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OPERATIONAL BLUEPRINT FOR SCHOOL REENTRY 2020-21

Limited In-Person Instruction Updated 12/9/2020

Under ODE's **Ready Schools, Safe Learners** guidance, each school[1] has been directed to submit a plan to the district[2] in order to provide on-site and/or hybrid instruction. Districts must submit each school's plan to the local school board and make the plans available to the public. This form is to be used to document a district's, school's or program's plan to ensure students can return for the 2020-21 school year, in some form, in accordance with Executive Order 20-25(10). Schools must use the ***Ready Schools, Safe Learners* guidance** document as they complete their Operational Blueprint for Reentry. ODE recommends plan development be inclusive of, but not limited to, school-based administrators, teachers and school staff, health and nursing staff, association leadership, nutrition services, transportation services, tribal consultation,[3] parents and others for purposes of providing expertise, developing broad understanding of the health protocols and carrying out plan implementation.

1. Please fill out information:

Name of School, District or Program	Corbett School District 39
Key Contact Person for this Plan	Holly Dearixon
Phone Number of this Person	503-261-4238
Email Address of this Person	hdearixon@corbett.k12.or.us
Sectors and position titles of those who informed the plan	Dan Wold-District Superintendent, Michelle Dawkins-Grade School Principal, Kathy Childress-8/9 Academy & Secondary Principal, Rhiannon Young-Middle School Assistant Principal/MS Teacher, Lori Luna-CAPS Principal, Jeanne Swift-Student Services Director, Julie Nakamura-School Health Nurse, Steve Salisbury-Maintenance Supervisor, Todd Williams-Transportation Supervisor, Jamie Smith-MESD School Health Services Coordinator, Seth Tucker-Food Services Supervisor, Carrie Evans-Transportation Coordinator, Holly Dearixon-Curriculum & Assessment Coordinator, Cassie Duprey-Secondary Assistant Principal, Jenny Radulesk-8/9 Academy Teacher/Assistant Principal
Local public health office(s) or officers(s)	Multnomah County Health Department
Name of person Designated to Establish, Implement and Enforce Physical Distancing Requirements	Kathy Childress - Secondary principal Lori Luna - CAPS principal DeeDee Hanes - Grade school principal Rhiannon Young - Middle school assistant principal
Intended Effective Dates for this Plan	1/25/2020
ESD Region	Multnomah ESD

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[1] For the purposes of this guidance: "school" refers to all public schools, including public charter schools, public virtual charter schools, alternative education programs, private schools and the Oregon School for the Deaf. For ease of readability, "school" will be used inclusively to reference all of these settings.

[2] For the purposes of this guidance: "district" refers to a school district, education service district, public charter school sponsoring district, virtual public charter school sponsoring district, state sponsored public charter school, alternative education programs, private schools, and the Oregon School for the Deaf.

[3] 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.

2. Please list efforts you have made to engage your community (public health information sharing, taking feedback on planning, etc.) in preparing for school in 2020-21. Include information on engagement with communities often underserved and marginalized and those communities disproportionately impacted by COVID-19.

Corbett School District conducted three school community outreach surveys summer 2020 as we planned for instruction in the Fall. A draft reopening Blueprint for the Hybrid Learning Model was presented and discussed at the school board meeting in July and posted on the website along with a one-page summary of the main points. Multiple communications were sent from the superintendent and building principals describing the planning process and decisions being made.

Due to the Oregon Department of Education reopening metrics we pivoted to a Comprehensive Distance Learning (CDL) model for the first trimester of the school year. This information was communicated to families via district email as soon as the decision was made. Follow up communication was sent weekly until school began on September 8th. The Corbett website has information posted on its front page so parents may access current reopening information in English and other languages as well.

The building principals began hosting parent meetings in early August to review plans for the fall, answer questions and take feedback. They have held Principal Chats throughout the first months of school to keep families updated and respond to feedback. Before beginning CDL classroom teachers conducted an individual conference with each of the families in their class.

Over the summer the administration team met with representatives of the classified and certified unions in order to facilitate communication and cooperation. The Director of Student Services reached out to families of students with disabilities to ensure the plan would meet their individualized needs. The English Language Development Specialist/Homeless Liaison/Migrant Ed Liaison/Foster Care POC reached out to the parents/guardians of students he serves to provide information and answer questions. We reached out to the Confederated Tribes of Grande Ronde, Confederated Tribes of Siletz Indians and the Native American Youth and Family Center to see if these organizations would be interested in consulting on the reopening plan and partnering with us to serve our students going forward.   Throughout this process we collaborated with Curriculum & Instruction and Health Services staff from the Multnomah Educational Service District (MESD) and the local public health authority (LPHA). As we transition to Hybrid Learning we will reach out again to these stakeholders to request their feedback and suggestions related to the return to on-site instruction.

Since the beginning of the school year we have increased our efforts to engage families from traditionally underserved populations through the administration of the YouthTruth Survey, and the ongoing work of the Equity and Culturally Responsive Practices Initiative that is part of our Consolidated District Improvement Plan.

At least two weeks before we begin Limited In-Person Instruction (LIPI) we will reach out to families with regards to the screening process and reasons behind offering this service.   Clear health and safety protocols will be outlined. Families will have the right to refuse LIPI.

3. Indicate which instructional model will be used.

    Select One:
    ☐ **On-Site Learning**   ☒ **LIPI**   ☐ **Comprehensive Distance**

4. If you selected Comprehensive Distance Learning, you only have to fill out the green portion of the Operational Blueprint for Reentry (i.e., page 2 in the initial template).

5. If you selected On-Site Learning or Hybrid Learning, you have to fill out the blue portion of the Operational Blueprint for Reentry (i.e., pages 3-19 in the initial template) and submit online.

(https://app.smartsheet.com/b/form/a4dedb5185d94966b1dffc75e4874c8a) by August 17, 2020 or prior to the beginning of the 2020-21 school year.

* **Note:** Private schools are required to comply with only sections 1-3 of the *Ready Schools, Safe Learners* guidance.

REQUIREMENTS FOR COMPREHENSIVE DISTANCE LEARNING OPERATIONAL BLUEPRINT

This section must be completed by any school that is seeking to provide instruction through Comprehensive Distance Learning. For Private Schools, completing this section is optional (not required). **Schools providing On-Site or Hybrid Instructional Models do not need to complete this section.**

Describe why you are selecting Comprehensive Distance Learning as the school's Instructional Model for the effective dates of this plan.
LIPI will be offered to small cohorts of students based on identified needs and following the LIPI guidance. LIPI will be considered a supplemental service. Students participating in LIPI will be expected to continue with Comprehensive Distance Learning(CDL) following the Blueprint submitted to ODE August 2020.

In completing this portion of the Blueprint you are attesting that you have reviewed the Comprehensive Distance Learning Guidance. <u>Here is a link to the overview of CDL Requirements.</u> Please name any requirements you need ODE to review for any possible flexibility or waiver.
LIPI will be offered to small cohorts of students based on identified needs and following the LIPI guidance. LIPI will be considered a supplemental service. Students participating in LIPI will be expected to continue with Comprehensive Distance Learning(CDL) following the Blueprint submitted to ODE August 2020.

Describe the school's plan, including the anticipated timeline, for returning to Hybrid Learning or On-Site Learning consistent with the *Ready Schools, Safe Learners* guidance.
LIPI will be offered to small cohorts of students based on identified needs and following the LIPI guidance. LIPI will be considered a supplemental service. Students participating in LIPI will be expected to continue with Comprehensive Distance Learning(CDL) following the Blueprint submitted to ODE August 2020.

The remainder of this operational blueprint is not applicable to schools operating a Comprehensive Distance Learning Model.

ESSENTIAL REQUIREMENTS FOR HYBRID / ON-SITE OPERATIONAL BLUEPRINT

This section must be completed by any school that is providing instruction through On-Site or Hybrid Instructional Models.
Schools providing Comprehensive Distance Learning Instructional Models do not need to complete this section unless the school is implementing the Limited In-Person Instruction *provision under the Comprehensive Distance Learning guidance.*

0. Community Health Metrics

☐ The school currently meets the required metrics to successfully reopen for in-person instruction in an On-Site or Hybrid model. *If this box cannot yet be checked, the school must return to Comprehensive Distance Learning but may be able to provide some in-person instruction through the exceptions noted below.*

EXCEPTIONS FOR SPECIFIC IN-PERSON INSTRUCTION WHERE REQUIRED CONDITIONS ARE MET

☐ The school currently meets the exceptions required to provide in-person person education for students in grades K-3 (see section 0d(1) of the *Ready Schools, Safe Learners* guidance).

