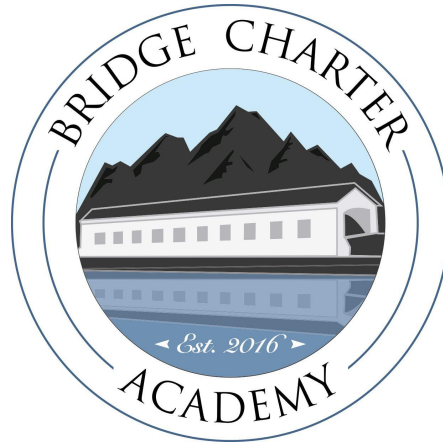


# Communicable Disease Management Plan

For School Year 2023-24



## School/District/Program Information

District or Education Service District Name and ID: Lowell School District #71

School or Program Name: Bridge Charter Academy

Contact Name and Title: Ben Silebi, Administrator



## 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 1.**

	<b>Policies, protocols, procedures and plans already in place</b> 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.
<b>School District Communicable Disease Management Plan</b> <a href="#">OAR 581-022-2220</a>	<a href="https://www.lowell.k12.or.us/doc/communicable-disease-management-plan-22-23/">https://www.lowell.k12.or.us/doc/communicable-disease-management-plan-22-23/</a>
<b>Exclusion Measures</b> Exclusion of students and staff who are diagnosed with certain communicable diseases <a href="#">OAR 333-019-0010</a>	Staff and students who are ill must stay home from school and must be sent home if they become ill at school, particularly if they have viral symptoms. Symptomatic staff or students should be evaluated and seek COVID-19 testing from their regular healthcare provider or through the local public health authority. If a student or staff member has a positive COVID-19 test result, the person should remain home for at least 5 days after illness onset and 24 hours after the fever is gone, without the use of fever-reducing medicine, and other symptoms are improving. If they have a negative COVID-19 viral test (and if they have multiple tests, all tests are negative), they should remain home until 24 hours after the fever is gone, without the use of fever-reducing medicine, and other symptoms are improving. If a clear alternative diagnosis is identified as the cause of the person’s illness (e.g., a positive strep throat test), then usual disease-specific return-to-school guidance should be followed, and the person should be fever-free for 24 hours, without the use of fever reducing medicine. A physician’s note is required to return to school, to ensure that the person is not contagious. If they do not undergo COVID-19 testing, the person should remain at home for 5 days and until 24 hours after the fever is gone, without the use of fever-reducing medicine and other symptoms improving. Upon return, the person should wear a face mask for an additional 5 days, through day 10.

<p><b>Isolation Space</b> 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. <a href="#">OAR 581-022-2220</a></p>	<p>Isolation and monitoring Staff who report or develop symptoms will report such to their supervisor and leave the school or worksite immediately. Students who report or develop symptoms must be isolated in the designated isolation area/room in the school, with adequate space and staff supervision and symptom monitoring by a school nurse, other school-based health care provider, or other school staff. If more than one student requires isolation measures be implemented at the same time they will be monitored. The student’s parent/guardian should be contacted immediately to come pick them up. If able to do so safely, a symptomatic student should wear a face covering. Anyone providing supervision and symptom monitoring must wear an appropriate face or CDC approved alternative. Any program staff in close contact with symptomatic students (less than 6 feet) shall wear a medical-grade face mask. Other personal protective equipment (PPE) may be needed depending on symptoms and care provided. A non-medically trained staff member (i.e., a staff member other than a school nurse or member of the health services staff), when moving a student into isolation, will maintain at least 6 feet of distance from the student, unless impossible, and will wear a face covering or CDC-approved alternative. Any PPE used during care of a symptomatic individual shall be properly removed, and cleaned or disposed of, prior to exiting the care space. After removing PPE, hands should be immediately cleaned with soap and water for at least 20 seconds. If soap and water are not available, hands can be cleaned with an alcohol-based hand sanitizer that contains 60–95% alcohol. To reduce fear, anxiety, or shame related to a student’s isolation, staff should provide a clear explanation of procedures, including use of PPE and handwashing. Students will remain in the isolation area until a parent, guardian or emergency contact arrives to take them home.</p>
<p><b>Educator Vaccination</b> <a href="#">OAR 333-019-1030</a></p>	<p>Teachers, school staff, and volunteers may not teach, work, learn, study, assist, observe, or volunteer at a school unless they are fully vaccinated or have provided documentation of an approved medical or religious exception.</p>
<p><b>Emergency Plan or Emergency Operations Plan</b> <a href="#">OAR 581-022-2225</a></p>	<p>We have trained staff who can identify and respond to medical and mental health emergencies in our schools. In the event of a crisis response, parents are asked to stay away from campus so that emergency responders access is not impeded and to wait for instructions from school and emergency personnel. These instructions may include information about how/where to reunite with your student(s).</p>

