

School-Level COVID-19 Management Plan

Template For School Year 2022-23



School/District/Program Information

District or Education Service District Name and ID: Parkrose School District 3

School or Program Name: Parkrose Middle School

Contact Name and Title: Annette Sweeney

Contact Email: sweenann@parkrose.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.
School District Communicable Disease Management Plan OAR 581-022-2220	The Multnomah ESD Comprehensive Communicable Disease Management Plan (last updated September 2021) is available: https://www.multnomahesd.org/uploads/1/2/0/2/120251715/cdmp.pdf We partner with MESD to provide all student health services.
Exclusion Measures Exclusion of students and staff who are diagnosed with certain communicable diseases OAR 333-019-0010	Parkrose School District follows current ODE and OHA guidelines requiring exclusionary measures. Parkrose also follows Multnomah County Public Health guidance which is aligned with the Centers for Disease Control and Prevention (CDC's) recommendations. Based on current recommendations and requirements, Parkrose administrators and Multnomah ESD nurses are required to exclude staff and students from school whom they have reason to suspect have COVID-19 and other certain communicable diseases. Anyone diagnosed with COVID-19, per the CDC is required to isolate for five days. After the five days, individuals are required to continue to wear a well-fitting mask around others at home and in public places for an additional 5 days (day 6 through day 10) after the end of their 5-day isolation. This applies in most situations. However, as directed by the Health Department, an individual may have a 10-day isolation if they are not able to wear a well-fitting mask while around others. The most current guidance for quarantine and isolation on the District's website at https://www.parkrose.k12.or.us/index.php?id=665 When students or staff have tested positive for an excludable disease and reported it to the school, they will be provided with a return to school date determined by the MESD and Parkrose in collaboration with the Multnomah County Public Health Department.

	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.
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	Every school building, as required by state rules, will have a dedicated Health Room to provide first aid and address minor illnesses and injuries, and a distinct Symptom/Isolation Space to separate individuals who present with communicable diseases and/or excludable symptoms from the healthy school population.
Educator Vaccination OAR 333-019-1030	All Parkrose schools meet the current OAR vaccination status requirements. All employees are either fully vaccinated or have received waivers as is permitted under the OAR. All new employees are required to demonstrate proof of full vaccination status prior to hire.
Emergency Plan or Emergency Operations Plan OAR 581-022-2225	The Parkrose Emergency Operations Plan (last updated August 2017) is available: Parkrose Emergency Procedures Plan This plan is currently in the process of being updated for the post-pandemic environment with an anticipated update completion date in Fall 2022.
Additional documents reference here:	Parkrose Board Policy JHCC: Communicable Diseases - Students Parkrose Board Policy JHCC-AR: Communicable Diseases Parkrose Board Policy GBEB: Communicable Diseases - Staff Parkrose Board Policy GBEB-AR: Communicable Diseases



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.	https://www.parkrose.k12.or.us/staff-directory	https://www.parkrose.k12.or.us/staff-directory
School Safety Team Representative (<i>or staff member knowledgeable about risks within a school, emergency response, or operations planning</i>)	• Trains staff at the start of the academic year and at periodic intervals on communicable disease management procedures. • Leads debrief of communicable disease event, informing continuous improvement of the planning, prevention, response, and recovery system.	Sharie Lewis, Business Dept	Julie Sams, Student Services

School planning team members	Responsibilities:	Primary Contact (Name/Title):	Alternative Contact:
Health Representative (<i>health aid, administrator, school/district nurse, ESD support</i>)	- 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.	MESD Nurses Amy Espinor , Megan Gard	Mult ESD Communicable Disease (CD) Team cdsupport@mesd.k12.or.us
School Support Staff as needed (<i>transportation, food service, maintenance/custodial</i>)	Advises on prevention/response procedures that are required to maintain student services.	Sharie Lewis, Business Services	Tami Booth, Business Services
Communications Lead (<i>staff member responsible for ensuring internal/external messaging is completed</i>)	- 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.	Andrea Stevenson , Communications Specialist	
District Level Leadership Support	Has responsibility over COVID-19 response during periods of high transmission. May act as school level support to Building lead/Administrator activating a scaled response.	Lorraine Parga	Jamie Smith, Parkrose Senior SHS Administrator