☒ The school currently meets the exceptions required to provide limited in-person instruction for specific groups of students (see section 0d(2) of the *Ready Schools, Safe Learners* guidance).

☐ The school currently meets the exceptions required for remote or rural schools in larger population counties to provide in-person instruction (see section 0d(3) of the *Ready Schools, Safe Learners* guidance).

☐ The school currently meets the exceptions required for smaller population counties to provide in-person instruction (see section 0d(4) of the *Ready Schools, Safe Learners* guidance).

☐ The school currently meets the exceptions required for schools in low population density counties (see section 0d(5) of the *Ready Schools, Safe Learners* guidance).

☐ The school currently meets the exceptions required for small districts to provide in-person instruction (see section 0d(6) of the *Ready Schools, Safe Learners* guidance).

1. Public Health Protocols

1a. COMMUNICABLE DISEASE MANAGEMENT PLAN FOR COVID-19

OHA/ODE Requirements	LIPI/On-Site Plan
☒ Implement measures to limit the spread of COVID-19 within the school setting. ☒ Update written Communicable Disease Management Plan to specifically address the prevention of the spread of COVID-19. ☒ Designate a person at each school to establish, implement and enforce physical distancing requirements, consistent with this guidance and other guidance from OHA. ☒ Include names of the LPHA staff, school nurses, and other medical experts who provided support and resources to the district/school policies and plans. Review relevant local, state, and national evidence to inform plan. ☒ Process and procedures established to train all staff in sections 1 - 3 of the *Ready Schools, Safe Learners* guidance. Consider conducting the training virtually, or, if in-person, ensure physical distancing is maintained to the maximum extent possible. ☒ Protocol to notify the local public health authority (LPHA Directory by County) of any confirmed COVID-19 cases among students or staff. ☒ Plans for systematic disinfection of classrooms, offices, bathrooms and activity areas. ☒ Process to report to the LPHA any cluster of any illness among staff or students. ☒ Protocol to cooperate with the LPHA recommendations. ☒ Provide all logs and information to the LPHA in a timely manner. ☒ Protocol for screening students and staff for symptoms (see section 1f of the *Ready Schools, Safe Learners* guidance). ☒ Protocol to isolate any ill or exposed persons from physical contact with others.	Measures to limit the spread of COVID-19 are outlined in this section and throughout the blueprint. The district will follow the MESD's updated communicable disease management plan. The principal of each building will be designated to implement and enforce the physical distancing requirements outlined in this document. **Health Support Staff** • Jeanne Swift - Director of Student Services • Julie Nakamura - School Nurse • Debbie Baker - School Health Assistant • Jamie Smith - MESD School Health Services Coordinator All staff participating in LIPI will be trained in health protocols virtually before LIPI begins and a refresher training will be held at least once throughout the school year. District COVID-19 Protocols Training If there is a confirmed or suspected case of COVID-19 the LIPI instructor will communicate with their supervisor. The supervisor will communicate with the superintendent and school nurse. The school nurse/MESD school health services coordinator will be responsible to notify the Local Public Health Authority (LPHA) about any confirmed COVID-19 cases among staff or students. The classrooms, offices, bathrooms and activity areas will be cleaned and disinfected based on CDC guidelines.

OHA/ODE Requirements	LIPI/On-Site Plan
☒ Protocol for communicating potential COVID-19 cases to the school community and other stakeholders (see section 1e of the *Ready Schools, Safe Learners* guidance).	The school nurse/MESD school health services coordinator will notify the LPHA if there is a cluster of illness among staff or students.
☒ Create a system for maintaining daily logs for each student/cohort for the purposes of contact tracing. This system needs to be made in consultation with a school/district nurse or an LPHA official. Sample logs are available as a part of the Oregon School Nurses Association COVID-19 Toolkit.	The district will cooperate with the LPHA by providing all logs and requested information in a timely manner and will follow the LPHA's recommendations as fully as possible. The school nurse/MESD school health services coordinator will be designated as the liaison with the LPHA.
• If a student(s) is part of a stable cohort (a group of students that are consistently in contact with each other or in multiple cohort groups) that conform to the requirements of cohorting (see section 1d of the *Ready Schools, Safe Learners* guidance), the daily log may be maintained for the cohort.	All sites will follow the staff and student screening protocols outlined in **Section 1f** of this document.
• If a student(s) is not part of a stable cohort, then an individual student log must be maintained.	Potentially infected persons will be isolated following the protocols outlined in **Section 1i** of this document.
☒ Required components of individual daily student/cohort logs include:	Communication regarding potential COVID-19 cases will follow the protocols outlined in **Section 1e** of this document.

• Child's name
    • Drop off/pick up time
    • Parent/guardian name and emergency contact information
    • All staff (including itinerant staff, district staff, substitutes, and guest teachers) names and phone numbers who interact with a stable cohort or individual student
	Contact Tracing
	 • Paper contact tracing logs will be kept for each LIPI student/cohort.
	 • Logs will follow guidance outlined in **Section 1a**
	 • LIPI instructors and office staff will be trained in the use of the contact tracing logs
	 • A paper record (including names and phone numbers) will be kept of any staff member including (itinerant staff, district staff, essential visitor or substitute teacher) who interacts with a LIPI cohort or an individual student.

☒ Protocol to record/keep daily logs to be used for contact tracing for a minimum of four weeks to assist the LPHA as needed.	• Bus drivers will complete a paper route sheet each day for each route including the required contact tracing components.
☒ Process to ensure that all itinerant and all district staff (maintenance, administrative, delivery, nutrition, and any other staff) who move between buildings keep a log or calendar with a running four-week history of their time in each school building and who they were in contact with at each site.	• Bus drivers will turn the route sheets into the transportation coordinator after each route. • The transportation coordinator will ensure daily bus rider information is properly stored for a minimum of four weeks.
☒ Process to ensure that the school reports to and consults with the LPHA regarding cleaning and possible classroom or program closure if anyone who has entered school is diagnosed with COVID-19.	• The student contact tracing information will be stored in the school health room for a minimum of four weeks.
☒ Protocol to respond to potential outbreaks (see section 3 of the *Ready Schools, Safe Learners* guidance).	• All staff including (maintenance, administrative, delivery, nutrition, etc.) who move between buildings will keep a log with a running four-week history of their time in each school building and who they were in contact with at each site.
Designate a staff member and process to ensure that the school provides updated information regarding current instructional models and student counts and reports these data in ODE's COVID-19 Weekly School Status system.	In the event that a case of COVID-19 is diagnosed the school nurse/MESD school health services coordinator will report to and coordinate with the LPHA regarding the need for classroom or building closure. The maintenance supervisor will coordinate with the school nurse/MESD school health services coordinator to ensure all cleaning protocols are followed.
	The superintendent will be the person designated to provide weekly updates to ODE regarding the district's instructional model
	Protocol for responding to potential outbreaks as outline in S**ection 3** of this document will be followed.

1b. HIGH-RISK POPULATIONS

OHA/ODE Requirements	LIPI/Onsite Plan
☒ Serve students in high-risk population(s) whether learning is happening through On-Site, Hybrid (partially On-Site and partially Comprehensive Distance Learning models), or Comprehensive Distance Learning models.	All staff and students will be given the opportunity to self-identify as high risk, vulnerable or living with a vulnerable family member. Families have the right to refuse to participate in LIPI.