<p><b>Additional documents reference here:</b></p>	
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**Table 2. Roles and Responsibilities**

School planning team members	Responsibilities:	Primary Contact (Name/Title):	Alternative Contact:
<p>Building Lead / Administrator</p>	<ul style="list-style-type: none"> <li>● Educates staff, families, and students on policies regarding visitors and volunteers, ensuring health and safety are being maintained.</li> <li>● In consultation with district leadership and LPHA staff, determines the level and type of response that is required/necessary.</li> <li>● Acts as key spokesperson to communicate health-related matters within school community members, health partners, and other local partners.</li> </ul>	<p><a href="#">Ben Silebi</a>, Administrator</p>	<p><a href="mailto:bsilebi@bridgecharter.com">bsilebi@bridgecharter.com</a> 541.844.5663</p>
<p>School Safety Team Representative <i>(or staff member knowledgeable about risks within a school, emergency response, or operations planning)</i></p>	<ul style="list-style-type: none"> <li>● Trains staff at the start of the academic year and at periodic intervals on communicable disease management procedures.</li> <li>● Leads debrief of communicable disease event, informing continuous improvement of the planning, prevention, response, and recovery system.</li> </ul>	<p><a href="#">Rachel Yesser</a>, Office Director</p>	<p><a href="mailto:ryesser@bridgechater.com">ryesser@bridgechater.com</a></p>

School planning team members	Responsibilities:	Primary Contact (Name/Title):	Alternative Contact:
Health Representative ( <i>health aid, administrator, school/district nurse, ESD support</i> )	<ul style="list-style-type: none"> <li>● Supports building lead/administrator in determining the level and type of response that is necessary.</li> <li>● Reports to the LPHA any cluster of illness among staff or students.</li> <li>● Provides requested logs and information to the LPHA in a timely manner.</li> </ul>	<a href="#">Rachel Yesser</a> , Office Director	<a href="mailto:ryesser@bridgechater.com">ryesser@bridgechater.com</a>
School Support Staff as needed ( <i>transportation, food service, maintenance/custodial</i> )	<ul style="list-style-type: none"> <li>● Advises on prevention/response procedures that are required to maintain student services.</li> </ul>	<a href="#">Rachel Yesser</a> , Office Director	<a href="mailto:ryesser@bridgechater.com">ryesser@bridgechater.com</a>
Communications Lead ( <i>staff member responsible for ensuring internal/external messaging is completed</i> )	<ul style="list-style-type: none"> <li>● 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.</li> <li>● Shares communications in all languages relevant to school community.</li> </ul>	<a href="#">Cory Graham</a> , Communications	<a href="mailto:cgraham@bridgecharter.com">cgraham@bridgecharter.com</a>

School planning team members	Responsibilities:	Primary Contact (Name/Title):	Alternative Contact:
District Level Leadership Support <i>(staff member in which to consult surrounding a communicable disease event)</i>	<ul style="list-style-type: none"> <li>● Has responsibility over communicable disease response during periods of high transmission. May act as school level support to Building lead/Administrator activating a scaled response.</li> <li>● Responds to media inquiries during the communicable disease event and ensures that those responsible for communication are designated speakers.</li> </ul>	<a href="#">Scott Yakovich</a> , Lowell Superintendent	<a href="mailto:syakovich@Lowell.k12.or.us">syakovich@Lowell.k12.or.us</a>
Main Contact within Local Public Health Authority (LPHA)	<ul style="list-style-type: none"> <li>● Notifies Building Lead/Administrator of communicable disease outbreak and offers recommendations for appropriate response.</li> <li>● Key spokesperson to communicate on health-related matters with community members, health facility staff, and other local community partners.</li> </ul>	<a href="#">Ben Silebi</a> , Administrator	<a href="mailto:bsilebi@bridgecharter.com">bsilebi@bridgecharter.com</a> 541.844.5663
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 communicable disease 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 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 communicable disease (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<sup>1</sup>, etc.



