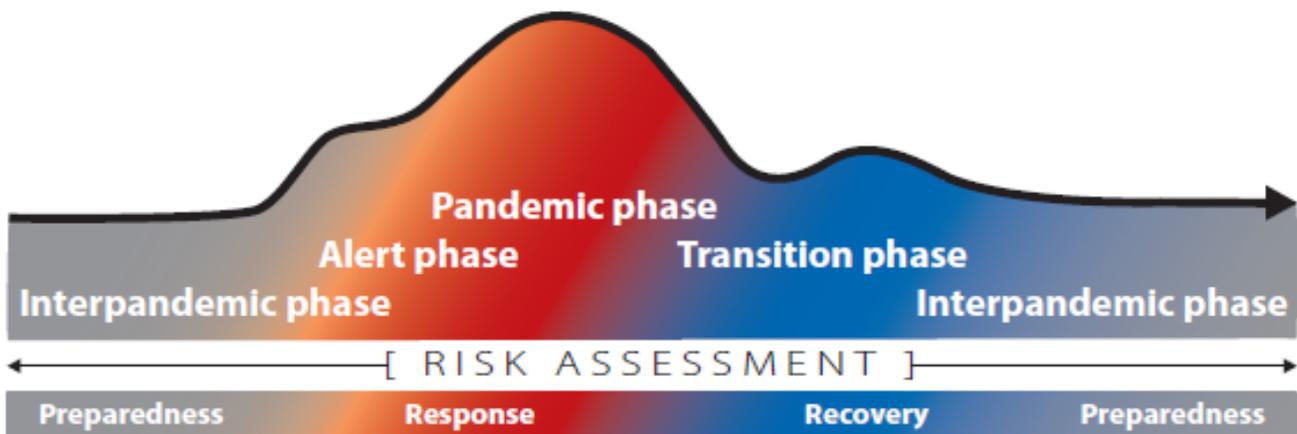
Purpose

The purpose of this document is to provide a 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. NPIs, 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 .

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 (COVID-19). 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 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. Because these are new viruses, a vaccine may not be available right away. A pandemic, therefore, could overwhelm normal operation worldwide.



³ This continuum is according to a "global average" of cases, over time, based on continued risk assessment and consistent with the broader emergency risk management continuum.

Control Measures

Prophylactic vaccines and antiviral medications are appropriate interventions in some viral respiratory conditions such as seasonal influenza, they are not always accessible for novel strains. NPIs are essential and can aid in the reductions of disease transmission. It is important to note that a disease that is widely spread in the community has many options for transmission beyond a school setting. A school district can only account for NPIs in a school setting and at school-sponsored events. Measures associated with novel or variant viruses are based on the severity of the virus. Since new viruses have no historical context, public health guidance evolves as increased numbers of cases are identified.

Everyday measures to limit the spread of communicable diseases should be an active part of the school comprehensive and preventative health service plan. These measures include, but are not limited to:

- Washing hands with soap and water for 20 seconds or using approved alcohol based hand sanitizer when hand washing is not available
- Effectively cover your coughs and sneezes and throw the tissue in the garbage after each use
- Routine sanitizing with EPA approved disinfectant (list of [effective disinfectants against COVID-19](#))
- Stay home when you're sick
- Maintain social distancing
- Personal protective equipment

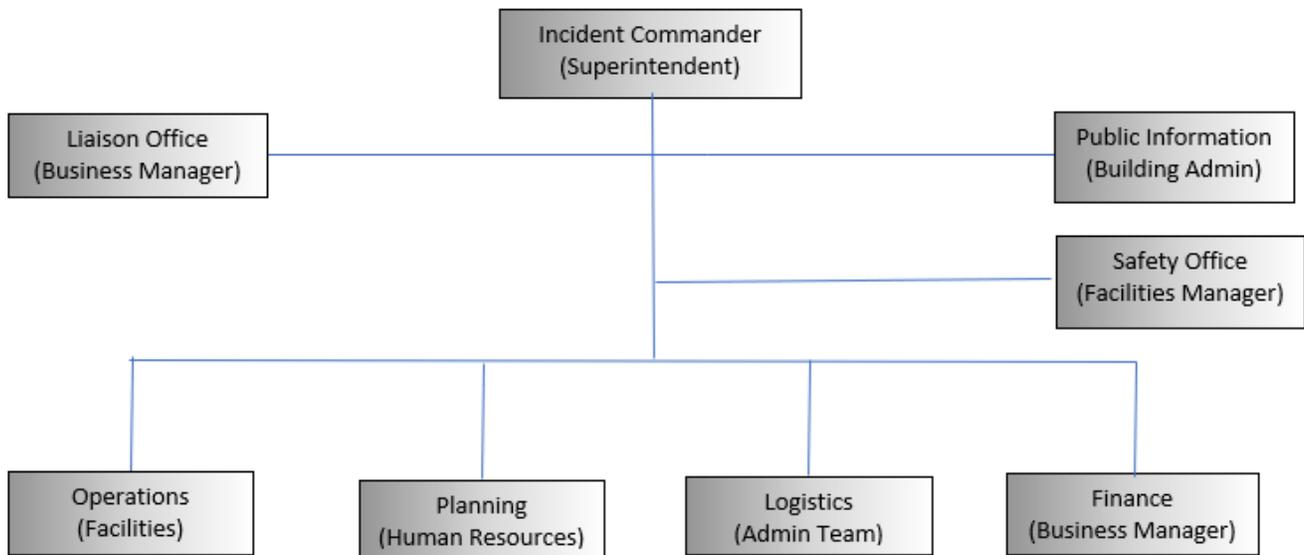
Identified Novel Viruses Cases

When a novel disease is identified, it is the responsibility of school health service personnel and school administration to pay close attention to trends. An identified individual that is part of the district's Response Team will be subscribed to OHA's alerts specific to pandemic content.