OHA/ODE Requirements	LIPI/Onsite Plan
Medically Fragile, Complex and Nursing-Dependent Student Requirements ☒ All districts must account for students who have health conditions that require additional nursing services. Oregon law (ORS 336.201) defines three levels of severity related to required nursing services: 1. Medically Complex: Are students who may have an unstable health condition and who may require daily professional nursing services. 2. Medically Fragile: Are students who may have a life-threatening health condition and who may require immediate professional nursing services. 3. Nursing-Dependent: Are students who have an unstable or life-threatening health condition and who require daily, direct, and continuous professional nursing services. ☒ Staff and school administrators, in partnership with school nurses, or other school health providers, should work with interdisciplinary teams to address individual student needs. The school registered nurse (RN) is responsible for nursing care provided to individual students as outlined in ODE guidance and state law: • Communicate with parents and health care providers to determine return to school status and current needs of the student. • Coordinate and update other health services the student may be receiving in addition to nursing services. This may include speech language pathology, occupational therapy, physical therapy, as well as behavioral and mental health services. • Modify Health Management Plans, Care Plans, IEPs, or 504 or other student-level medical plans, as indicated, to address current health care considerations. • The RN practicing in the school setting should be supported to remain up to date on current guidelines and access professional support such as evidence-based resources from the Oregon School Nurses Association. • Service provision should consider health and safety as well as legal standards. • Appropriate medical-grade personal protective equipment (PPE) should be made available to nurses and other health providers. • Work with an interdisciplinary team to meet requirements of ADA and FAPE. • High-risk individuals may meet criteria for exclusion during a local health crisis. • Refer to updated state and national guidance and resources such as: • U.S. Department of Education Supplemental Fact Sheet: Addressing the Risk of COVID-19 in Preschool, Elementary and Secondary Schools While Serving Children with Disabilities from March 21, 2020. • ODE guidance updates for Special Education. Example from March 11, 2020. • OAR 581-015-2000 Special Education, requires districts to provide 'school health services and school nurse services' as part of the 'related services' in order 'to assist a child with a disability to benefit from special education.' • OAR 333-019-0010 Public Health: Investigation and Control of Diseases: General Powers and Responsibilities, outlines authority and responsibilities for school exclusion.	LIPI is considered a supplemental service. Students in high risk populations will continue to receive instruction through CDL. **If a medically fragile, medically complex or nursing dependent student participates in LIPI the following protocols will be implemented:** These students will receive services as outlined in their service plan. Staff and school administrators, in partnership with school nurses, or other school health providers, will work with interdisciplinary teams to address individual student needs. The team will work to ensure that all ADA and FAPE requirements are met. The school registered nurse (RN) is responsible for nursing care provided to individual students as outlined in ODE guidance and state law: • Communicate with parents and health care providers to determine return to school status and current needs of the student. • Coordinate and update other health services the student may be receiving in addition to nursing services. This may include speech language pathology, occupational therapy, physical therapy, as well as behavioral and mental health services. • Modify Health Management Plans, Care Plans, IEPs, or 504s or other student-level medical plans, as indicated, to address current health care considerations. • The school nurse will be supported to remain up to date on current guidelines and access professional support such as evidence-based resources from the Oregon School Nurses Association. • Service provision will consider health and safety as well as legal standards. **Staff (All)** • At least two weeks before the start of LIPI potential instructors will be surveyed as to their ability to come on-site to offer LIPI. • Staff who request to be redeployed will have the option of taking OFLMA/FMLA per union contract. • Redeployed classified staff members may continue with their CDL assignment. • Redeployed certified staff may continue with their full time CDL assignment. • Appropriate personal protective equipment (PPE) will be made available to all staff. Medical grade PPE will be made available to nurses, other medical providers and staff assigned duties that require extended close proximity to a student. **Visitors/Volunteers** • Visitors/Volunteers will be unable to work in schools, or complete other volunteer activities that require in person interaction. Adults in schools will be limited to essential personnel only. • Essential personnel are defined as persons who have an instructional or medical role.

OHA/ODE Requirements	LIPI/Onsite Plan
☒ Establish a minimum of 35 square feet per person when determining room capacity. Calculate only with usable classroom space, understanding that desks and room set-up will require use of all space in the calculation. This also applies for professional development and staff gatherings. ☒ Support physical distancing in all daily activities and instruction, maintaining six feet between individuals to the maximum extent possible. ☒ Minimize time standing in lines and take steps to ensure that six feet of distance between students is maintained, including marking spacing on floor, one-way traffic flow in constrained spaces, etc. ☒ Schedule modifications to limit the number of students in the building (e.g., rotating groups by days or location, staggered schedules to avoid hallway crowding and gathering). ☒ Plan for students who will need additional support in learning how to maintain physical distancing requirements. Provide instruction; don't employ punitive discipline. ☒ Staff should maintain physical distancing during all staff meetings and conferences, or consider remote web-based meetings.	**LIPI Room Capacity:** • A minimum of 35 square feet per person will be used when determining room capacity. • Capacity will be based on usable classroom space. • This will also apply to rooms used for professional development and staff gatherings. **LIPI Classroom Modifications**: • Extra furniture will be removed. • Fabric covered furniture will be removed (Exception - Furniture required by IEPs, 504s, student medical needs). • Students will be assigned seats to maximize physical distancing and minimize physical interactions. • Maximum occupancy signs will be posted outside classrooms. **Physical Distancing:** Six feet between individuals will be maintained in all LIPI activities and instruction to the maximum extent possible. • Time spent standing in line will be minimized and steps will be taken to ensure that six feet of physical distance is maintained as much as possible. • The floors will be marked to ensure 6 feet distancing including spacing and one-way traffic flow in the hallways. • The total number of students per room will not exceed the capacity based on 35 square feet per person. • When possible, students will enter through outside doors. • Movement of students participating in LIPI throughout the school will be limited. • With few exceptions use of the restroom will be the only reason a student would leave the LIPI classroom. • Students will use outdoor walkways when possible. • Students who struggle maintaining social distance will receive instruction/coaching. Students will not be punished.

1d. COHORTING

OHA/ODE Requirements	LIPI/Onsite Plan
☒ Where feasible, establish stable cohorts: groups should be no larger than can be accommodated by the space available to provide 35 square feet per person, including staff. • The smaller the cohort, the less risk of spreading disease. As cohort groups increase in size, the risk of spreading disease increases. ☒ Students cannot be part of any single cohort, or part of multiple cohorts that exceed a total of 100 people within the educational week. Schools should plan to limit cohort sizes to allow for efficient contact-tracing and minimal risk for exposure. Cohorts may change week-to-week, but must be stable within the educational week ☒ Each school must have a system for daily logs to ensure contract tracing among the cohort (see section 1a of the *Ready Schools, Safe Learners* guidance). ☒ Minimize interaction between students in different stable cohorts (e.g., access to restrooms, activities, common areas). Provide access to All Gender/Gender Neutral restrooms. ☒ Cleaning and disinfecting surfaces (e.g., desks, door handles, etc.) must be maintained between multiple student uses, even in the same cohort. ☒ Design cohorts such that all students (including those protected under ADA and IDEA) maintain access to general education, grade-level academic content standards, and peers.	**Stable Cohorts:** Stable LIPI cohorts will be established. • The LIPI cohort size will start out as no more than 10 and may grow to no more than 20 as LIPI is implemented. Cohorts will never be larger than the number of people that can be accommodated by the space available to provide 35 square feet per person, including staff. • LIPI cohorts may change week-to-week but will be stable within the educational week. • Daily logs/Contact tracing protocols as outlined in **Section 1a** of this document will be followed. • Students will be part of no more than two cohorts per day/week. An instructional cohort and a transportation cohort. • Students will only interact with their LIPI cohort while on on-site • Students will stay in the LIPI classroom and not access common areas or the cafeteria. • The playground will be off limits during LIPI • Students on-site for LIPI will use an assigned restroom. The restroom will be cleaned before and after the LIPI sessions. • Staff participating in LIPI in will interact with no more than three cohorts in a given day and five in a week • Staff who interact with multiple LIPI cohorts throughout the day will wash/sanitize their hands between interactions with different cohorts.

OHA/ODE Requirements	LIPI/Onsite Plan
☒ Staff who interact with multiple stable cohorts must wash/sanitize their hands between interactions with different stable cohorts.	

