School-Level Communicable Disease Management Plan 2024-2025



School/District/Program Information

District or Education Service District Name and ID: Fern Ridge School District 28J - 2084

School or Program Name: Fern Ridge Middle School

Contact Name and Title: Gary Carpenter, Superintendent

Contact Phone: 541-935-2253 Contact Email: gcarpenter@fernridge.k12.or.us

Table 1.



Policies, protocols, procedures and plans already in place

Provide hyperlinks to any documents or other resources currently utilized in your school/district. Consider adding a brief description about how each is used within your school.

Plan Types	Hyperlinks and Descriptions	
School District Communicable Disease Management Plan OAR 581-022-2220	Communicable Disease Guidance (fernridge.k12.or.us) both school and district level	
Exclusion Measures Exclusion of students and staff who are diagnosed with certain communicable diseases. OAR 333-019-0010	Communicable disease plan outlines specific exclusion criteria for identifying when a student will not attend school while in a communicable stage of a restrictable disease or when an administrator has reason to suspect that any susceptible student has or has been exposed to any disease for which the student is required to be excluded in accordance with law and per administrative regulation.	
Isolation Space Requires a prevention-oriented health services program including a dedicated space to isolate sick students and to provide services for students with special health care needs. OAR 581-022-2220	FRSD plan to maintain healthcare and space for Isolation	
Emergency Plan or Emergency Operations Plan OAR 581-022-2225	FRSD Emergency Plan	

Plan Types	Hyperlinks and Descriptions	
such as those prepared for <u>Student</u>	Identify existing district or school plans and tools that can be utilized in supporting student and staff wellbeing and mental health during prevention, response, and recovery from incidents of a communicable disease outbreak.	
here:	ESSER updated plan CDC Handwashing Resources	



SECTION 1. Clarifying Roles and Responsibilities

Identifying roles central to communicable disease management. Clarifying responsibilities related to communicable disease response is a first step in keeping

communities healthy and safe. In general, decisions of school health and safety reside with school and district officials. Together with local public health officials, school/district administrators should consult a variety of individuals when making decisions about health and safety in school.

Table 2.

Roles and Responsibilities

School planning team members	Responsibilities:	Primary Contact (Name/Title):	Alternative Contact:
Building Lead / Administrator	 Educates staff, families, and students on policies regarding visitors and volunteers, ensuring health and safety are being maintained. In consultation with district leadership and LPHA staff, determines the level and type of response that is required/necessary. Acts as key spokesperson to communicate health-related matters within school community members, health partners, and other local partners. 	Olivia Johnson- Principal FRMS	Michelle Marshall- K-12 Director Gary Carpenter Superintendent
School Safety Team Representative (or staff member knowledgeable about risks within a school, emergency response, or operations planning)	 procedures. Leads debrief of communicable disease event, informing continuous improvement of the planning, prevention, 	Olivia Johnson- Principal FRMS	Michelle Marshall- K-12 Director Gary Carpenter Superintendent
Health Representative (health aid, administrator, school/district nurse, ESD support)	 Supports building lead/administrator in determining the level and type of response that is necessary. Reports to the LPHA any cluster of illness among staff or students. Provides requested logs and information to the LPHA in a timely manner. 	Shelby Humprey Administrative Assistant	Michelle Marshall- K-12 Director Gary Carpenter- Superintendent

School planning team members	Responsibilities:	Primary Contact (Name/Title):	Alternative Contact:
School Support Staff as needed (transportation, food service, maintenance/custodial)	Advises on prevention/response procedures that are required to maintain student services.	Michelle Marshall- K-12 Director Gary Carpenter- Superintendent	Building Principals
Communications Lead (staff member responsible for ensuring internal/external messaging is completed)	 Ensures accurate, clear, and timely information is communicated including those who may have been exposed, a description of how the school is responding, and action community members can take to protect their health. Shares communications in all languages relevant to school community. 	Michelle Marshall- K-12 Director Gary Carpenter- Superintendent	Building Principals
District Level Leadership Support (staff member in which to consult surrounding a communicable disease event)	 Has responsibility over communicable disease response during periods of high transmission in community at large. May act as school level support to Building lead/Administrator activating a scaled response. Responds to media inquiries during the communicable disease event and ensures that those responsible for communication are designated speakers. 	Gary Carpenter- Superintendent	Michelle Marshall- K-12 Director

School planning team members	Responsibilities:	Primary Contact (Name/Title):	Alternative Contact:
Main Contact within Local Public Health Authority (LPHA)	 Notifies Building Lead/Administrator of communicable disease outbreak and offers recommendations for appropriate response. Key spokesperson to communicate on health-related matters with community members, health facility staff, and other local community partners. 	Gary Carpenter- Superintendent	Michelle Marshall- K-12 Director
Others as identified by team			



Section 2. Equity and Continuity of Education

Preparing a plan that centers equity and supports mental health

Preparing a school to manage a communicable disease case or event requires an inclusive and holistic approach to protect access to in-person learning for all students. In this section suggested resources are offered to help prepare for communicable disease management while centering an equitable and caring response.

