School-Level COVID-19 Management Plan

2022-23

School/District/Program Information

District or Education Service District Name and ID: Reynolds School District

School or Program Name: Multnomah Learning Academy

Contact Name and Title: Sheri Fitzsimmons, Superintendent

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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	COMMUNICABLE DISEASE MANAGEMENT PLAN- March 2022
Exclusion Measures Exclusion of students and staff who are diagnosed with certain communicable diseases OAR 333-019-0010	COMMUNICABLE DISEASE MANAGEMENT PLAN- March 2022 Includes information regarding exclusion measures and when students and staff should stay home.See page 6.
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	COMMUNICABLE DISEASE MANAGEMENT PLAN- March 2022 See page 10
Educator Vaccination OAR 333-019-1030	**Educators are required to be vaccinated unless they have an approved exclusion which has been processed by our HR Department.**
Emergency Plan or Emergency Operations Plan OAR 581-022-2225	Our school has a Safe School/Emergency Response Plan that is updated regularly.

	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.
Additional documents reference here:	

SECTION 1. Clarifying Roles and Responsibilities

Identifying roles central to communicable disease management. Clarifying responsibilities related to communicable disease response is a first step in keeping communities healthy and safe. In general, decisions of school health and safety reside with school and district officials. Together with local public health officials, school/district administrators should consult a variety of individuals when making decisions about health and safety in school.

Table 2.   **Roles and Responsibilities**

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.	Sheri Fitzsimmons, Superintendent	Jo Ann Lindenthal, Executive Director

School planning team members	Responsibilities:	Primary Contact (Name/Title):	Alternative Contact:
School Safety Team Representative (*or staff member knowledgeable about risks within a school, emergency response, or operations planning*)	● 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.	Sheri Fitzsimmons, Superintendent	Jo Ann Lindenthal, Executive Director
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.	Jo Ann Lindenthal, Executive Director	Annie Harbert, School Counselor
School Support Staff as needed (*transportation, food service, maintenance/custodial*)	● Advises on prevention/response procedures that are required to maintain student services.	Andrea Waldbillig, K-8 Operations / Finance	Elizabeth Monzo, School Secretary

School planning team members	Responsibilities:	Primary Contact (Name/Title):	Alternative Contact:
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.	Andrea Waldbillig, K-8 Operations/Finance	Elizabeth Monzo, School Secretary
District Level Leadership Support (*staff member in which to consult surrounding a communicable disease event*)	● 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. ● Responds to media inquiries during the communicable disease event and ensures that those responsible for communication are designated speakers.	Jo Ann Lindenthal, Executive Director	Sheri Fitzsimmons, Superintendent
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.	Jo Ann Lindenthal, Executive Director	Annie Harbert, School Counselor
Others as identified by team			

Section 2. Equity and Mental Health

Preparing a plan that centers equity and supports mental health

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

Centering Equity

Identify existing district or school plans and tools that can be utilized when centering equity in prevention, response, and recovery from incidents of COVID-19 (e.g., district or school equity plans/stances/lenses/decision tools, Equity Committee or Team protocols, district or school systems for including student voice, existing agreements or community engagement or consultation models, Tribal Consultation[1], etc.)

- Equity Decision Tools for School Leaders
- Oregon Data for Decisions Guide
- Oregon's COVID-19 Data Dashboards by Oregon Health Authority COVID-19

	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

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[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.	*Schools will utilize the state provided framework for equity decision making in addition to data dashboards specifically disaggregated for our communities most impacted by COVID-19 and it is secondary and tertiary effects within our PBIS/MTSS Team protocols. Additionally, our student information system "Synergy" and our Social Emotional Information System "Panorama" have been used side by side to allow school-based sites to dive deep into data due to its proactive data representation that can be aggregated to target our student populations most impacted by the primary, secondary, and tertiary effects of the COVID-19 virus.*
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.	*Our PBIS and MTSS teams will host individualized conversations as part of our MTSS Framework. Within these protocols, students and their families are discussed at an individualized level with multiple stakeholders invited to the table to ensure the student and family receive adequate support for their needs. Primarily facilitated by the PBIS/MTSS team and initiated by the classroom teacher or school-based administrator or school counselor – the PBIS/MTSS meeting utilizes data, parent/guardian/advocate voice, resources from school counselors, county and district level support to provide a plan of support for the student and then is documented within the Panorama system and revisited every four weeks. Additionally, OHA resources and information would be included to provide a plan of support for students with deep collaboration alongside our social work teams.*
What support, training or logistics need to be in place to ensure that the named strategies are understood, implemented, and monitored successfully.	The PBIS/MTSS Framework that encompasses the above protocols will be supported through our schools onboarding process. The PPBIS/MTSS teams are specifically trained to facilitate the process. School Counselors and Student Engagement aides will be given ongoing training and resources to be able to navigate the menu of services provided for families on a district, local, state, and national levels.