1e. PUBLIC HEALTH COMMUNICATION

OHA/ODE Requirements	LIPI/Onsite Plan
☒ Communicate to staff at the start of On-Site instruction and at periodic intervals explaining infection control measures that are being implemented to prevent spread of disease. ☒ Develop protocols for communicating with students, families and staff who have come into close contact with a confirmed case. • The definition of exposure is being within 6 feet of a COVID-19 case for 15 cumulative minutes (or longer). ☒ Develop protocols for communicating immediately with staff, families, and the community when a new case(s) of COVID-19 is diagnosed in students or staff members, including a description of how the school or district is responding. ☒ Provide all information in languages and formats accessible to the school community.	**Communication Guidelines:** • All LIPI instructors, bus drivers and office personnel will be trained in health protocols virtually before LIPI begins and a refresher training will be held at least once throughout the school year. District COVID-19 Protocols Training • The school nurse/MESD school health services coordinator will develop a communication to be sent to staff before beginning LIPI It will outline the infection control measures being taken and each staff member's responsibility to follow the health and safety protocols outline in this document. • Two weeks before the beginning of LIPI a letter outlining the model, the rationale and vision behind it and specific infection control measures will be shared with participating families in their requested language through print and electronically. • All communication will be posted on the district website. • Updated communication will be shared with families at least monthly or as necessary throughout the school year. • Updated communication will be included each month in the district newsletter. **In the event of a confirmed case of COVID-19 among staff or students participating in LIPI the school nurse/MESD school health services coordinator will:** • Immediately notify the LPHA. • Immediately communicate with staff and families of students who came in close contact with a confirmed case of COVID-19. Close contact is being within 6 feet of a person who has COVID-19 for at least 15 cumulative minutes in a day. • Immediately communicate with staff, families, and the community when a new case(s) of COVID-19 is diagnosed in students or staff members, including a description of how the school or district is responding. • Communication will be provided in the families' requested language.

1f. ENTRY AND SCREENING

OHA/ODE Requirements	LIPI/Onsite Plan
☒ Direct students and staff to stay home if they, or anyone in their homes or community living spaces, have COVID-19 symptoms, or if anyone in their home or community living spaces has COVID-19. COVID-19 symptoms are as follows: • Primary symptoms of concern: cough, fever (*temperature* greater than 100.4°F) or chills, shortness of breath, or difficulty breathing. • Note that muscle pain, headache, sore throat, new loss of taste or smell, diarrhea, nausea, vomiting, nasal congestion, and runny nose are also symptoms often associated with COVID-19. More information about COVID-19 symptoms is available from CDC. • In addition to COVID-19 symptoms, students should be excluded from school for signs of other infectious diseases, per existing school policy and protocols. See pages 9-12 of OHA/ODE Communicable Disease Guidance. • Emergency signs that require immediate medical attention: • Trouble breathing • Persistent pain or pressure in the chest • New confusion or inability to awaken	**Entry and Screening:** Before the beginning of LIPI, the school nurse will send communication to staff and families directing anyone who has or is living with someone who has COVID-19 symptoms to stay home. The letter will clearly outline the COVID-19 symptoms, and requirements for returning to LIPI. The following student entry screening protocols will be followed: • Parents will be asked to complete the health screening prior to bringing the student to campus. • Each student will be assigned an entrance point (a specific door) to the school building. Students will use an outdoor entry point whenever possible. • Students will go directly to their LIPI classroom. • Staff will be present at each entry point to visually screen students for symptoms and take the student's temperature. • When the screening indicates that a student may be symptomatic, the student will be directed/escorted to the school office. Protocols from the CDC will be followed as outlined in **Section 1a** of this document. Isolation protocols as outlined in **Section 1i** of this document will be followed.

OHA/ODE Requirements	LIPI/Onsite Plan
- Bluish lips or face (lighter skin); greyish lips or face (darker skin) - Other severe symptoms ☒ Screen all students and staff for symptoms on entry to bus/school every day. This can be done visually and/or with confirmation from a parent/caregiver/guardian. Staff members can self-screen and attest to their own health. - Anyone displaying or reporting the primary symptoms of concern must be isolated (see section 1i of the **Ready Schools, Safe Learners** guidance) and sent home as soon as possible. See table "*Planning for COVID-19 Scenarios in Schools."* - Additional guidance for nurses and health staff. ☒ Follow LPHA advice on restricting from school any student or staff known to have been exposed (e.g., by a household member) to COVID-19. See table "*Planning for COVID-19 Scenarios in Schools."* ☒ Staff or students with a chronic or baseline cough that has worsened or is not well-controlled with medication should be excluded from school. Do not exclude staff or students who have other symptoms that are chronic or baseline symptoms (e.g., asthma, allergies, etc.) from school. ☒ Hand hygiene on entry to school every day: wash with soap and water for 20 seconds or use an alcohol-based hand sanitizer with 60-95% alcohol.	• Transportation specific screening protocols will be followed as outlined in **Section 2i** of this document**.** • Students will wash/sanitize their hands as they enter the classroom. The following staff screening protocols will be followed: • Staff members will self-screen and attest to their own health. • Staff are required to report when they or anyone living in their home may have been exposed to COVID-19. • Staff are required to report when they have symptoms related to COVID-19. • Staff members are not responsible for screening other staff members for symptoms. • Staff members will wash/sanitize their hands upon entering the school facility. The following ongoing screening protocols will be followed: • There are many possible scenarios related to COVID-19 exposure. When a possible case or question occurs the school nurse along with district staff will consult the Planning for COVID-19 Scenarios in Schools document to decide on the correct course of action. • Frequent reminders will be sent to parents to report actual symptoms when calling students in sick as part of communicable disease surveillance. • Staff or students who have a cough that is not a new onset or worsening cough (e.g., asthma, allergies, etc.) will not be excluded from school. • Parents/guardians can provide information regarding existing conditions that cause coughing to be utilized for the purpose of screening, as previously existing coughs that are not worsening are not considered symptomatic of COVID-19.

1g. VISITORS/VOLUNTEERS

OHA/ODE Requirements	LIPI/Onsite Plan
☒ Restrict non-essential visitors/volunteers. - Examples of essential visitors include: DHS Child Protective Services, Law Enforcement, etc. - Examples of non-essential visitors/volunteers include: Parent Teacher Association (PTA), classroom volunteers, etc. ☒ Screen all visitors/volunteers for symptoms upon every entry. Restrict from school property any visitor known to have been exposed to COVID-19. See table "*Planning for COVID-19 Scenarios in Schools."* ☒ Visitors/volunteers must wash or sanitize their hands upon entry and exit. ☒ Visitors/volunteers must maintain six-foot distancing, wear face coverings, and adhere to all other provisions of this guidance.	**Visitors**: Non-essential visitors and volunteers will be unable to work in schools or participate in activities that require on-site interaction. Adults in schools will be limited to staff and essential visitors. • Examples of essential visitors include DHS Child Protective Services, Law Enforcement, etc. • Examples of non-essential visitors/volunteers include Parent Teacher Association (PTA) members, classroom volunteers, etc. • Special cases will be evaluated by the building principal to determine if the person's role requires his/her presence on-site or if an online option is available. As much as possible the default will be an online option. • Essential visitors will sign-in at the school office and a record of their interactions will be kept in order to facilitate contract tracing. • Essential visitors will be asked to self-screen for symptoms or COVID-19 exposure and have their temperature recorded during sign-in and will not be allowed to enter if symptomatic or have been exposed to someone with COVID-19. • Essential visitors must wash/sanitize their hands upon entry and exit. • Essential visitors must wear face coverings in accordance with LPHA and CDC guidelines and maintain six-foot of physical distancing. • Essential visitors will be asked to notify the school nurse if they develop symptoms of COVID-19 within 14 days of the visit.

OHA/ODE Requirements	LIPI/Onsite Plan

☒ Face coverings or face shields for all staff, contractors, other service providers, or visitors or volunteers following CDC guidelines for Face Coverings. Individuals may remove their face coverings while working alone in private offices. Face shields are an acceptable alternative when a person has a medical condition that prevents them from wearing a mask or face covering, when people need to see mouth and tongue motions in order to communicate, or when an individual is speaking to an audience for a short period of time and clear communication is otherwise not possible
 	
☒ Face coverings or face shields for all students in grades Kindergarten and up following CDC guidelines for Face Coverings. Face shields are an acceptable alternative when a person has a medical condition that prevents them from wearing a mask or face covering, when people need to see mouth and tongue motions in order to communicate, or when an individual is speaking to an audience for a short period of time and clear communication is otherwise not possible.
Face coverings should be worn both indoors and outdoors, including during outdoor recess
 	
☒ Group breaks or classroom masks breaks are not allowed. If a student removes a face covering, or demonstrates a need to remove the face covering for a short-period of time:
• Provide space away from peers while the face covering is removed. In the classroom setting, an example could be a designated chair where a student can sit and take a 15 minute "sensory break;"
  • Students should not be left alone or unsupervised;
  • Designated area or chair should be appropriately distanced from other students and of a material that is easily wiped down for disinfection after each use;
• Provide additional instructional supports to effectively wear a face covering;
• Provide students adequate support to re-engage in safely wearing a face covering;
• Students cannot be discriminated against or disciplined for an inability to safely wear a face covering during the school day.
 	