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 send out guidance. When novel viruses emerge in the state, Oregon Health Authority (OHA) will provide direct guidance.

Response Team

Gaston School District has put together a Response Team that consists of individuals who can fulfill roles in district policy, clinical information, human resources, administration and facilities.



Gaston School District's Response Team will assume the following roles:

- Develop capabilities to implement non-pharmaceutical measures (NPI) to decrease the spread of disease throughout the school community as guided by the epidemiology of the pandemic and the Washington County Public Health Department.
- Develop and implement pandemic preparedness activities and a business continuity plan aimed at maintaining the provision of educational services and limiting the spread of disease throughout the duration of the pandemic.
- Communicate with and educate the school community about approved public health practices and what each person can do to prepare or respond to minimize health risks.
- Consult with Oregon Health Authority (OHA) and Washington County Department of Health and Human Services (WCDHHS) to implement a plan.
- Develop and implement educational support plans for students who are isolated or quarantined. Coordinate these plans with support plans developed by the WCDHHS and Oregon Department of Education (ODE).
- Develop and/or review a recovery plan that provides educational support and emotional support for staff and students.

When public health has deemed a novel virus a pandemic threat, defer to the [CDC checklist for schools](#) (appendix B) in order to establish a specific emergency response framework with key stakeholders. During this time, planning will need to be initiated on the continuity of education in the event of school closures.

Actions

LEVEL ONE ACTION: VIRUS DETECTED IN THE REGION - PREVENTION FOCUSED

| Personal NPIs | Community NPIs | Environmental NPIs | Communication |
|--|---|---|---|
| <ul style="list-style-type: none"> • Increase routine hand hygiene. • Use alcohol-based hand sanitizer. • Cover coughs/sneezes effectively. Wash hands. • Stay home when sick for at least 24 hours after fever free without use of a fever reducer. | <ul style="list-style-type: none"> • Identify baseline absenteeism rates to determine if rates increase by more than 20%. • Increase communication and education on respiratory etiquette and hand hygiene in schools. • Teachers provide age-appropriate education. • Communicable Disease surveillance monitoring and student illness reporting. • Social distance in the classrooms. • Instruct students in small cohorts. | <ul style="list-style-type: none"> • Increase sanitizing of shared surfaces. • Devise prevention and post-exposure sanitizing strategies based on current recommendations. • Isolate students who become ill at school until parents can pick-up. • Discourage the use of shared utensils in the classroom. | <ul style="list-style-type: none"> • Provide communication to families based on the current situation, general information, and public health guidance. • Provide communication to staff of the current situation. • Provide communication to immunocompromised student families to defer to personal providers for recommendations. |

When novel viruses are identified in the community but not in a student or staff, the district will defer to local public health guidance. This guidance will vary by event based on transmissibility, severity, and incidence. It is important to note that the school district can only apply controls around the school setting and school sponsored events. Private clubs, organizations, or faith communities are not part of the school district.

When local transmission is detected, planning for dismissal and academic continuity should be prioritized. Prolonged absence of staff should also be prioritized.

LEVEL TWO ACTIONS: INTERVENTION FOCUSED (INCLUDES LEVEL ONE ACTIONS)

| Personal NPIs | Community NPIs | Environmental NPIs | Communication |
|---|---|--|--|
| <ul style="list-style-type: none"> • Defer to public health specific guidance. • Prepare for staff and students to stay home if someone in their household becomes ill. | <ul style="list-style-type: none"> • Defer to public health guidance. • Social distance at school as much as possible. • Dismiss students temporarily. Staff still report to work. | <ul style="list-style-type: none"> • Defer to public health guidance. • Modify, postpone, or cancel large school events. | <ul style="list-style-type: none"> • Use guidance from local health departments to establish communication with staff and families. • Communicate with staff regarding sick time and to stay home when sick. • Ask parents to report symptoms when calling students in sick as part of communicable disease surveillance. |

When novel viruses are identified in the school setting and the incidence is low, the local health department will provide direct guidance to district admin/school nurse on the diagnosed case. The local health department may impose strict restrictions on contacts.

LEVEL THREE ACTIONS: RESPONSE FOCUSED (INCLUDES LEVEL ONE & TWO ACTIONS)

| Personal NPIs | Community NPIs | Environmental NPIs | Communication |
|---|---|--|--|
| <ul style="list-style-type: none"> Follow public health direction. | <ul style="list-style-type: none"> Follow exclusion guidance from the local health department, which may include student dismissal. Appendix A | <ul style="list-style-type: none"> Follow local public health direction on environmental cleaning/sanitizing, which may include school closure and canceling major school events. | <ul style="list-style-type: none"> Coordinate communication with the local health authority. Identify possible impacted student populations such as Seniors. |

POST EVENT

| Personal NPIs | Community NPIs | Environmental NPIs | Communication |
|--|---|---|---|
| <ul style="list-style-type: none"> Routine hand hygiene and respiratory etiquette. Stay home when sick until 24 hours fever free without using fever reducing medications. | <ul style="list-style-type: none"> Maintain routine exclusion when local health department deems processes may return to baseline. | <ul style="list-style-type: none"> Maintain routine sanitizing procedures. | <ul style="list-style-type: none"> Routine seasonal illness prevention and exclusion communication with staff and families. Evaluate post-event procedures to determine what worked in our response plan and what needs revised. Determine the plans needed to make up for lost academic time. |

COVID-19 Specific Management Plan

KEY PRACTICES FOR REDUCING SPREAD OF COVID-19 IN SCHOOLS

The mainstays of reducing exposure to the coronavirus and other respiratory pathogens are:



Physical Distancing — At least six feet with other people.



Isolation & Quarantine — Isolation separates sick people from people who are not sick. Quarantine separates and restricts the movement of people who were exposed to a contagious disease to see if they become sick.



Hand Hygiene — Frequent washing with soap and water or using hand sanitizer.