### 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](#)

**Table 3. Centering Equity**

OHA/ODE Recommendation(s)	Response:
<p>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.</p>	<p>We collaborate with staff and families via weekly Zoom meetings open to the whole school community. We also communicate to all our prospective families. Everyone was impacted by the school closures and communicable disease in some way. We are seeing students shut down, disassociate, and pull away a lot more than usual. Therefore, with the assumption that everyone was impacted, we are slowly and methodically working to re-engage our community by providing activities (free of charge), trainings, and walking alongside our families as we return to normal.</p> <p>By developing these relationships with our school community, we can better serve our students and families because we know their needs.</p>

<sup>1</sup> 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.

OHA/ODE Recommendation(s)	Response:
<p>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.</p>	<p>Students and families that are disproportionately impacted, historically underserved, or at higher risk of negative impacts do not necessarily want a differentiated plan. They want/need a little more assistance so their child can participate fully in their educational experience.</p> <p>We provide an \$800 allotment for curriculum, school supplies, etc. We also provide an iPad or chromebook for all students. We provide additional tutoring and support (Growth Team), 1:1 Zoom teacher meetings, and in-person and Zoom extracurricular activities.</p>
<p>What support, training or logistics need to be in place to ensure that the named strategies are understood, implemented, and monitored successfully.</p>	<p>For the last year, we have successfully implemented the above listed processes. We used in-service and staff meetings to train our staff on how to communicate with families and what resources are available for them. We also have a weekly email where we share updates and resources. As we go into the 2023 – 2024 school year, many of our systems and procedures will remain in place, and be re-taught, to provide consistency for families.</p>

## 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 communicable disease (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.)





**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:
<p>Describe how you will devote time for students and staff to connect and build relationships.</p>	<p>We are starting the year with 1-on-1 family meetings with each teacher. We start our school year focusing on building a culture of care &amp; connection with our students. We are offering all students access to extracurricular activities in-person and via Zoom. We also provide monthly field trips for all BCA students.</p>
<p>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.</p>	<p>In our cohort classes, we focus on hands-on group projects with peers. We give each student weekly 1:1 time with a teacher to talk about their schooling and explore and process their experiences. Additionally, we have a school counselor that participates in classroom activities to build relationships so students feel comfortable sharing when needed.</p>
<p>Describe how you will link staff, students and families with culturally relevant health and mental health services and supports.</p>	<p>Lane County offers a wide variety of culturally and relevant mental health services and supports. We have a school counselor to link our school community to mental health services.</p> <p>We also have a weekly family newsletter with additional information. We also offer a weekly parent and family in-person/Zoom meeting to address family questions and concerns.</p>

OHA/ODE Recommendation(s)	Response:
<p>Describe how you will foster peer/student lead initiatives on wellbeing and mental health.</p>	<p>For our Lower grade levels (Kindergarten - 8th) students we develop social-emotional skills, where students learn to identify and voice their feelings and needs. As they mature, we create student-led opportunities for service, projects, and activities, and we provide them with extra support to reach their academic goals.</p> <p>High School student have access to mental health &amp; wellness are conversations we cultivate in our social/emotional class. Each student has a class that focuses on Social-Emotional skills, and resiliency. Additionally, we have a school counselor that participates in classroom activities to build relationships, so students feel comfortable sharing when needed.</p>



### Section 3. Communicable Disease 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 communicable disease transmission within the school environment for students, staff, and community members. Communicable disease will continue to circulate in our communities and our schools for the indefinite future. Schools will utilize different mitigation measures based on Communicable disease 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 Communicable disease 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. Communicable Disease 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	During times of high transmission, we will keep track of local or nearby vaccine clinics so we can provide that information to anyone that needs it.

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?
Face Coverings	Face coverings will be made available to students and staff. However, the wearing of a facial covering indoors and outdoors will be optional for all beginning in the 2023 – 2024 school year.
Isolation	We have an isolation area listed in our communicable disease management plan, all necessary staff members know of this area and are able to follow the disease management plan.
Symptom Screening	We have many layers of symptom screening. All parents are given a list of symptoms to screen their students for (with many reminders throughout the year), we have a staff member visually screening all students as they enter campus.
COVID-19 Testing	Family and staff are directed to contact their primary physician.
Airflow and Circulation	We have HEPA air purifiers in each classroom we leave the doors and windows open as much as possible.
Cohorting	Cohorting is being maintained throughout the school day.
Physical Distancing	We do not plan on requiring distancing for the 2023 – 2024 school year. If necessary, we could easily transition to 3 feet during cold/flu season.
Hand Washing	Students will have access to sanitizer/handwashing each morning, as they enter, and throughout the day. We will be intentional about handwashing before snacks and lunch.
Cleaning and Disinfection	Our staff will continue to clean and disinfect on a regular basis.
Training and Public Health Education	We are committed to our screening protocols and teaching our families what to look for before bringing students to school. Our students and staff are committed to handwashing/sanitizing on a regular basis and diligently cleaning our school, classrooms, and supplies. We will continue to have individual supplies for our students, so as not to share germs.