☒ Face masks for school RNs or other medical personnel when providing direct contact care and monitoring of staff/students displaying symptoms. School nurses should also wear appropriate Personal Protective Equipment (PPE) for their role.
• Additional guidance for nurses and health staff.
 	
Protections under the ADA or IDEA
☒ If any student requires an accommodation to meet the requirement for face coverings, districts and schools should limit the student's proximity to students and staff to the extent possible to minimize the possibility of exposure. Appropriate accommodations could include:
• Offering different types of face coverings and face shields that may meet the needs of the student.
• Spaces away from peers while the face covering is removed; students should not be left alone or unsupervised.
• Short periods of the educational day that do not include wearing the face covering, while following the other health strategies to reduce the spread of disease;
• Additional instructional supports to effectively wear a face covering;
	Adults:
	• All adults will be required to wear face coverings (not synonymous with facemasks) while in the school buildings following CDC Guidelines for Face Coverings.
	• Face coverings will be provided for all staff and essential visitors. Individuals may remove their face coverings while working alone in private offices.
	• Face shields are an acceptable alternative when a person has a medical condition that prevents them from wearing a mask or face covering, when people need to see mouth and tongue motions in order to communicate, or when an individual is speaking to an audience for a short period of time and clear communication is otherwise not possible.
	• Face coverings will be worn even if the staff member is behind a plexiglass barrier
	
	Students
	• Face coverings will be required for all students following CDC Guidelines for Face Coverings.
	• Face shields are an acceptable alternative when a person has a medical condition that prevents them from wearing a mask or face covering, when people need to see mouth and tongue motions in order to communicate, or when an individual is speaking to an audience for a short period of time and clear communication is otherwise not possible.
	• Face coverings will be worn both indoors and outdoors.
	• Group or whole class masks breaks will not be allowed.
	• If a student removes a face covering or demonstrates the need to remove a face covering for a short period, a space will be provided away from peers while the face covering is removed. In the classroom setting, an example could be a designated chair where a student can sit and take a 15 minute "sensory break."
	  o Students will not be left alone or unsupervised.
	  o Designated area or chair will be appropriately distanced from other students and of a material that is easily wiped down for disinfection after each use.
	• Additional instructional supports will be provided to help a student to effectively wear a face covering and re-engage with a face covering. The school counselor and school nurse will consult with the building principal and classroom teacher to decide on the supports the student may need.
	• Students will not be discriminated against or disciplined for an inability to safely wear a face covering during the school day.
	• If any student requires an accommodation to meet the requirement for face coverings a team will develop a plan to limit the student's proximity to students and staff to the extent possible to minimize the possibility of exposure.
	• Appropriate accommodations could include:
	  o Offering different types of face coverings and face shields that may meet the needs of the student.
	  o Spaces away from peers while the face covering is removed; students will not be left alone or unsupervised.
	  o Short periods of the educational day that do not include wearing a face covering, while following other health strategies to reduce the spread of disease.
	  o Additional instructional support.

OHA/ODE Requirements	LIPI/Onsite Plan
☒ For students with existing medical conditions and a physician's orders to not wear face coverings, or other health related concerns, schools/districts **must not** deny any in-person instruction.	• Students with existing medical conditions and a physician's orders to not wear face coverings, or other health related concerns will not be denied in-person instruction.
☒ Schools and districts must comply with the established IEP/504 plan prior to the closure of in-person instruction in March of 2020. • If a student eligible for, or receiving services under a 504/IEP, **cannot** wear a face covering due to the nature of the disability, the school or district must: 　1. Review the 504/IEP to ensure access to instruction in a manner comparable to what was originally established in the student's plan including on-site instruction with accommodations or adjustments. 　2. Placement determinations cannot be made due solely to the inability to wear a face covering. 　3. Plans should include updates to accommodations and modifications to support students. • Students protected under ADA/IDEA, who abstain from wearing a face covering, or students whose families determine the student will not wear a face covering, the school or district must: 　1. Review the 504/IEP to ensure access to instruction in a manner comparable to what was originally established in the student's plan. 　2. The team must determine that the disability is not prohibiting the student from meeting the requirement. 　　• If the team determines that the disability is prohibiting the student from meeting the requirement, follow the requirements for students eligible for, or receiving services under, a 504/IEP who cannot wear a face covering due to the nature of the disability, 　　• If a student's 504/IEP plan included supports/goals/instruction for behavior or social emotional learning, the school team must evaluate the student's plan prior to providing instruction through Comprehensive Distance Learning. 　3. Hold a 504/IEP meeting to determine equitable access to educational opportunities which may include limited in-person instruction, on-site instruction with accommodations, or Comprehensive Distance Learning.	Schools and districts will comply with the established IEP/504 plan prior to the closure of in-person instruction in March of 2020 or current plan if effect for the student in appropriately developed after March 2020. If a student is eligible for, or receiving services under a 504/IEP, and **cannot** wear a face covering due to the nature of the disability, the school or district will: • Review the 504/IEP to ensure access to instruction in a manner comparable to what was originally established in the student's plan including on-site instruction with accommodations or adjustments. • Placement determinations will not be made solely due to the inability to wear a face covering. • Plans will include updates to accommodations and modifications to support students. For students protected under ADA/IDEA, who abstain from wearing a face covering, or students whose families determine the student will not wear a face covering, the school or district will: • Review the 504/IEP to ensure access to instruction in a manner comparable to what was originally established in the student's plan. • The team will determine that the disability is not prohibiting the student from meeting the requirements. • If the team determines that the disability is prohibiting the student from meeting the requirement, follow the requirements for students eligible for, or receiving services under, a 504/IEP who cannot wear a face covering due to the nature of the disability, • If a student's 504/IEP plan included supports/goals/instruction for behavior or social emotional learning, the school team must evaluate the student's plan prior to providing instruction through CDL. • Hold a 504/IEP meeting to determine equitable access to educational opportunities which may include limited in-person instruction, on-site instruction with accommodations, or CDL.
☒ For students not currently served under an IEP or 504, districts must consider whether or not student inability to consistently wear a face covering or face shield as required is due to a disability. Ongoing inability to meet this requirement may be evidence of the need for an evaluation to determine eligibility for support under IDEA or Section 504.	For students not currently served under an IEP or 504, the district will consider whether or not student inability to consistently wear a face covering/shield is due to a disability. Ongoing inability to meet this requirement will be examined as possible indicator of the need for evaluation to determine eligibility for support under IDEA or section 504.
☒ If a staff member requires an accommodation for the face covering or face shield requirements, districts and schools should work to limit the staff member's proximity to students and staff to the extent possible to minimize the possibility of exposure.	**Staff** If a staff member requires an accommodation for the face covering/shield requirements, districts and schools should work to limit the staff member's proximity to students and staff to the extent possible to minimize the possibility of exposure. **School Health Personnel** The school nurse or other medical personnel will be provided with face masks and other Personal Protective Equipment (PPE) as outlined in the Guidance for Nurses and Health Staff for use when they are providing direct contact care and monitoring of staff/students displaying symptoms.