School planning team members	Responsibilities:	Primary Contact (Name/Title):	Alternative Contact:
<i>(staff member in which to consult surrounding a communicable disease event)</i>	Responds to media inquiries during the communicable disease event and ensures that those responsible for communication are designated speakers.	Parkrose School Health Supervisor for our Communicable Disease Team.	
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.	Multnomah County Schools Outbreak Team Multnomah County Health Department 971.288.7175	Tiffany Colburn Hitchcock School Liaison Communicable Disease Services Multnomah County Health Department 971.288.7175
Others as identified by team	<u>General Staff or Student Questions</u> School Health Services hservices@mesd.k12.or.us multnomahesd.org/shs-communicable-disease 503-257-1732 <u>Symptom Tracking Tool</u> School Health Services hservices@mesd.k12.or.us multnomahesd.org/shs-blank-145604 503-257-1732		



Section 2. Equity and Mental Health

Preparing a plan that centers equity and supports mental health

Preparing a school to manage COVID-19 requires an inclusive and holistic approach to protect access to in-person learning for all students. In this section suggested resources are offered to help prepare for COVID-19 management while centering an equitable and caring response.

Centering Equity

Identify existing district or school plans and tools that can be utilized when centering equity in prevention, response, and recovery from incidents of COVID-19 (e.g., district or school equity plans/stances/lenses/decision tools, Equity Committee or Team protocols, district or school systems for including student voice, existing agreements or community engagement or consultation models, Tribal Consultation¹, etc.)

- https://www.parkrose.k12.or.us/school_board/policies/ab/AAA%20-%20Equity,%20Diversity%20and%20Inclusion%20Lens.pdf



Suggested Resources:

1. [Equity Decision Tools](#) for School Leaders
2. [Oregon Data for Decisions Guide](#)
3. [Oregon's COVID-19 Data Dashboards](#) by Oregon Health Authority COVID-19
4. [Data for Decisions Dashboard](#)
5. [Community Engagement Toolkit](#)
6. [Tribal Consultation Toolkit](#)

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 Equity

OHA/ODE Recommendation(s)	Response:
Describe how you identify those in your school setting that are disproportionately impacted by COVID-19 and which students and families may need differentiated or additional support.	<i>Each school has a student support team that meets regularly to review and analyze attendance, behavior, and academic data. These teams include teachers, support staff, and community partners that contribute to creating the individualized plan of support to meet the needs of each student and family. The plan can include social-emotional support and community resources.</i>
Describe the process by which the school will implement a differentiated plan for those that are disproportionately impacted, historically underserved or at higher risk of negative impacts or complications related to COVID-19.	<i>If there is a disproportional increase in positive COVID-19 cases, the student support team will use district and community resources to provide an individualized plan of support for each student. Resources available include the school base Family Liason Coordinator, Reconnection and Attendance Liason, community mental health resources, and our culturally specific Community-Based Organizations (CBO). The plan would be aimed to meet the academic, attendance, and social-emotional needs of the student.</i> <i>Academic strategies may include teacher outreach and conferencing, alternative assignments/assessments, extended due dates, tutoring, virtual learning opportunities, and credit recovery course work.</i> <i>Attendance strategies may include a home visit from the Family Liason and/or Reconnection and Attendance Liason, case management provided by CBO, OnTrack coordinators, and DHS coach.</i> <i>Social-Emotional strategies may include access to the Campus Clinic and School-Based Health Center, mental health counseling services, and food, rental, energy and water assistance.</i>
What support, training or logistics need to be in place to ensure that the named strategies are understood, implemented, and monitored successfully.	<i>All members of the student support teams will receive racial equity and SEL training throughout the year. Our district is committed to providing our staff with the resources needed to support the needs of each student, especially our historically underserved students and families. We are dedicated to providing curriculum and resources to K-12 students to support their needs in social-emotional learning.</i>

Schools are encouraged to continue to prioritize cultivating care, connection, and community to support the mental, emotional, and social health and well-being of students, families, staff, and administrators.

Identify existing district or school plans and tools that can be utilized in supporting student and staff wellbeing and mental health during prevention, response, and recovery from incidents of COVID-19 (e.g., counseling services; partnerships with community mental and behavioral health providers; school district suicide prevention, intervention, and postvention plan; School Based Health Center resources; tribal resources, etc.)