Mental Health Supports

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

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

- ODE Mental Health Toolkit
- Counselors and Student Engagement aides are assigned to student cases via PBIS/MTSS Teams
- Partnerships with Multnomah County Mental Health
- Care and Connection Program
- Statewide interactive map of Care and Connection examples
- District and MESD Flight Team and Crisis Response Protocol

<table>
<tr><td>**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</td></tr>
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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.	Throughout the school year, time will be built into the school day for building relationships. This will be facilitated by administration, school counselors, our student engagement specialist, teachers, staff and outside consultants. Weekly check-ins at our Diversity, Equity, Inclusion, and Anti-racism meetings will also focus on building relationships. Weekly PLC's will be held to also gauge the temperature of staff morale.
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.	School community meetings, counseling lessons, frequent celebrations, and school-wide PBIS framework. Weekly check-ins at our Diversity, Equity, Inclusion, and Anti-racism meetings will also focus on staff exploration and processing. Weekly PLC's will be held to also allow staff to process the needs of themselves and their individual students.

OHA/ODE Recommendation(s)	Response:
Describe how you will link staff, students and families with culturally relevant health and mental health services and supports.	PBIS/MTSS Teams will follow protocols to ensure that students and families are referred to additional support as needed. School Counselors will provide students with culturally relevant classroom lessons on health and mental health. School Counselors will provide families with culturally appropriate community resources as needed. Staff will get monthly check-ins regarding culturally relevant health and mental health supports via our Diversity, Equity, Inclusion, and Anti-racism meetings. Staff will receive at least twice a year specific training from a Diversity, Equity, Inclusion, and Anti-racism consultant. MLA will hold parent/family nights for family support.
Describe how you will foster peer/student lead initiatives on wellbeing and mental health.	Student jobs program, health and safety week and lessons, ongoing counseling lessons, peer support groups, and counseling groups.

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	*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.* Vaccination clinics will continue to take place directly in the school community by partnering with East County Community Health. Past clinics have been available through partnership with Oregon Health and Science University (OHSU), Multnomah County Health Department, and the Northwest Disability Supports. When clinics are available, they are shared with each student and family through e-mail notification along with promoting to the school-wide community through social media platforms.
Face Coverings	MLA will follow the current statewide optional face covering guidance except in health care settings in schools like health rooms and Student Health Centers where face covering will still be mandatory. MLA has issued updated policy on the optional face covering guidance and works with schools and non-school work locations to ensure employees understand the current guidance. MLA has provided messaging to parents/guardians.
Isolation	When students are identified with restrictable diseases or excludable symptoms, they should be separated from the well-population, in an appropriate space until they can be dismissed to home. This isolation space should be separated from the healthcare area used to assess and treat injured and non-symptomatic children or to provide medication management and care of chronic healthcare conditions. As part of our operating procedures during in-person learning, every school identified an appropriate care space (if not the healthcare area) for students identified with restrictable diseases or excludable symptoms. These operating procedures have continued this school year.
Symptom Screening	Students and staff are reminded of the common symptoms of COVID-19 and continue to check on their own health. If they are experiencing any COVID-19 symptoms, they are asked to contact the school and stay home.
COVID-19 Testing	*Through the Oregon Health Authority (OHA), MLA has ordered school-site testing kits for all school buildings for students/staff. Any student/staff who needs a COVID-19 test can get one in their building, or can go to their personal health care provider.*
Airflow and Circulation	*All classrooms and workspaces have upgraded HEPA filter air ventilators. Doors and windows available for ventilation.*
Cohorting	Students will stay in their respective classes/cohorts as much as possible. Assigned cohorts and seating assignments are tracked by the classroom teacher.
Physical Distancing	Students will be social distanced at least 3 ft. as often as possible at school. Desks will be spaced out accordingly in classrooms. School site administrators will be working to distance students at least 3 feet as often as possible at schools.
Hand Washing	Handwashing and respiratory etiquette will be a constant reminder at each school. Staff will remind students how to correctly wash hands and keep any coughs into their sleeves. MLA has provided information to parents/guardians on important COVID-19 safety precautions. MLA has also communicated to parents/guardians and students on the importance of handwashing and respiratory etiquette. Hand sanitizer and facial coverings have been supplied to schools.