OHA/ODE Requirements	LIPI/Onsite Plan
☒ Protocols for exclusion and isolation for sick students and staff whether identified at the time of bus pick-up, arrival to school, or at any time during the school day. ☒ Protocols for screening students, as well as exclusion and isolation protocols for sick students and staff identified at the time of arrival or during the school day. • Work with school nurses, health care providers, or other staff with expertise to determine necessary modifications to areas where staff/students will be isolated. If two students present COVID-19 symptoms at the same time, they must be isolated at once. If separate rooms are not available, ensure that six feet distance is maintained. Do not assume they have the same illness. • Consider required physical arrangements to reduce risk of disease transmission. • Plan for the needs of generally well students who need medication or routine treatment, as well as students who may show signs of illness. • Additional guidance for nurses and health staff. ☒ Students and staff who report or develop symptoms must be isolated in a designated isolation area in the school, with adequate space and staff supervision and symptom monitoring by a school nurse, other school-based health care provider or school staff until they are able to go home. Anyone providing supervision and symptom monitoring must wear appropriate face covering or face shields. • School nurse and health staff in close contact with symptomatic individuals (less than 6 feet) should wear a medical-grade face mask. Other Personal Protective Equipment (PPE) may be needed depending on symptoms and care provided. Consult a nurse or health care professional regarding appropriate use of PPE. Any PPE used during care of a symptomatic individual should be properly removed and 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. • If able to do so safely, a symptomatic individual should wear a face covering. • To reduce fear, anxiety, or shame related to isolation, provide a clear explanation of procedures, including use of PPE and handwashing. ☒ Establish procedures for safely transporting anyone who is sick to their home or to a health care facility. ☒ 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 COVID-19 symptoms. Refer to table in "*Planning for COVID-19 Scenarios in Schools.*" ☒ Involve school nurses, School Based Health Centers, or staff with related experience (Occupational or Physical Therapists) in development of protocols and assessment of symptoms (where staffing exists). ☒ Record and monitor the students and staff being isolated or sent home for the LPHA review.	**Protocols for Isolation:** • A designated primary isolation area will be used for students and staff who are symptomatic. If possible, the student will wear a face covering. • Symptomatic students will remain at school until a designated adult can pick them up. • Staff will be assigned to supervise students who are symptomatic and will maintain at least six feet of distance and wear facial coverings. • Secondary isolation areas will be identified as needed. • Logs will be maintained for every student who enters the health room, regardless of whether they are treated or sent home. • School health staff who need to be in close contact with a symptomatic individual will wear appropriate PPE including a medical grade face mask. They will follow appropriate PPE removal and hand washing steps. • Students who are symptomatic when they arrive at school will be escorted to the designated isolation room and the school nurse will be notified. • When possible, students who are symptomatic before getting on the bus for arrival will not be allowed on the bus. If a parent/guardian or another designated adult is present, they will be asked to take the student home. If a parent/guardian is not at the bus stop the student will be isolated following the protocols outlined in **Section 2i** of this document. • Students and staff will be screened following protocols outlined in **Section 1f** of this document. Students who are symptomatic will be isolated following the procedures outline above. • Staff who are symptomatic will be isolated and will leave the school building as soon as possible. • Plans will be in place to serve generally well students who require medication or routine treatment. • The school nurse will follow the Additional guidance for nurses and health staff when providing care for students with complex needs. If a symptomatic individual requires transportation school health personnel will consult with the building principal, transportation coordinator, parents and/or the superintendent to arrange to safely transport the individual home or to a health care facility. In the event of an emergency the school nurse will call 911 and work with emergency medical personnel to arrange transportation to a health care facility. **Ill Staff and Students** • 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 COVID-19 symptoms. • The school nurse will communicate with the staff member or student's family regarding requirements for returning to on-site instruction. • A record of students and staff who were isolated or sent home will be available for the LPHA review. • The district will follow protocols developed by the LPHA and the CDC for allowing staff and students to return to school. ○ Symptomatic staff or students should seek COVID-19 testing from their regular physician or through the local public health authority. ○ If they have a positive COVID-19 viral (PCR) test result, the person should remain home for at least 10 days

OHA/ODE Requirements	LIPI/Onsite Plan
	after illness onset and 72 hours after fever is gone, without use of fever reducing medicine, and other symptoms are improving.
	○ Alternatively, a person who had a positive viral test may return to school when they have received two subsequent negative COVID-19 viral tests at least 24 hours apart and 72 hours have passed since the fever is gone, without 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 72 hours after the fever is gone, without use of fever reducing medicine, and other symptoms are improving.
	○ If they do not undergo COVID-19 testing, the person should remain home until 72 hours after the fever is gone, without use of fever reducing medicine, and other symptoms are improving.

2. Facilities and School Operations

Some activities and areas will have a higher risk for spread (e.g., band, choir, science labs, locker rooms). When engaging in these activities within the school setting, schools will need to consider additional physical distancing or conduct the activities outside (where feasible). Additionally, schools should consider sharing explicit risk statements for instructional and extra-curricular activities requiring additional considerations (see section 5f of the *Ready Schools, Safe Learners* guidance).

2a. ENROLLMENT
(Note: Section 2a does not apply to private schools.)

OHA/ODE Requirements	LIPI/Onsite Plan
	LIPI is considered a supplemental service and will not affect student enrollment.

2b. ATTENDANCE
(Note: Section 2b does not apply to private schools.)

OHA/ODE Requirements	LIPI/Onsite Plan
	LIPI is considered a supplemental service and will not affect student attendance records.

2c. TECHNOLOGY

OHA/ODE Requirements	LIPI/Onsite Plan
☒ Update procedures for district-owned or school-owned devices to match cleaning requirements (see section 2d of the *Ready Schools, Safe Learners* guidance). ☒ Procedures for return, inventory, updating, and redistributing district-owned devices must meet physical distancing requirements.	**Technology:** All students will be assigned a district-owned device for use in the school building. • The devices will be cleaned prior to distribution and when they are returned. • The technology coordinator will maintain procedures for return, inventory, updating, and redistributing district-owned devices. Physical distancing requirements will be maintained during distribution of devices. • Students will not share devices during the school day. • Students will have the option to take the device home for at home use. • Additional devices will be accessible for supplemental on-site use for students with broken devices or devices left at home.

OHA/ODE Requirements	LIPI/Onsite Plan
	• The supplemental devices will be cleaned/sanitized between each use. • The district will provide financial support or internet hot spots for families who do not have access to internet service.

2d. SCHOOL SPECIFIC FUNCTIONS/FACILITY FEATURES

OHA/ODE Requirements	LIPI/Onsite Plan
☒ **Handwashing:** All people on campus should be advised and encouraged to wash their hands frequently. ☒ **Equipment:** Develop and use sanitizing protocols for all equipment used by more than one individual or purchase equipment for individual use. ☒ **Events:** Cancel, modify, or postpone field trips, assemblies, athletic events, practices, special performances, school-wide parent meetings and other large gatherings to meet requirements for physical distancing. ☒ **Transitions/Hallways:** Limit transitions to the extent possible. Create hallway procedures to promote physical distancing and minimize gatherings. ☒ **Personal Property**: Establish policies for personal property being brought to school (e.g., refillable water bottles, school supplies, headphones/earbuds, cell phones, books, instruments, etc.). If personal items are brought to school, they must be labeled prior to entering school and use should be limited to the item owner.	**Handwashing:** • Age appropriate hand washing instruction will be provided at the beginning of the LIPI. This instruction will be repeated and revised periodically throughout the year. • Students and staff will wash/sanitize their hands when first entering the school building, and before and after transitioning to a new activity or location throughout the day. • Hand sanitizer will be provided when hand washing is not available. **Equipment:** • As much as possible supplies and equipment will not be shared. • All classroom supplies will be cleaned and sanitized before and after LIPI sessions following the CDC's sanitizing protocols. • Athletic practices and events will be suspended until the Oregon Health Authority(OHA) and Oregon School Activities Association (OSAA) declares it is safe to restart. Reopening guidance from those organizations will be followed. **Transitions/Hallways:** • Hallway traffic direction will be marked to show travel flow. • Line up areas will be marked with visual cues to indicate adequate physical distance. • LIPI cohorts will remain in the classroom during the session with the exception of restroom use. • LIPI cohorts will be assigned by building area/level to allow access to a single bathroom and hand washing station throughout session. **Personal Property**: • Each classroom will have a limit on the number of personal items brought into school. • Prior to beginning LIPI, a full list of allowable personal items will be sent home (e.g., refillable water bottles, school supplies, headphones/earbuds, cell phones, books, etc.). • If personal items are brought to school, they must be labeled prior to entering school and not shared with other students. • Students will not use lockers to store personal property. All personal property brought to school will be kept by the student. **Restrooms:** • Restrooms will be assigned based on LIPI cohorts. • Visual reminders will be used in all restrooms to encourage hygienic practices including: Handwashing techniques covering coughs/sneezes, social distancing, facial coverings and COVID-19 symptoms.