Contact Tracing — Identification of persons who may have come into contact with an infected person to help stop chain of disease transmission.



Cohorts — Conducting all activities in small groups that remain together over time with minimal mixing of groups.



Protective Equipment — Use of face shields, face coverings, and barriers.



Airflow & Ventilation — Outdoor activities are safer than indoor activities; maximize airflow in closed spaces.



Environmental Cleaning & Disinfection — Especially of high-touch surfaces.



Communication — Follow clear protocols for sharing information.

Screening

The district will communicate with families and staff regarding communicable disease symptoms, including COVID-19. If symptoms are present families are asked to keep their student home.

All staff are required to self-screen every day before reporting for work. Staff must report if they or anyone in their household tested positive for COVID-19 or a presumed case.

Any student or staff displaying COVID-19 symptoms while on campus will be escorted by trained staff to one of the district isolation rooms for further screening, including a temperature check. Any individual displaying any of the primary COVID-19 symptoms will remain in the isolation room until transportation home is arranged.

Staff and students are required to follow [CDC Isolation and Precautions for People with COVID-19](#).

[CDC COVID-19 Operational Guidance for K-12 Schools](#)
[Communicable Disease Guidance for Schools](#)
[CDC Community](#)

Gaston School District will review and adjust protocols based on community case rates. Additional measures to address high rates will include:

- Continue and increase communication to families and staff to only come to school healthy; staying home when sick can lower the risk of spreading infectious disease.
- Visual screenings upon arrival.
- Isolation of symptomatic or ill, offer testing and send home.
- Communication message to families about the active outbreak(s).

Supporting Documentation:

[Communicable Disease Guidance for Schools](#)
[ODE Student Health Conditions - Community Letter](#)

As a standard protocol for all levels of pandemic/communicable disease:

- As cases decrease, remind individuals to only come to school or work healthy. Staying home when sick can lower the risk of spreading infectious diseases.
- The district will continue to monitor and control disease. District policies and procedures incorporate a layered approach to identifying, monitoring, and mitigating outbreaks of communicable diseases including COVID-19 and school works closely with LPHA.

Isolation

The schools have designated isolation spaces in the Commons Building which is required in the event of a communicable disease outbreak.

School staff (including the district nurse, school secretaries, and selected instructional assistants) are trained at the start of the year in isolation protocols for sick students and staff who are identified at the time of arrival or during the school day. Specifics are outlined in the Communicable Disease Management Plan. Individuals with COVID-19 symptoms will be isolated, offered a test, and sent home.

At high community levels, schools have designated, trained staff who are well informed of COVID-19 protocols and who can support student health and safety needs. Staff are trained in isolation room protocols, quarantine protocols, and wearing of PPE.

- Staff and students will have access to COVID-19 testing and will be encouraged to use this resource if symptomatic or exposed.
- Staff will conduct visual screening of students upon arrival to campus. Individuals with symptoms will be isolated, offered a test, and sent home

As case levels decrease to moderate, continue to maintain supervised space to isolate the sick that is separate from the space where other healthy tasks take place.

- School to continue designated isolation space.
- Staff continue to follow protocols for sick students and staff identified according to the exclusion measures.
- Individuals with COVID-19 symptoms will be isolated, offered a test, and sent home.
- Schools continue to have trained staff that can support all student health and safety needs.
- Offer access to COVID-19 testing.
- District policies and procedures incorporate a layered approach to identifying, monitoring, and mitigating outbreaks of communicable diseases including COVID-19 and school works closely with LPHA.

Quarantine Guidance

As per ODE Resiliency framework, distancing and masking protocols must be consistently maintained. If a student or staff member is diagnosed with COVID-19, the LPHA will be consulted to review the situation. If the school cannot confirm that 6 feet of distancing was consistently maintained or 3 foot distancing with consistent mask use was maintained while inside during the school day, then each person the confirmed case was in contact with will need to quarantine – this could include all members of a stable cohort.

They may return when:

- At least 5 days since illness onset or exposure AND
- Is fever free for at least 24 hours without the use fever reducing medication AND
- Other symptoms are resolved or improving
- If a clear alternative diagnosis is identified as the cause for the individual's illness (e.g. a positive strep throat test) then disease-specific return-to-school guidance should be followed and the individual shall be fever-free for at least 24 hours without the use of fever reducing medications. A physician's note is required to return to school to verify that the individual is not contagious.
- If they do not undergo COVID-19 viral PCR testing, they shall remain at home for at least 5 days and have been without fever for at least 24 hours without the use of fever reducing medications and other symptoms are improving.

In accordance with current CDC guidance, fully vaccinated people should also be tested **if experiencing [COVID-19 symptoms](#)**, and quarantine if the vaccinated individual testes positive for COVID-19. You are considered fully vaccinated 2 weeks after their second dose of the Pfizer-BioNTech or Moderna COVID-19 vaccines, or 2 weeks after the single-dose Johnson & Johnson's COVID-19 vaccine.

Daily Logs

Staff will be trained and reminded on the importance of recording and maintaining daily logs (See Appendix).

Daily logs must be maintained for any of the following:

- Name of student or staff that are sent home for illness, symptoms present, onset of symptoms, name and phone number of staff member that monitored and recorded the symptomatic student/staff.
- Name of student and symptoms present that visit the health room, whether they are sent home from school or not, as per routine health logs.

This information will be maintained and kept for at least 4 weeks after completion of the term for reporting necessary information to the LPHA.

Testing

OHA offers both [diagnostic and screening testing programs](#) to all public and private K-12 schools in Oregon. Please include whether your school will offer diagnostic and screening testing, respectively.

The district will continue to offer on-site testing to students who have permission on file. If supplies remain available, the district will offer at-home kits to students and staff who are symptomatic or have been exposed to COVID-19.

The district may offer COVID-19 screening through OHSU after stakeholder interest is determined.