**Table 6.**

**Communicable Disease Mitigating Measures**

<b>OHA/ODE Recommendation(s)</b> Layered Health and Safety Measures	<b>MEASURES DURING PERIODS OF HIGH TRANSMISSION*:</b> 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 <a href="#">CDC COVID-19 Community Levels</a> . 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	During times of high transmission, we will keep track of local or nearby vaccine clinics so we can provide that information to anyone that needs it.
Face Coverings	Face coverings will continue to be provided to students and staff that request them. However, the wearing of a facial covering indoors and outdoors will be optional for all.
Isolation	We have an isolation area listed in our communicable disease management plan, all necessary staff members know of this area and are able to follow the disease management plan.
Symptom Screening	We have many layers of symptom screening. All parents have access via website of symptoms to screen their students for (with many reminders throughout the year), we have a staff member visually screening all students as they enter campus. During times of high transmission, we will communicate on a more regular basis with our parents about symptoms to be looking for and which are exclusionary.
COVID-19 Testing	Families and staff will be directed to contact their primary physician.
Airflow and Circulation	We have HEPA air purifiers in each classroom, our ventilation systems were completely remodeled, and we leave the doors and windows open as much as possible.
Cohorting	Cohorting is being maintained throughout the school day.
Physical Distancing	We do not plan on requiring distancing for the 2023 – 2024 school year. If necessary, we could easily transition to 3 feet during cold/flu season.
Hand Washing	Students will have access to sanitizer/handwashing each morning, as they enter, and throughout the day. We will be intentional about handwashing.
Cleaning and Disinfection	We will clean area after each cohort disbands and before a new group arrives. Deep cleaning will be done on a monthly bases.

<p><b>OHA/ODE Recommendation(s)</b> Layered Health and Safety Measures</p>	<p><b>MEASURES DURING PERIODS OF HIGH TRANSMISSION*:</b> 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?</p> <p>*Within the community, high transmission is defined at the county level through <a href="#">CDC COVID-19 Community Levels</a>. 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).</p>
<p>Training and Public Health Education</p>	<p>Trainings and public health education will take place during staff meetings.</p>

**Table 7.**

**Communicable Disease Mitigating Measures**

<p><b>OHA/ODE Recommendation(s)</b> Layered Health and Safety Measures</p>	<p><b>STEPS FOR GRADUAL RETURN TO BASELINE RESPONSE:</b> 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?</p>
<p>Communicable Disease Vaccination</p>	<p>During times of high transmission, we will keep track of local or nearby vaccine clinics so we can provide that information to anyone that needs it.</p>
<p>Face Coverings</p>	<p>Face coverings will continue to be provided to students and staff that request them. However, the wearing of a facial covering indoors and outdoors will be optional for all.</p>
<p>Isolation</p>	<p>We have an isolation area listed in our communicable disease management plan, all necessary staff members know of this area and are able to follow the disease management plan.</p>
<p>Symptom Screening</p>	<p>We have many layers of symptom screening. All parents have access via website of symptoms to screen their students for (with many reminders throughout the year), we have a staff member visually screening all students as they enter campus. During times of high transmission, we will communicate on a more regular basis with our parents about symptoms to be looking for and which are exclusionary.</p>
<p>Communicable Disease Testing</p>	<p>Families will be directed to testing sites. Tests will be given only when requested by a parent/guardian of the student. School staff will not provide a test or administer a test without consent from the parent/guardian.</p>
<p>Airflow and Circulation</p>	<p>We have HEPA air purifiers in each classroom and we leave the doors and windows open as much as possible.</p>
<p>Cohorting</p>	<p>Cohorting is being maintained throughout the school day.</p>
<p>Hand Washing</p>	<p>Extra handwashing will be a priority. Education and practice on correct handwashing will be important.</p>

<b>OHA/ODE Recommendation(s)</b> Layered Health and Safety Measures	<b>STEPS FOR GRADUAL RETURN TO BASELINE RESPONSE:</b> 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?
Cleaning and Disinfection	Cleaning and disinfection of classrooms, supplies, and high touch areas will remain a high priority as we return to baseline.
Training and Public Health Education	We will use our staff meetings to train and update staff on communicable disease procedures and plans.

## 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.

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Date Last Updated: **8/21/23**

Date Last Practiced: **8/21/23**