2e. ARRIVAL AND DISMISSAL

OHA/ODE Requirements	LIPI/Onsite Plan
☒ Physical distancing, stable cohorts, square footage, and cleaning requirements must be maintained during arrival and dismissal procedures. ☒ Create schedule(s) and communicate staggered arrival and/or dismissal times.	**Arrival and Entry:** • Clear communication will be sent to families regarding drop off and pick up protocols prior to the beginning of on-site instruction.

OHA/ODE Requirements	LIPI/Onsite Plan

☒ Assign students or cohorts to an entrance; assign staff member(s) to conduct visual screenings (see section 1f of the ***Ready Schools, Safe Learners*** guidance).
 	
☒ Ensure accurate sign-in/sign-out protocols to help facilitate contact tracing by the LPHA. Sign-in procedures are not a replacement for entrance and screening requirements. Students entering school after arrival times must be screened for the primary symptoms of concern.
   • Eliminate shared pen and paper sign-in/sign-out sheets.
   • Ensure hand sanitizer is available if signing children in or out on an electronic device.
 	
☒ Ensure alcohol-based hand sanitizer (with 60-95% alcohol) dispensers are easily accessible near all entry doors and other high-traffic areas. Establish and clearly communicate procedures for keeping caregiver drop-off/pick-up as brief as possible.
	• LIPI students will be assigned an entrance point (i.e., a specific door) to the school building.
	• Staff will be present at each entry point to visually screen students for symptoms and track cohort data.
	• Students identified as potentially symptomatic will be directed to the office following the plan outlined in **Section 1i** of this document.
	• When entering the building students will be directed to wash/sanitize their hands.
	• Parents/caregivers will not be allowed to enter the building unless there is a documented need for them to accompany the student into the school (IEP, 504, medical need).
	Sign-In /Sign-Out Procedures:
	• LIPI students entering or leaving the building at times other than arrival or dismissal will use the main building entrance.
	• Students will be asked to wash/sanitize their hands before entering the classroom or before they leave the building.
	• Face coverings will be required for any person entering the buildings.
	• All sign-in/sign-out tracking will be handled by office staff to reduce sharing of pen/paper.
	• During dismissal students will exit their classroom through an outside door when possible and will go directly to their bus or to their designated pick up spot. Students will maintain 6 feet of physical distance during this process. Staff will be assigned to supervise and ensure that masks are worn, and distance is maintained.
	• Entry and screening protocols will be followed as outlined in **Section 1f** of this document.
	• Alcohol-based hand sanitizer (with 60-95% alcohol) dispensers will be easily accessible near all entry doors, school offices and other high-traffic areas.
	• Parents/caregivers will not be allowed to enter the building unless there is a documented need for them to accompany the student into the school (IEP, 504, medical need).

2f. CLASSROOMS/REPURPOSED LEARNING SPACES

OHA/ODE Requirements	LIPI/Onsite Plan
☒ **Seating:** Rearrange student desks and other seat spaces *s*o that staff and students' physical bodies are six feet apart to the maximum extent possible while also maintaining 35 square feet per person; assign seating so students are in the same seat at all times. ☒ **Materials:** Avoid sharing of community supplies when possible (e.g., scissors, pencils, etc.). Clean these items frequently. Provide hand sanitizer and tissues for use by students and staff. ☒ **Handwashing:** Remind students (with signage and regular verbal reminders from staff) of the utmost importance of hand hygiene and respiratory etiquette. Respiratory etiquette means covering coughs and sneezes with an elbow or a tissue. Tissues should be disposed of in a garbage can, then hands washed or sanitized immediately. • Wash hands with soap and water for 20 seconds or use an alcohol-based hand sanitizer with 60-95% alcohol.	**Seating:** • Classroom desks and tables will be arranged with students being seated a minimum of six feet apart. • Students will use a single assigned seat at all times. **Materials:** • Each classroom will limit sharing of community supplies when possible (e.g., scissors, pencils, etc.). If sharing is required these items will be cleaned between each use. • Hand sanitizer and tissues will be available for use by students and staff. **Furniture:** • All upholstered furniture and soft seating will be removed from the school building unless required by IEPs, 504s, or a student's medical needs. **Classroom Procedures:** • All LIPI classes will assign a cubby or storage space for an individual student's belongings. Classes will not use shared hall/restroom passes. • Each class and hallway will have visual aids (e.g., painter's tape, stickers, etc.) to illustrate traffic flow, appropriate spacing and assigned seating areas.

OHA/ODE Requirements	LIPI/Onsite Plan

	Handwashing:
	• All students will wash/sanitize their hands upon building entry, before and after transitioning to a new activity or location, and prior to snack and lunch.
	• Additional hand washing/sanitizing opportunities will be provided throughout the school day as needed.
	• Signage at each sink/hand washing station will remind students and staff of effective handwashing practices and respiratory etiquette.
	  o Proper handwashing: Wash hands with soap and water for 20 seconds or use an alcohol-based hand sanitizer with 60-95% alcohol.
	  o Respiratory etiquette: Cover coughs and sneezes with an elbow or a tissue. Tissues should be disposed of in a garbage can, then hands washed or sanitized immediately.

2g. PLAYGROUNDS, FIELDS, RECESS, BREAKS, AND RESTROOMS

OHA/ODE Requirements	LIPI/Onsite Plan
	LIPI will not involve the use of playgrounds or fields. Staff will not use the staffrooms for breaks or meals.

2. MEAL SERVICE/NUTRITION

OHA/ODE Requirements	LIPI/Onsite Plan
	On-site meal service will not be provided during LIPI. Meal services will continue to be provided as outlined in the CDL blueprint.

2i. TRANSPORTATION

OHA/ODE Requirements	LIPI/Onsite Plan

☒ Include transportation departments (and associated contracted providers, if used) in planning for return to service.
☒ Buses are cleaned frequently. Conduct targeted cleanings between routes, with a focus on disinfecting frequently touched surfaces of the bus (see section 2j of the *Ready Schools, Safe Learners* guidance).
 	
Staff must use hand sanitizer (containing between 60-95% alcohol) in between helping each child and when getting on and off the vehicle. Gloves are not recommended; hand sanitizer is strongly preferred. If hand sanitizer is not available, disposable gloves can be used and must be changed to a new pair before helping each child.
☒ Develop protocol for loading/unloading that includes visual screening for students exhibiting symptoms and logs for contact-tracing. This should be done at the time of arrival and departure.
  • If a student displays COVID-19 symptoms, provide a face shield or face covering (unless they are already wearing one) and keep six feet away from others. Continue transporting the student.
    • The symptomatic student should be seated in the first row of the bus during transportation, and multiple windows should be opened to allow for fresh air circulation, if feasible.
    • The symptomatic student should leave the bus first. After all students exit the bus, the seat and surrounding surfaces should be cleaned and disinfected.
  • If arriving at school, notify staff to begin isolation measures.
    • If transporting for dismissal and the student displays an onset of symptoms, notify the school.
	Transportation:
	• The transportation supervisor and transportation coordinator were consulted and actively participated in planning for transportation for LIPI.
	• Before LIPI begins parents/guardians will be informed of the safety protocols and changes in the transportation system.
	• The buses will be cleaned and sanitized between cohort routes. The focus will be to disinfect frequently touched surfaces.
	• Staff will use hand sanitizer in between helping each student and getting on and off the vehicle. Gloves are not recommended; hand sanitizer is strongly preferred. If hand sanitizer is not available, disposable gloves can be used and must be changed to a new pair before helping each child.
	• Each bus driver will be trained in visual screening, physical distancing, maintaining a contact log, isolation and cleaning protocols.
	• Each bus driver will be required to:
	  o Visually screen students for illness at the time of arrival and departure.
	  o Maintain logs for contact tracing.
	  o Wear face coverings or shields.
	• If a student displays symptoms of COVID-19.
	  o A face covering will be provided if the student does not already have one. The student will be kept six feet away from others.
	  o The student will be seated in the first row that is designated for students (in order to maintain 6 feet of distance from the driver) with windows open if feasible.
	  o The student will exit the bus first. The seat and surrounding surfaces will be cleaned/sanitized.