At high levels of community transmission increase collaboration with LPHA and increase community outreach. Offer increased access to testing:

- Increase communication to families offering the opportunity to opt-in to diagnostic testing or screening programs with appropriate consent.
- Increase access via drive through testing (on-site or at clinics), before/after school testing.

At moderate levels of community transmission NWRESA will continue to offer access and community communication around testing options. NWRESA will support students, staff, and families with promotion and access to testing.

Protocol for Reporting

Parents and staff will be required to notify the school immediately upon identification of a positive COVID-19 case in a student or staff member or in student or staff household member.

There will be a designated staff member at Gaston Elementary and Gaston Jr/Sr High responsible for all confirmed COVID 19 positive cases in staff and students. For both schools, this will be the building principal. When the district is notified of a confirmed positive COVID-19 case, either in a student, staff member or a household member, the school principal will immediately notify the school RN and the Washington County Public Health Department (WCPH) (Communicable Disease Reporting line: 503-846-3594). Complete *School Covid-19 Reporting Form* before contacting the County Health Department to ensure all needed information is ready to give. (See Appendix). The school principals at each school will report any clusters of illness (2 or more people) to WCPH per *School Outbreak Guidance* (See Appendix).

Upon learning of a confirmed positive COVID-19 case, designated staff will collect documentation of all individuals that had close contact with the confirmed case and supply lists and daily logs for stable cohorts or any individual student or staff of confirmed cases. Gaston School District will work closely with WCPH to identify all people who are considered close contacts of the positive COVID-19 person and consult with them regarding cleaning and possible classroom or school closure.

Gaston SD will follow WCPH and the Ready Schools, Safe Learners Resiliency Framework for the 2021-22 School Year on Exclusion from School for staff and students exposed to a positive or presumptive COVID-19 case. See [Planning for COVID-19 Scenarios in Schools](#) supplemental document.

Face Coverings

Gaston School District will encourage and welcome face coverings at any time in the school year and especially during times of high transmission.

When the local county experiences an increase in communicable disease or when the COVID-19 community level increases, school communications will inform families of federal, state or local recommendations on the use of face coverings to reduce the risk of spreading disease.

Individuals who are COVID-19 positive will follow the [CDC Isolation and Precautions for People with COVID-19](#)

Supporting Documentation:

[CDC Community Levels](#)

[CDC COVID-19 Use and Care of Masks](#)

Special Considerations

School Closures

If school closure is advised by the local public health department, consultation should occur between legal, union, and district administration.

Uncompromisable Staff/Students

Staff/students with uncompromising health conditions and treatments may require exclusion from work/school outside of public health guidance. These staff/students should provide documentation from their health care provider.

Environmental Management

Hand Washing:

Practicing and accessibility to hand hygiene is a simple yet effective way to prevent infections. Hand hygiene, which means cleaning your hands by washing with soap and water or using an alcohol-based hand sanitizer containing at least 60% alcohol, is one of the best ways to avoid getting sick and prevent spreading germs to others.

- Educators will teach proper hand-washing and covering coughs etiquette. Routine hand-washing will be taught and encouraged.
- Signs are posted, as well as modeling and instruction to students.
- Adequate handwashing supplies and access will be available.
- Access to hand sanitizer with at least 60% alcohol will be available at building and classroom entrances, as well as other locations where hand-washing is not an option.

During times of increased transmission, schools will increase time for hand hygiene.

Building administrators will ensure that across all district facilities and schools, access to hand washing stations augmented by the use of hand sanitizer containing at least 60% alcohol will be always available.

When cases are moderate, schools are still encouraged to assign times for increased and additional hand hygiene throughout the school day.

- Staff will teach proper handwashing and covering coughs
- Adequate handwashing supplies and access will be available
- Access to hand sanitizer with at least 60% alcohol for use.

Protocol for disinfection procedures for prevention of spread:

Cleaning with products containing soap or detergent reduce germs on surfaces by removing contaminants and decreases risk of infection from surfaces. Disinfecting kills any remaining germs on surfaces, which further reduces any risk of spreading infection.

- Daily cleaning of all touch points in classrooms, transportation, common areas, cafeterias with a sanitizing cleaner.
- All restrooms disinfected daily.
- Classrooms atomized daily.
- During an outbreak or illness, illness cleaning will be initiated by school and increased in that area.

Supporting Documents:

[CDC COVID-19 Operational Guidance for K-12 Schools](#)

At high levels of community transmission the district will continue to sanitize rooms, increasing routines, especially focusing on high frequency touch points. In areas with increased illness or outbreak, facilities staff will immediately disinfect the impacted areas. All classrooms will have safe cleaning supplies to use throughout the day to increase cleaning procedures.

Schools will continue to clean routinely throughout the day and especially focusing on high frequency touch points.

At times when a space has increased illness or outbreak, appropriate staff assigned to disinfect those areas at a higher level.

Protocol for Airflow and Circulation:

The district consulted with ClimaTech and created a program for HVAC units campus-wide. The program monitors outside air temp, inside air temp, duration of heat pump, and heat strip cycles. It opens fresh air and exhaust dampers to the maximum allowable setting and adjust accordingly to each unit. MERV 13 filters are in use to increase filtration. All systems are set to the maximum allowable design.

Ventilation is one component of mitigation strategies to prevent COVID-19 in the school setting. HVAC systems in the Gaston School District currently operate at the highest capacity level. During high levels of community spread the facilities manager will continue regular inspections to ensure systems are in optimal condition.

- When possible, schools will plan outside school events such as lunches, classes, recess when it is safe.
- Schools will relocate to an outdoor setting or postpone activities where the school community comes together while an outbreak is active, or the COVID-19 community level is high.

HVAC systems in the Gaston School District currently operate at the highest capacity level. At moderate transmission levels, schools will continue to encourage outdoor activities/events when possible.