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Suggested Resources:

1. ODE [Mental Health Toolkit](#)
2. [Care and Connection](#) Program
3. Statewide [interactive map of Care and Connection examples](#)
4. [Care and Connection District Examples](#)
5. Oregon Health Authority [Youth Suicide Prevention](#)

Table 4. **Mental Health Supports**

OHA/ODE Recommendation(s)	Response:
Describe how you will devote time for students and staff to connect and build relationships.	We have guidance from ODE from the Care and Connection Resources (see above link) and well as the Caring School Community, K-9th grade. It outlines and prioritizes relationship building and belonging. We are using classroom meetings, homeroom and advisory periods to create space for building relationships and community throughout the year. Furthermore, we provide instruction and opportunities to practice self-awareness, self-management, social awareness, relationship skills, and responsible decision-making skills.

OHA/ODE Recommendation(s)	Response:
Describe how you will ensure class time, and individual time if needed, for creative opportunities that allow students and staff to explore and process their experiences.	All schools have counselors onsite and most have access to our community counseling partners, such as Mental Health therapists at our Student Based Health Center, and Trillium Family services. We will also be reviewing all IEP services for students, to include the learning acceleration needs required for the next school year. This will occur during the students' yearly IEP reviews.
Describe how you will link staff, students and families with culturally relevant health and mental health services and supports.	Parkrose refers students and families who wish to work with culturally-specific behavioral health providers to contracted providers that we can provide through Care Solace, a mental health navigation system, to access culturally relevant support. Parkrose continues to support our partnership with Multnomah County and the City of Portland to implement the SUN Service system. Through three partner agencies connected to our schools, students and families receive a range of supports including: enrichment and extended learning, Early Kindergarten Transition, Food Pantries, service coordination and referral, student advocacy and case management, access to antipoverty supports (rent assistance, utility assistance, benefits eligibility and case management).
Describe how you will foster peer/student lead initiatives on wellbeing and mental health.	As a school district, our school board now has student leaders that are on our school board. This opportunity brings student voices to district decision making and policy development. Our building administrators and district leaders continue to seek insight and perspective from our primary audience, our students. Using informal and formal opportunities, students help shape the district's ongoing response to understanding and supporting student wellbeing and mental health.



Section 3. COVID-19 Outbreak Prevention, Response & Recovery:

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

Planning for and implementing proactive health and safety mitigation measures assists schools in reducing COVID-19 transmission within the school environment for students, staff, and community members. COVID-19 will continue to circulate in our communities and our schools for the indefinite future. Schools will utilize different mitigation measures based on COVID-19 transmission within their facilities and communities. In the following section, teams will document their school's approach to the CDC, OHA and ODE advised health and safety measures at baseline, during increased COVID-19 transmission, and as they roll back the increased mitigating measures, incorporating lessons learned.



Suggested Resources:

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

Table 5.

COVID-19 Mitigating Measures

OHA/ODE Recommendation(s) Layered Health and Safety Measures	BASELINE MEASURES: describe what mitigating measures will the school implement all of the time, each and every day of the school year to reduce the spread of COVID-19 and protect in-person instruction?
COVID-19 Vaccination	All Parkrose staff are required to be fully vaccinated to work for the agency. At this point, as all employees are fully vaccinated or have received exemptions in compliance with the OAR, Parkrose does not need to offer vaccination clinics. If additional vaccinations are required, Parkrose will work with local county health officials and OHA to provide vaccination information and access.
Face Coverings	All Parkrose schools and programs follow CDC, OHA, and ODE recommendations regarding face coverings. When transmission rate is high in the region, face coverings are required. When the level is medium, face coverings are recommended, but not required. When the level is low, face coverings are optional.
Isolation	Every school building, as required by state rules, will have a dedicated Health Room to provide first aid and address minor illnesses and injuries, and a distinct Symptom/Isolation Space to separate individuals who present with communicable diseases and/or excludable symptoms from the healthy school population.
Symptom Screening	https://www.multnomahesd.org/shs-blank-145604.html All Parkrose schools/programs practice multi-point visual screenings, which is not the same as “screening testing”, but can however lead to additional screening questions and considerations in order to limit potentially ill individuals from exposing others. These occur: Prior to leaving for school. Staff and secondary students can “screen” themselves to ensure they are not demonstrating any of the primary symptoms of COVID-19 (cough, fever [temperature of 100.4°F or higher] or chills, shortness of breath, difficulty breathing, or new loss of taste or smell). Families of elementary age students are encouraged to visually “screen” their children. Upon entry to the bus and/or the building, school staff will continue visually screening students to see if a more thorough screening needs to take place. As students enter classrooms and throughout the day, staff will continue to visually “screen” students to see if there are any changes in behavior that might indicate that a student is not feeling well and might require a more thorough screening.