Centering Equity

Identify existing district or school plans and tools that can be utilized when centering equity in prevention, response, and recovery from incidents of outbreaks (e.g., district or school equity plans/stances/lenses/decision tools, Equity Committee or Team protocols, district or school systems for including student voice, existing agreements or community engagement or consultation models, Tribal Consultation¹, etc.)

- ESSER
- Equity Decision Tools for school leaders
- Community Engagement Toolkit
- <u>Fern Ridge Community Resources</u> list, local area assistance with food/shelter/clothing for those negatively impacted by COVID-19 or other restrictable diseases



Suggested Resources:

- 1. Equity Decision Tools for School Leaders
- 2. Community Engagement Toolkit
- 3. Tribal Consultation Toolkit

¹ Tribal Consultation is a separate process from stakeholder engagement; consultation recognizes and affirms tribal rights of self-government and tribal sovereignty, and mandates state government to work with American Indian nations on a government-to-government basis.

Table 3.

Centering Educational Equity

OHA/ODE Recommendation(s)	Response:
Describe how you will ensure continuity of instruction for students who may miss school due to illness.	FRMS' response will be targeted to be aligned to the length/severity of the student's illness or injury. When students are ill for a few days, they may opt to get class work when they return or teachers will also post assignments and resources on Schoology so students can access them directly from home. When students are out due to illness or injury for longer than that, FRMS will continue to provide the student with assignments (either online or available for family to pick up) and also schedule time for staff to connect with students by phone or computer if appropriate. For absences longer than two weeks, we will request that a home tutor from the district is provided.
Describe how you identify those in your school setting that are disproportionately impacted by communicable disease and which students and families may need differentiated or additional support.	Office staff or school staff identify students and families who may need extra assistance through daily interaction or during phone interaction. Families may be referred to our Family Support Coordinator (FSC) who can further identify needs specific to that family. Our FSC is able to assist families who may require additional support during exclusion or recovery periods. Additional supports include but are not limited to, food support, schoolwork support, and health services.
Describe the process by which the school will implement a differentiated plan for those that are disproportionately impacted, historically underserved or at higher risk of negative impacts or complications related to communicable disease.	Office staff or school staff identify students and families who may need extra assistance through daily interaction or during phone interaction. Families who identify as having tested positive for communicable disease are specifically asked if they would like assistance during their exclusion period and a referral to our Family Support Coordinator (FSC) will be made. Our FSC is able to assist families with various social needs during their exclusion period, including but not limited to, food support, schoolwork support and health services. School staff and FSC will continue to check in with families until they identify as no longer needing additional support.
Describe what support, training or logistics need to be in place to ensure that the named strategies	FRSD has hired a full-time Family Support Coordinator to assist families with support needed related to communicable disease or other restrictable diseases. School staff and FSC and building administrators are readily available by phone or email to discuss specifics surrounding family support.

OHA/ODE Recommendation(s)	Response:
are understood, implemented, and monitored successfully.	



Section 3. Communicable Disease Outbreak Prevention and Response:

Implementing mitigation activities, responding to periods of increased transmission, resuming baseline level mitigation, and debriefing actions to improve the process

Planning for and implementing proactive health and safety mitigation measures assists schools in reducing communicable disease transmission within the school environment for students, staff, and community members. Communicable disease, including norovirus, flu and COVID-19, will continue to circulate in our communities and our schools. Schools will utilize different mitigation measures based on local data, and observation of what is happening in their schools (e.g., transmission within their facilities and communities.) In the following section, teams will document their school's approach to the CDC, OHA and ODE advised health and safety measures at baseline, during increased transmission.



Suggested Resources:

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

Table 4.