In the event of a school wide exposure:

- ALL students and staff are directed to leave the facility
- Facilities members are to secure all doors and exits so no re entry is possible
- Facilities are to immediately turn off all HVAC equipment
- Facilities will immediately start an atomizer process through all building areas and surfaces with E22 product while in all protective PPE. This process will include all ceiling, wall, counter, desk, chair and floor surfaces
- Facilities will wash all touch surfaces with E22 and wipe with paper towel and air dry
- Carpets and floors will be cleaned with proper sanitizing agents
- Each room as finished will be locked and no re entry for a minimum of 24 hours
- Call for HVAC filter change and return hvac units once completed
- Facilities will remove PPE for either disposal or cleaning
- Facilities will leave campus after cleaning and shower and wash clothing.

Physical Distancing and Protection

Currently the CDC does not have restrictions and/or requirements around physical distancing.

Those who are COVID-19 positive or have been exposed will follow [CDC Isolation and Precautions for People with COVID-19](#).

During periods of high transmission educators will re-emphasize the importance of maintaining physical distance to the greatest extent possible.

Educators will assess spaces to decrease the number of individuals who must share spaces and increase physical distancing. When and where possible indoor activities will be moved outdoors to increase distance and ventilation.

Cohorting:

At the elementary school, students primarily cohort by classroom. Lunches are grouped for grades K-1, 2-3, and 4-6.

At the Jr/Sr High School students are on a block schedule that cohorts students in four classes per day. Students in grades 7-9 are in a lunch cohort. Students in grades 10-12 are in a lunch cohort.

During periods of high transmission the district will follow the guidance listed below and make decisions in consultation with the LPHA regarding implementation of smaller, more restrictive cohorts.

Schools should notify their LPHA about unusual respiratory disease activity if the following absence thresholds are met and at least some students are known to have influenza or COVID-like symptoms:

- 1. At the school level: $\geq 30\%$ absenteeism, with at least 10 students and staff absent*
- 2. At the cohort level: $\geq 20\%$ absenteeism, with at least 3 students and staff absent*

Training and Public Health Education

The district will provide information to stakeholders regarding specific health and safety protocols that are in place within schools

Staff will receive training and access to pertinent health and safety materials at the beginning of the school year.

The district safety committee will provide a forum for implementation questions and suggestions from stakeholders.

During periods of high transmission, the district will continue to work with the LPHA on communicable disease communications and notifications that are succinct, accurate and streamlined. Multiple modes of communication will be utilized (Alert phone and email notifications, text, social media, and website). The district will routinely review health and safety protocols and provide reteaching to students and staff.

When cases are moderate, the district will work with LPHA on communicable disease communication and notifications. The district will also communicate to families the process of return to baseline activities. Communication will include specific health and safety protocols in place at the school and continued communication of community level and school health protocols.

Resources

Gaston Board Policies

Gaston School District Policy [JHCC](#) and [JHCC-AR](#) Communicable Disease- Students

Gaston School District Policy [GBEB](#) and [GBEB-AR](#) Communicable Disease- Staff

Oregon State Information

[Oregon Health Authority COVID-19 Information](#)

[Oregon Department of Education](#)

[Ready Schools Safe Learners](#)

[Oregon Communicable Disease Guidelines for School](#)

[COVID-19 Testing Site Locations](#)

Washington County

[Washington County Public Health Department](#)

National

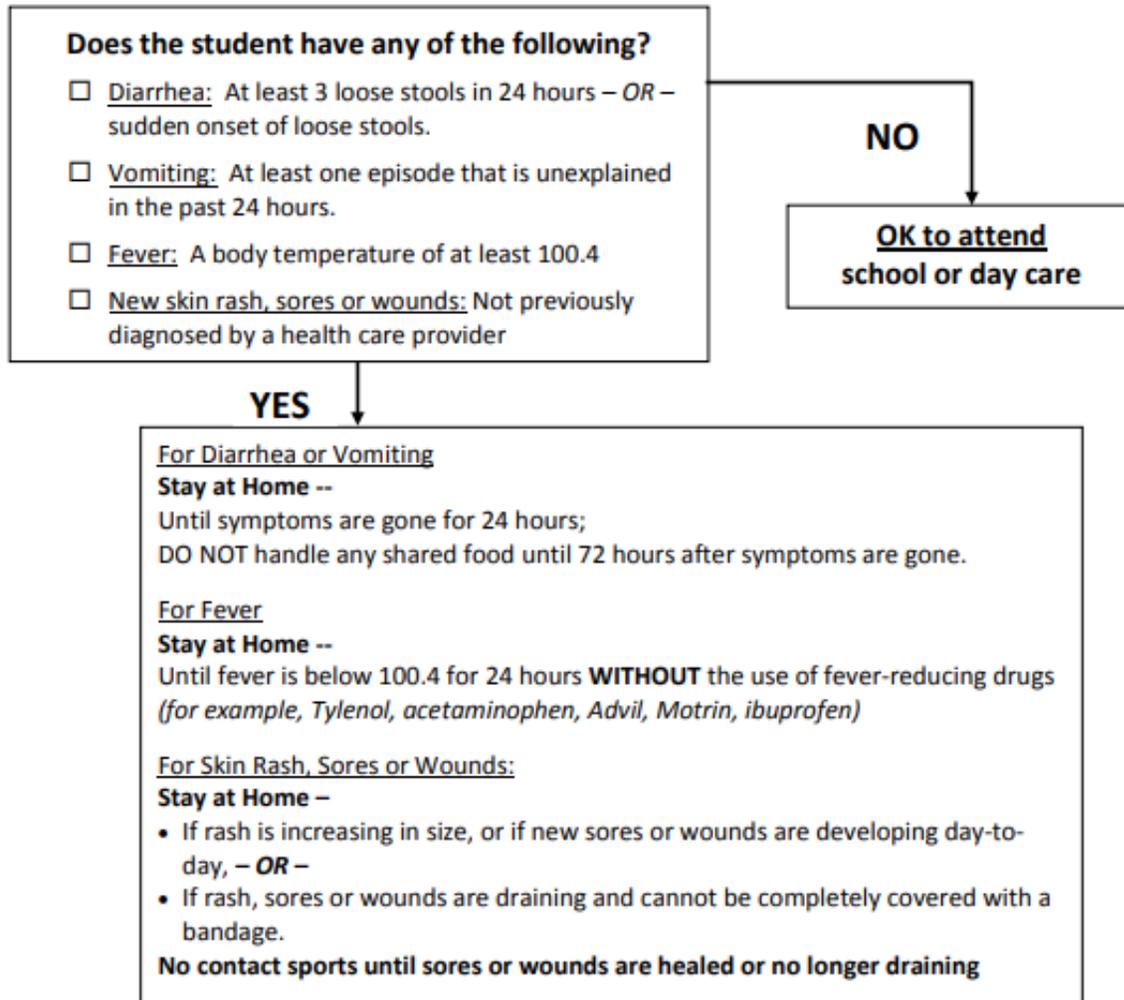
[Centers for Disease Control](#)