OHA/ODE Recommendation(s) Layered Health and Safety Measures	BASELINE MEASURES: describe what mitigating measures will the school implement all of the time, each and every day of the school year to reduce the spread of COVID-19 and protect in-person instruction?
	If students or staff display any of the primary symptoms while onsite, additional steps will be taken including temperature checks.
COVID-19 Testing	OHA offers both diagnostic and screening testing programs to all public and private K-12 schools in Oregon. We also have Binax and home test kits at school. We also refer students and families to our Student Based Health Center or Campus Clinic, a mobile testing site.
Airflow and Circulation	All Parkrose locations meet or exceed with the use of filters and HEPA systems in specified rooms.
Cohorting	Per updated guidance from the Center for Disease Control (CDC), cohorting is no longer a recommended strategy against COVID-19.
Physical Distancing	Parkrose follows ODE and OHA guidelines regarding physical distancing. At this time physical distancing is optional. If health guidelines change, Parkrose will follow those.
Hand Washing	Signage in multiple languages is available in restrooms and other high contact areas with reminders about proper hand washing and the importance of hand sanitation for preventing and reducing the spread of communicable diseases.
Cleaning and Disinfection	Parkrose will continue its protocols for regular cleaning and disinfecting schools and vehicles. Sanitation practices outlined in SOPs have been integrated into standard practice.
Training and Public Health Education	<i>Communications</i> Parkrose operates in partnership with ODE., Mult. Co. Public Health and MESD to ensure students, staff and families have access to critical public health guidance. We will schedule and provide regular communication about updated public health guidance and enhanced communicable disease mitigation efforts, if necessary, to students, families and staff through a variety of channels, including email, website, social media and news media. If and when information is time-sensitive or urgent, we will also use text messages and emails to reach the community. Our materials and messages will be made available to the community in all district-supported languages (English, Spanish, Vietnamese, Chinese, Russian, Somali).

OHA/ODE Recommendation(s) Layered Health and Safety Measures	BASELINE MEASURES: describe what mitigating measures will the school implement all of the time, each and every day of the school year to reduce the spread of COVID-19 and protect in-person instruction?
	<i>Training</i> There are resources and training available as well to support public health in our schools, including a Health & Safety training for all employees to view at the beginning of the school year and on-demand. Resources are curated for students, families/parents, school based staff, administrators and specialized teams (ie. secretaries, custodians).