Communicable Disease Mitigation Measures

OHA/ODE Recommendation(s) Layered Health and Safety Measures	Describe what mitigating measures the school will implement to reduce and respond to the spread of communicable disease and protect in-person instruction?
Immunizations	CDC, OHA, and ODE recommend COVID-19 vaccination for all eligible individuals. Please include whether your school will offer COVID-19 vaccine clinics or notices about where to access vaccines in your community. Shots are required by law for children in attendance at public and private schools, preschools, child care facilities, and Head Start programs in Oregon. Nearly every place that provides care for a child outside the home requires shots or a medical or nonmedical exemption to stay enrolled.
	FRSD works in collaboration with our school-based health center and local public health who provide vaccinations. FRSD website has posted the most up-to-date vaccine/immunization clinic information in our community. Current up-to-date vaccination status is encouraged in the FRSD setting and required for school aged children.
Face Coverings	FRSD works in collaboration with local public health to implement the most up-to-date guidelines and requirements on face coverings in the school.
Isolation	For all individuals, the use of face coverings is welcomed and encouraged. FRSD has in place an Isolation Plan recommended by local health authorities and ODE. Each School within the school district also has a dedicated health room for isolation of individuals with restrictable disease as defined in FRSD communicable disease plan. • By Aug. 26, 2024, building administrators will identify designated isolation spaces for every school day and additional spaces in the event of a communicable disease outbreak.
Symptom Screening	 FRSD staff will monitor and watch for symptoms of illness and report any concerns to the front office. In communication with families the school will include information to watch their student for symptoms of communicable disease, including COVID-19, influenza, respiratory syncytial virus (RSV), and gastrointestinal infections. If symptoms are present families are asked to keep their student home. By Aug. 26, 2024, the district will proactively plan to grow substitute teacher capacity by identifying a list of part-time staff who may be able to temporarily fill-in. As needed, office staff will be provided with a one-page flier which includes symptoms for communicable disease and instructions to families if/when symptoms are present.

OHA/ODE Recommendation(s) Layered Health and Safety Measures	Describe what mitigating measures the school will implement to reduce and respond to the spread of communicable disease and protect in-person instruction?
COVID-19 Diagnostic Testing	FRSD works in collaboration with our school-based health center and local public health who provide vaccinations and testing.
Airflow and Circulation	INCREASED AIR EXCHANGE: We have been and will continue to work with our HVAC vendors and facilities staff to set our systems up for maximum air exchange of our spaces, as allowed by the constraints of the outside temperatures.
Cohorting	Schools will have a designed system to take attendance and monitor classroom settings. More intensive cohorting will be considered depending on building needs.
Physical Distancing	Classroom configuration: Staff and students will maintain as much distance as possible which helps mitigate transmission of communicable disease. Minimize having students stand in Bathroom & lunch lines as much as possible.
Hand Washing	Hand Washing continues to be encouraged as a strategy in mitigating germ spread. Signage has been posted throughout the district buildings to remind those in the building to hand wash frequently as recommended by CDC. Additional hand sanitizer stations have been added throughout the buildings to increase use availability for those in the buildings.
	During the first month, the school will teach and reinforce proper handwashing and covering coughs and sneezes to lower the risk of spreading viruses. Throughout the year, the school will monitor and reinforce these behaviors. Handwashing and/or use of sanitizer will be done before and after meal or snack times and after recess and after using the bathroom.
	 By Sept. 30, 2024, teachers will have taught proper handwashing and covering coughs and sneezes to lower the risk of spreading viruses. By Aug. 30, 2024, the school will provide adequate hand washing supplies, including soap and
	 water to all school sinks and classrooms. By Aug. 30, 2024, every classroom will also have a supply of hand sanitizer containing at least 60% alcohol for use.
Cleaning and Disinfection	Classroom spaces will be cleaned and disinfected daily.

OHA/ODE Recommendation(s) Layered Health and Safety Measures	Describe what mitigating measures the school will implement to reduce and respond to the spread of communicable disease and protect in-person instruction?	
	 Classroom high-touch surfaces (e.g., door handles, sink handles, drinking fountains, transport vehicles) will be cleaned daily to reduce the risk of germs spreading by touching surfaces. 	
	Support from Orchid Health provides ongoing guidance and training regarding current local public health recommendations. Training on germ prevention strategies will be shared with staff.	
Training and Public Health Education	The school has a communication protocol that includes informing families of a wide-spread communicable disease case within the school community. These communications are meant to provide clarity and supporting materials to community members (in their preferred language) about the specific health and safety protocols in place at the school.	
	 By Aug. 30, 2024, staff will review the district's health and safety protocols. The school safety committee oversees the implementation of the health and safety protocols that are inclusive of all staff. 	
	 By Sept. 15, 2024, teachers will introduce the district's health and safety protocols to students. By March 1, 2025 staff will review the district's health and safety protocols. By April 7, 2025, teachers will reteach the district's health and safety protocols to students. 	

PRACTICING PLAN TO BE READY

Training exercises are essential to preparedness ensuring individuals understand their role in a communicable disease event. Exercises can also help identify gaps in the planning, thereby building upon and strengthening the plan over time. Schools, districts, and ESDs should schedule to exercise this plan annually and when any revisions are made to update the plan. The plan, or component(s) of the plan, can be tested through conversations, practice exercises, or other activities.

https://www.fernridge.k12.or.us/district-and-state-reports/

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