Appendices

APPENDIX A



Exclusion Guidelines for Schools and Child Care Settings Clackamas, Multnomah and Washington Counties*



When to report to local health department

- **Report any suspected outbreak or reportable disease immediately.** A suspect outbreak means a higher than expected number of students or staff sick with similar symptoms around the same time.
- **Report any suspected outbreak or reportable disease to the school nurse.** If a school nurse is not available, contact the County Health Department.
- See Oregon Disease Reporting Guidelines Online for a list of diseases and reporting timelines.
http://www.co.washington.or.us/HHS/CommunicableDiseases/upload/Disease_Exclusion_Guide_Updated-July-2017-1.pdf

Questions? Contact Washington County Public Health Department: 503-846-3594

*Please contact the school nurse or county health department if you have questions.

SCHOOL DISTRICT (K-12) PANDEMIC INFLUENZA PLANNING CHECKLIST



Local educational agencies (LEAs) play an integral role in protecting the health and safety of their district’s staff, students and their families. The Department of Health and Human Services (HHS) and the Centers for Disease Control and Prevention (CDC) have developed the following checklist to assist LEAs in developing and/or improving plans to prepare for and respond to an influenza pandemic.

Building a strong relationship with the local health department is critical for developing a meaningful plan. The key planning activities in this checklist build upon existing contingency plans recommended for school districts by the U.S. Department of Education (Practical Information on Crisis Planning: A Guide For Schools and Communities <http://www.ed.gov/admins/lead/safety/emergencyplan/crisisplanning.pdf>).

Further information on pandemic influenza can be found at www.pandemicflu.gov.

1. Planning and Coordination:

| Completed | In Progress | Not Started | |
|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Identify the authority responsible for declaring a public health emergency at the state and local levels and for officially activating the district’s pandemic influenza response plan. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Identify for all stakeholders the legal authorities responsible for executing the community operational plan, especially those authorities responsible for case identification, isolation, quarantine, movement restriction, healthcare services, emergency care, and mutual aid. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | As part of the district’s crisis management plan, address pandemic influenza preparedness, involving all relevant stakeholders in the district (e.g., lead emergency response agency, district administrators, local public health representatives, school health and mental health professionals, teachers, food services director, and parent representatives). This committee is accountable for articulating strategic priorities and overseeing the development of the district’s operational pandemic plan. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Work with local and/or state health departments and other community partners to establish organizational structures, such as the Incident Command System, to manage the execution of the district’s pandemic flu plan. An Incident Command System, or ICS, is a standardized organization structure that establishes a line of authority and common terminology and procedures to be followed in response to an incident. Ensure compatibility between the district’s established ICS and the local/state health department’s and state education department’s ICS. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Delineate accountability and responsibility as well as resources for key stakeholders engaged in planning and executing specific components of the operational plan. Assure that the plan includes timelines, deliverables, and performance measures. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Work with your local and/or state health department and state education agencies to coordinate with their pandemic plans. Assure that pandemic planning is coordinated with the community’s pandemic plan as well as the state department of education’s plan. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Test the linkages between the district’s Incident Command System and the local/state health department’s and state education department’s Incident Command System. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Contribute to the local health department’s operational plan for surge capacity of healthcare and other services to meet the needs of the community (e.g., schools designated as contingency hospitals, schools feeding vulnerable populations, community utilizing LEA’s healthcare and mental health staff). In an affected community, at least two pandemic disease waves (about 6-8 weeks each) are likely over several months. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Incorporate into the pandemic influenza plan the requirements of students with special needs (e.g., low income students who rely on the school food service for daily meals), those in special facilities (e.g., juvenile justice facilities) as well as those who do not speak English as their first language. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Participate in exercises of the community’s pandemic plan. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Work with the local health department to address provision of psychosocial support services for the staff, students and their families during and after a pandemic. |

1. Planning and Coordination (cont.):

| Completed | In Progress | Not Started | |
|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Consider developing in concert with the local health department a surveillance system that would alert the local health department to a substantial increase in absenteeism among students. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Implement an exercise/drill to test your pandemic plan and revise it periodically. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Share what you have learned from developing your preparedness and response plan with other LEAs as well as private schools within the community to improve community response efforts. |

2. Continuity of Student Learning and Core Operations:

| Completed | In Progress | Not Started | |
|--------------------------|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Develop scenarios describing the potential impact of a pandemic on student learning (e.g., student and staff absences), school closings, and extracurricular activities based on having various levels of illness among students and staff. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Develop alternative procedures to assure continuity of instruction (e.g., web-based distance instruction, telephone trees, mailed lessons and assignments, instruction via local radio or television stations) in the event of district school closures. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Develop a continuity of operations plan for essential central office functions including payroll and ongoing communication with students and parents. |