Table 6. COVID-19 Mitigating Measures

OHA/ODE Recommendation(s) Layered Health and Safety Measures	MEASURES DURING PERIODS OF HIGH TRANSMISSION*: describe what mitigating measures the school will implement during periods of high transmission to reduce the spread of COVID-19 and protect in-person learning? *Within the community, high transmission is defined at the county level through <u>CDC COVID-19 Community Levels</u> . Within a school, high transmission may be defined as high absenteeism or unusual spread within a cohort (e.g., a large outbreak in a classroom).
COVID-19 Vaccination	All Parkrose staff are required to be fully vaccinated to work for the agency. At this point, as all employees are fully vaccinated or have received exemptions in compliance with the OAR, Parkrose does not need to offer vaccination clinics. If additional vaccinations are required, Parkrose will work with local county health officials and OHA to provide vaccination information and access.
Face Coverings	All Parkrose schools and programs follow CDC, OHA, and ODE recommendations regarding face coverings. When transmission rate is high in the region, face coverings are required. When the level is medium, face coverings are recommended, but not required. When the level is low, face coverings are optional.
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	These occur: Prior to leaving for school. Staff and secondary students can “screen” themselves to ensure they are not demonstrating any of the primary symptoms of COVID-19 (cough, fever [temperature of 100.4°F or higher] or chills, shortness of breath, difficulty breathing, or new loss of taste or smell). Families of elementary age students are encouraged to visually “screen” their children. Upon entry to the bus and/or the building, school staff will continue visually screening students to see if a more thorough screening needs to take place. As students enter classrooms and throughout the day, staff will continue to visually “screen” students to see if there are any changes in behavior that might indicate that a student is not feeling well and might require a more thorough screening. If students or staff display any of the primary symptoms while onsite, additional steps will be taken including temperature checks.
COVID-19 Testing	OHA offers both diagnostic and screening testing programs to all public and private K-12 schools in Oregon. We also have Binax and home test kits at school. We also refer students and families to our Student Based Health Center or Campus Clinic, a mobile testing site.
Airflow and Circulation	All Parkrose locations meet or exceed with the use of filters and HEPA systems in specified rooms.
Cohorting ²	Parkrose will notify their LPHA about unusual respiratory disease activity if the following absence thresholds are met and at least some students are known to have influenza or COVID-like symptoms: 1. At the school level: ≥ 30% absenteeism, with at least 10 students and staff absent 2. At the cohort level: ≥ 20% absenteeism, with at least 3 students and staff absent

² Cohorting refers to establishing a consistent group of students that stay together for a significant portion of the school day. Examples include stable mealtime cohorts, classrooms, table groups, lunch bunches, and other group situations. Cohorts should be as small as feasible to minimize exposure.

OHA/ODE Recommendation(s) Layered Health and Safety Measures	MEASURES DURING PERIODS OF HIGH TRANSMISSION*: describe what mitigating measures the school will implement during periods of high transmission to reduce the spread of COVID-19 and protect in-person learning? *Within the community, high transmission is defined at the county level through CDC COVID-19 Community Levels . Within a school, high transmission may be defined as high absenteeism or unusual spread within a cohort (e.g., a large outbreak in a classroom).
Physical Distancing	In accordance with state guidance, physical distancing will be encouraged and promoted by school communities.
Hand Washing	Signage in multiple languages is available in restrooms and other high contact areas with reminders about proper hand washing and the importance of hand sanitation for preventing and reducing the spread of communicable diseases.
Cleaning and Disinfection	Parkrose will continue its protocols for regular cleaning and disinfecting schools and vehicles. Sanitation practices outlined in SOPs have been integrated into standard practice.
Training and Public Health Education	<i>Communications</i> Parkrose operates in partnership with ODE., Mult. Co. Public Health and MESD to ensure students, staff and families have access to critical public health guidance. We will schedule and provide regular communication about updated public health guidance and enhanced communicable disease mitigation efforts, if necessary, to students, families and staff through a variety of channels, including email, website, social media and news media. If and when information is time-sensitive or urgent, we will also use text messages and emails to reach the community. Our materials and messages will be made available to the community in all district-supported languages (English, Spanish, Vietnamese, Chinese, Russian, Somali). <i>Training</i> There are resources and training available as well to support public health in our schools, including a Health & Safety training for all employees to view at the beginning of the school year and on-demand. Resources are curated for students, families/parents, school based staff, administrators and specialized teams (ie. secretaries, custodians).

Table 7.

COVID-19 Mitigating Measures

OHA/ODE Recommendation(s) Layered Health and Safety Measures	STEPS FOR GRADUAL RETURN TO BASELINE RESPONSE: describe how does the school will gradually return to a baseline response. Describe how the school team will decide what measure(s) should remain at an increased level which others may not, prioritizing some measure(s) over others. How does the school reduce or make permanent implementation of enhanced mitigation measures once high transmission has ended?
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OHA/ODE Recommendation(s) Layered Health and Safety Measures	STEPS FOR GRADUAL RETURN TO BASELINE RESPONSE: describe how does the school will gradually return to a baseline response. Describe how the school team will decide what measure(s) should remain at an increased level which others may not, prioritizing some measure(s) over others. How does the school reduce or make permanent implementation of enhanced mitigation measures once high transmission has ended?
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PRACTICING PLAN TO IMPROVE PROCESS

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

INSERT THE LINK where this plan is available for public viewing.

Date Last Updated: **INSERT**

Date Last Practiced: **INSERT**