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?
Cleaning and Disinfection	All high touch surfaces in schools and buildings are sanitized and cleaned thoroughly by Custodial staff each day. Areas where students and staff eat and or use more frequently will be wiped and sanitized more often, and as often as feasibly possible throughout the school/work day. If an on-site positive COVID-19 case is confirmed, additional cleaning and sanitizing will be done before the next day when students and staff return to the school site.
Training and Public Health Education	Students and staff will be regularly trained on the benefits of proper hygiene (hand washing, sanitizing surfaces, covering mouth/nose when sneezing/coughing). They will be reminded to provide additional space to their classmates and co-workers and to stay home when not feeling well whether it's COVID-19 symptoms or not.

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 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).
COVID-19 Vaccination	MLA will encourage families to attend a specific vaccination clinic which will be planned in the Reynolds school community utilizing established community partners. Students, grades K-12, can also receive COVID-19 vaccinations at any time at the Reynolds High School Student Health Center throughout the year.
Face Coverings	*CDC, OHA, and ODE recommend universal use of face coverings during periods of high transmission. Please include whether your school will implement this critical recommendation.* Schools will follow requirements for face coverings based on the Multnomah County Health Department and Oregon Health Authority (OHA) requiring face covering in schools. Schools will consult with the Local Public Health Authority during periods of high transmission.
Isolation	Students who are currently symptomatic for COVID-19 will continue to be isolated from the well population in alignment with procedures from the Center for Disease Control and Prevention (CDC) and Multnomah County Health Department.
Symptom Screening	The same procedures will be utilized.
COVID-19 Testing	Testing will be made available at the school site if there is an on-site individual experiencing symptoms. Testing kits continue to be sent home as Oregon Health Authority (OHA) sends additional kits to school districts to distribute to each school and student.

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).
Airflow and Circulation	HVAC systems and air purifiers will continue to be used at a high level. *All classrooms and workspaces have upgraded HEPA filter air ventilators. Doors and windows available for ventilation.*
Cohorting[2]	*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: ≥ 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* Cohorting will be relied on to keep small groups of students together and ensure there is not intermixing. Cohorts will be tracked in the Student Information System for contact tracing purposes.
Physical Distancing	Classrooms will be arranged so that students remain 3-6' apart. The use of shields on desks will be utilized.
Hand Washing	Additional reminders will be made for hand washing opportunities and hand sanitizer will be made available in all high touch points in the schools/buildings.
Cleaning and Disinfection	When more COVID-19 cases appear, custodial crews will implement deeper cleaning protocols to ensure locations where symptomatic individuals were in the school have been thoroughly sanitized.
Training and Public Health Education	Weekly staff meetings offer opportunities to keep everyone updated and to train staff.

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[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.

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?
COVID-19 Vaccination	Regular vaccination opportunities will be made available to students, staff, and the community.
Face Coverings	Optional masking will be implemented.
Isolation	Symptomatic individuals will continue to be told to stay home away from the well-population.
Symptom Screening	Symptom screening measures will remain in place.
COVID-19 Testing	COVID-19 testing programs will remain in place.
Airflow and Circulation	HVAC systems will continue to run at their full efficiency.
Cohorting	Cohort groups will continue to stay as small and in-tact throughout the day as possible. As baseline returns, there will be more opportunities for inter-mixing cohorts for social emotional purposes in the school.
Physical Distancing	Reminders to keep certain distances will remain in place as much as possible.

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?
Hand Washing	Hand washing and basic hygiene reminders will remain in place.
Cleaning and Disinfection	Custodial staff will continue to clean high touch surfaces, but not do the deeper cleaning as often.
Training and Public Health Education	Training will be more reminder based and keep certain measures at the front of mind.

PRACTICING PLAN TO IMPROVE PROCESS

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

https://www.mla.k12.or.us/apps/pages/index.jsp?uREC_ID=1267866&type=u&pREC_ID=1845697 where this plan is available for public viewing.

Date Last Updated: **August 18, 2022**   Date Last Practiced: August 2022