3. Infection Control Policies and Procedures:

| Completed | In Progress | Not Started | |
|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Work with the local health department to implement effective infection prevention policies and procedures that help limit the spread of influenza at schools in the district (e.g. promotion of hand hygiene, cough/sneeze etiquette). Make good hygiene a habit now in order to help protect children from many infectious diseases such as flu. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Provide sufficient and accessible infection prevention supplies, such as soap, alcohol-based/waterless hand hygiene products (containing at least 60% alcohol), tissues, and receptacles for their disposal. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Establish policies and procedures for students and staff sick leave absences unique to a pandemic influenza (e.g., non-punitive, liberal leave). |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Establish sick leave policies for staff and students suspected to be ill or who become ill at school. Staff and students with known or suspected pandemic influenza should not remain at school and should return only after their symptoms resolve and they are physically ready to return to school. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Establish policies for transporting ill students. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Assure that the LEA pandemic plan for school-based health facilities conforms to those recommended for health care settings (Refer to www.hhs.gov/pandemicflu/plan). |

4. Communications Planning:

| Completed | In Progress | Not Started | |
|--------------------------|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Assess readiness to meet communication needs in preparation for an influenza pandemic, including regular review, testing, and updating of communication plans. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Develop a dissemination plan for communication with staff, students, and families, including lead spokespersons and links to other communication networks. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Ensure language, culture and reading level appropriateness in communications by including community leaders representing different language and/or ethnic groups on the planning committee, asking for their participation both in document planning and the dissemination of public health messages within their communities. |

School Outbreak Guidance Document



October 4, 2019

School Outbreak Guidance

When to call Washington County Public Health (available 24/7 at 503-846-3594):

- Unusually high absenteeism in students or staff with vomiting and/or diarrhea in the same classroom or across the school within a two-week period
- Students or staff ill with high fevers or bloody stool
- Evidence of severe illness (i.e. multiple students or staff hospitalized with similar symptoms)
- Unusually high absenteeism in students or staff with fever and cough and/or sore throat:
 - ≥ 10 people or $\geq 20\%$ of facility, absence is prolonged ≥ 3 days
 - In school, $\geq 40\%$ of students in any one classroom absent

What information to include in the initial report to Washington County Public Health:

- Total number of students, staff and food handlers in your school
- Total number of ill students, staff and food handlers and classrooms/grade levels affected
- General symptoms and when symptoms started
 - It is important to distinguish between gastroenteritis (i.e. nausea, vomiting, diarrhea) and respiratory (i.e. fever, cough, sneezing, sore throat) symptoms as early as possible
- Any lab-confirmed illnesses, hospitalizations or deaths
- Baseline absentee rates (the expected number of absent staff and/or students).

What to return to Washington County Public Health during an outbreak investigation:



APPENDIX D

School COVID-19 Reporting Form

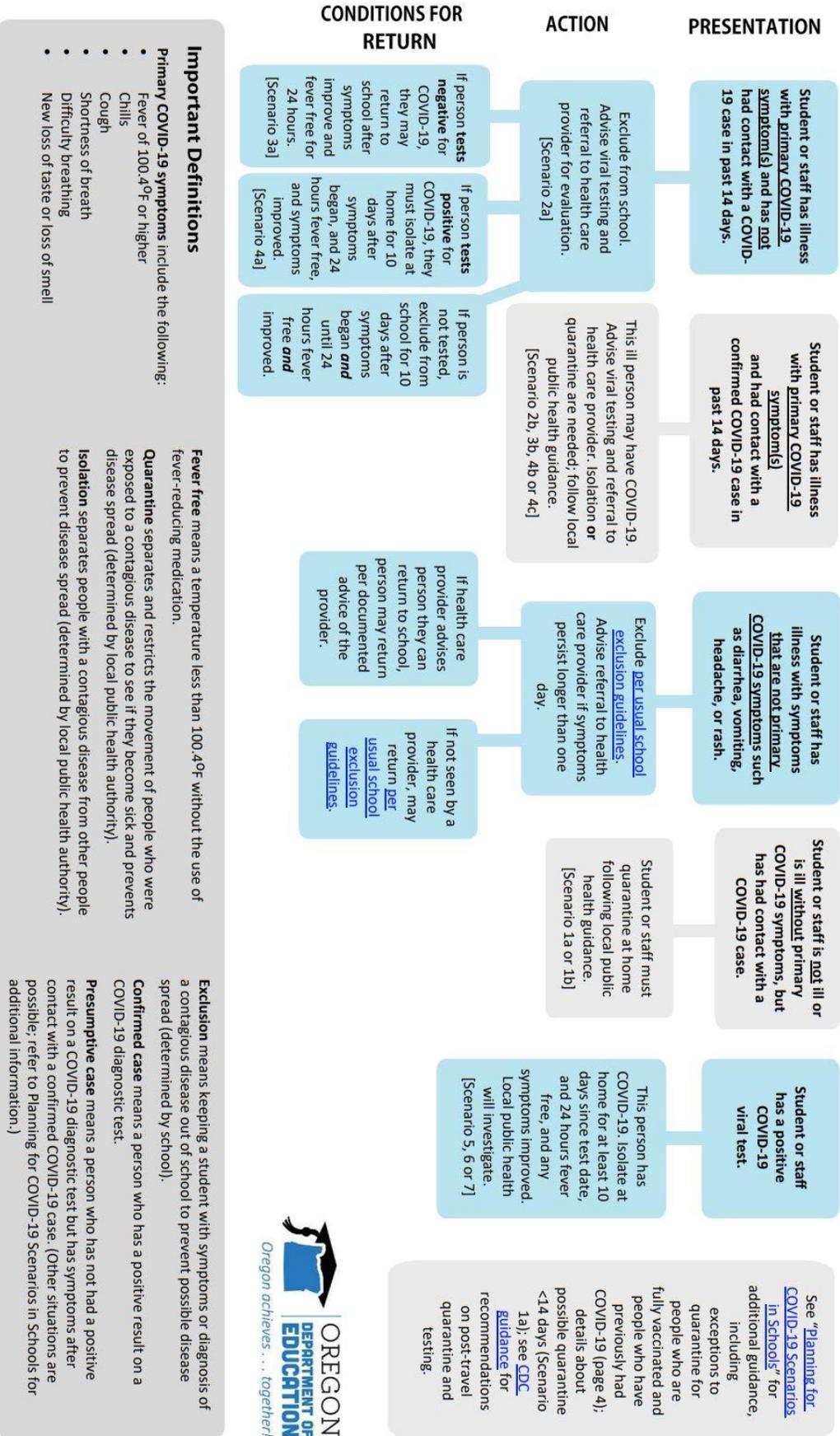


| | | |
|--|---|--|
| WCHD | | Outbreak # |
| Lead: | | Outbreak: <input type="checkbox"/> Y <input type="checkbox"/> N |
| Assigned: | | |
| Date: | Time: | Taken By: |
| Name of Caller: | | Position: |
| Facility Name: | | Facility Fax #: |
| Facility Address: | | |
| Point of Contact: | | Position: |
| Email Address: | | Phone #: |
| Facility Information: | | |
| Indicate instructional model(s): <input type="checkbox"/> On Site Learning <input type="checkbox"/> Hybrid Learning <input type="checkbox"/> Distance Learning | | |
| # of floors affected: | # of classrooms affected: | # of grades affected: |
| Total # of floors: | Total # of classrooms: | Total # of grades affected: |
| Medically fragile classroom affected? <input type="checkbox"/> Y <input type="checkbox"/> N | | |
| # of cohorts affected: | Did cohort have contact with other people or cohorts: <input type="checkbox"/> Y <input type="checkbox"/> N | |
| Describe how school is cohorting?: (i.e., size, student/staff schedules) | | |
| Describe how school is handling transportation / Buses: | | |
| Other group activities: <input type="checkbox"/> Y <input type="checkbox"/> N <i>If yes, Date & description:</i> | | |

| | | |
|---|---|--|
| Student Information: | | |
| Total # of students: | # of ill students: | # of student tested: |
| OPERA # of ill student <i>(if known, for LPHA use)</i> : | | <i>(add information to line list)</i> |
| List cohort(s) ill student is part of: <i>(class, bus, team, etc.)</i> | | |
| Are there other symptomatic and/or tested Children: <input type="checkbox"/> Y <input type="checkbox"/> N | | |
| If yes - # symptomatic: | | # tested: |
| Ill students excluded? <input type="checkbox"/> Y <input type="checkbox"/> N <i>(Recommendation: 72 hours after symptom improvement)</i> | | |
| Did student attend school 2 days before symptoms started until diagnosis/isolation? <input type="checkbox"/> Y <input type="checkbox"/> N | | |
| Does student have household members who also attend/work at this location? <input type="checkbox"/> Y <input type="checkbox"/> N | | |
| Staff Information | | |
| Total # of staff: | # of ill staff: | # of staff tested: |
| OPERA # of ill staff <i>(if known, LPHA use only)</i> : | | <i>(add information to line list)</i> |
| List classrooms, cohorts, people ill staff had contact with: | | |
| Are there other symptomatic and/or tested Staff: <input type="checkbox"/> Y <input type="checkbox"/> N | | |
| If yes - # symptomatic: | | # tested: |
| Ill Staff Excluded <input type="checkbox"/> Y <input type="checkbox"/> N <i>(Recommendation: 72 hours after symptom improvement)</i> | | |
| Did staff member work 2 days before symptoms started until diagnosis/isolation? <input type="checkbox"/> Y <input type="checkbox"/> N | | |
| Does staff member have household members who also attend/work at this location? <input type="checkbox"/> Y <input type="checkbox"/> N | | |
| Control Measures: In place since - Date: | | Time: EH Consult <input type="checkbox"/> Y <input type="checkbox"/> N |
| <input type="checkbox"/> Enforce exclusion guidelines | <input type="checkbox"/> Increase hand hygiene | <input type="checkbox"/> Post signs |
| <input type="checkbox"/> Increase routine disinfecting | <input type="checkbox"/> Monitor absentee counts | <input type="checkbox"/> Discontinue group activities |
| <input type="checkbox"/> Droplet Precautions | <input type="checkbox"/> Respiratory hygiene, hand hygiene, cough etiquette | |
| <input type="checkbox"/> Mask/Face covering | <input type="checkbox"/> Daily health reports and checklists | |
| Notes: | | |

COVID-19 Exclusion Summary Guidance for K-12

Version 7/22/2021



Important Definitions

- Primary COVID-19 symptoms include the following:
- Fever of 100.4°F or higher
 - Chills
 - Cough
 - Shortness of breath
 - Difficulty breathing
 - New loss of taste or loss of smell

Fever free means a temperature less than 100.4°F without the use of fever-reducing medication.

Quarantine separates and restricts the movement of people who were exposed to a contagious disease to see if they become sick and prevents disease spread (determined by local public health authority).

Isolation separates people with a contagious disease from other people to prevent disease spread (determined by local public health authority).

Exclusion means keeping a student with symptoms or diagnosis of a contagious disease out of school to prevent possible disease spread (determined by school).

Confirmed case means a person who has a positive result on a COVID-19 diagnostic test.

Presumptive case means a person who has not had a positive result on a COVID-19 diagnostic test but has symptoms after contact with a confirmed COVID-19 case. (Other situations are possible; refer to Planning for COVID-19 Scenarios in Schools for additional information.)

Can my child go to school today?

Start with the 3 questions below

Then follow the arrows based on your answer