OHA/ODE Requirements	LIPI/Onsite Plan
☒ Consult with parents/guardians of students who may require additional support (e.g., students who experience a disability and require specialized transportation as a related service) to appropriately provide service. ☒ Drivers must wear masks or face coverings while driving, unless the mask or face covering interferes with the driver's vision (e.g., fogging of eyeglasses). Drivers must wear face coverings when not actively driving and operating the bus, including while students are entering or exiting the vehicle. A face shield may be an acceptable alternative, as stated in Section 1h of the *Ready Schools, Safe Learners* guidance. ☒ Inform parents/guardians of practical changes to transportation service (i.e., physical distancing at bus stops and while loading/unloading, potential for increased route time due to additional precautions, sanitizing practices, and face coverings). ☒ Face coverings or face shields for all students in grades Kindergarten and up following CDC guidelines applying the guidance in section 1h of the *Ready Schools, Safe Learners* guidance to transportation settings.	o If arriving at school the office staff will begin isolation measures. o If transporting for dismissal and a student develops symptom during the route the bus driver will notify the person picking up the student and the school. • Bus routes will be adjusted to support cohorting students and physical distancing when possible. • As much as possible, three feet of physical distance between passengers and six feet of distance between the driver and passengers will be maintained. • Each bus will have a supply of face coverings to provide to students when needed. Students will be expected to wear a face covering following protocols outlined in **Section 1h** of this document. • Drivers will wear masks or face coverings while driving, unless the mask or face covering interferes with the driver's vision. • Drivers must wear masks or face coverings when not actively driving and operating the bus. • Students will have assigned seats. • The transportation supervisor will meet with parents/guardians of students who may require additional support (e.g., students who experience a disability and require specialized transportation as a related service) to appropriately provide service. • When feasible windows will be opened for ventilation

2j. CLEANING, DISINFECTION, AND VENTILATION

OHA/ODE Requirements	LIPI/Onsite Plan
☒ Clean, sanitize, and disinfect frequently touched surfaces (e.g. door handles, sink handles, drinking fountains, transport vehicles) and shared objects (e.g., toys, games, art supplies) between uses multiple times per day. Maintain clean and disinfected (CDC guidance) environments, including classrooms, cafeteria settings and restrooms. ☒ Clean and disinfect playground equipment at least daily or between use as much as possible in accordance with CDC guidance. ☒ Apply disinfectants safely and correctly following labeling direction as specified by the manufacturer. Keep these products away from students. ☒ To reduce the risk of asthma, choose disinfectant products on the EPA List N with asthma-safer ingredients (e.g. hydrogen peroxide, citric acid, or lactic acid) and avoid products that mix these with asthma-causing ingredients like peroxyacetic acid, sodium hypochlorite (bleach), or quaternary ammonium compounds. ☒ Schools with HVAC systems should evaluate the system to minimize indoor air recirculation (thus maximizing fresh outdoor air) to the extent possible. Schools that do not have mechanical ventilation systems should, to the extent possible, increase natural ventilation by opening windows and doors before students arrive and after students leave, and while students are present Do not prop open doors that can pose a safety or security risk to students and staff (e.g., exterior doors and fire doors that must remain closed ☒ Consider running ventilation systems continuously and changing the filters more frequently. Do <u>not</u> use fans if they pose a safety or health risk. Consider using window fans or box fans positioned in open windows to blow fresh outdoor air into the classroom via one window, and indoor air out of the classroom via another window. Fans should not be used in rooms with closed windows and doors, as this does not allow for fresh air to circulate.	**Cleaning Routines:** • All frequently touched surfaces (e.g., playground equipment, door handles, sink handles, drinking fountains, transport vehicles) and shared objects (e.g., toys, games, art supplies) will be cleaned between cohort use following CDC guidance. • Door handles, desks, and tables will be cleaned frequently and between cohorts throughout the day. • Facilities will be cleaned and disinfected at least daily to prevent transmission of the virus from surfaces. • Disinfectants will be applied correctly following labeling directions as specified by the manufacturer. The products will be kept away from the students. • To reduce the risk of asthma, choose disinfectant products on the EPA List N with asthma-safer ingredients (e.g. hydrogen peroxide, citric acid, or lactic acid) and avoid products that mix these with asthma-causing ingredients like peroxyacetic acid, sodium hypochlorite (bleach), or quaternary ammonium compounds. • Ventilation systems will be checked and maintained monthly by maintenance staff. The maintenance supervisor will research and evaluate the HVAC system and run it in a way that healthy air circulation is maximized. • The maintenance supervisor will consider the need for and most effective way to provide increased ventilation in areas where students with health care needs received medication or treatments. • Doors that can pose a safety or security risk to students and staff will not be propped open(e.g., exterior doors and fire doors that must remain closed.)

OHA/ODE Requirements	LIPI/Onsite Plan
☒ Consider the need for increased ventilation in areas where students with special health care needs receive medication or treatments. ☒ Facilities should be cleaned and disinfected at least daily to prevent transmission of the virus from surfaces (see CDC's guidance on disinfecting public spaces). ☒ Consider modification or enhancement of building ventilation where feasible (see CDC's guidance on ventilation and filtration and American Society of Heating, Refrigerating, and Air-Conditioning Engineers' guidance).	

2k. HEALTH SERVICES

OHA/ODE Requirements	LIPI/Onsite Plan
☒ OAR 581-022-2220 Health Services, requires districts to "maintain a prevention-oriented health services program for all students" including space to isolate sick students and services for students with special health care needs. While OAR 581-022-2220 does not apply to private schools, private schools must provide a space to isolate sick students and provide services for students with special health care needs. ☒ Licensed, experienced health staff should be included on teams to determine district health service priorities. Collaborate with health professionals such as school nurses; SBHC staff; mental and behavioral health providers; dental providers; physical, occupational, speech, and respiratory therapists; and School Based Health Centers (SBHC).	**Prevention Planning**: • The director of student services and school nurse will collaborate with the MESD, LPHA and district staff to maintain a prevention-oriented health services program for all students, including space to isolate sick students and services for students with special health care needs. • Licensed, experienced health staff will be included on teams to determine district health service priorities. • Services for students with existing health management issues will be maintained alongside COVID-19 specific planning (i.e. medication administration, diabetic care).

2l. BOARDING SCHOOLS AND RESIDENTIAL PROGRAMS ONLY

OHA/ODE Requirements	LIPI/Onsite Plan
	Not Applicable.

2m. SCHOOL EMERGENCY PROCEDURES AND DRILLS

OHA/ODE Requirements	LIPI/Onsite Plan
	Emergency Procedures and Drills will not be a part of LIPI. Emergency instruction will continue to be part of the CDL program.

2n. SUPPORTING STUDENTS WHO ARE DYSREGULATED, ESCALATED, AND/OR EXHIBITING SELF-REGULATORY CHALLENGES

OHA/ODE Requirements	LIPI/Onsite Plan
☒ Utilize the components of Collaborative Problem Solving or a similar framework to continually provide instruction and skill-building/training related to the student's demonstrated lagging skills. ☒ Take proactive/preventative steps to reduce antecedent events and triggers within the school environment. ☒ Be proactive in planning for known behavioral escalations (e.g., self-harm, spitting, scratching, biting, eloping, failure to maintain physical distance). Adjust antecedents where possible to minimize student and staff dysregulation. Recognize that there could be new and different antecedents and setting events with the additional requirements and expectations for the 2020-21 school year. ☒ Establish a proactive plan for daily routines designed to build self-regulation skills; self-regulation skill-building sessions can be short (5-10 minutes), and should take place at times when the student is regulated and/or is not demonstrating challenging behaviors.	**Supporting Students:** In recognition of the fact that the return to on-site instruction may prove to be a challenge to some students the director of students services will coordinate with the district counselors and mental health professionals, the school nurse, administrators, and classroom teachers to plan for supporting students who are dysregulated, escalated, and/or exhibiting self-regulatory challenges. • District staff will utilize the appropriate framework to continually provide instruction and skill-building/training related to the student's demonstrated lagging skills. • Proactive/preventative steps will be taken to reduce antecedent events and triggers within the school environment. • Be proactive in planning for known behavioral escalations (e.g., self-harm, spitting, scratching, biting, eloping, failure to maintain physical distance).

OHA/ODE Requirements	LIPI/Onsite Plan
☒ Ensure all staff are trained to support de-escalation, provide lagging skill instruction, and implement alternatives to restraint and seclusion.	• Establish a proactive plan for daily routines designed to build self-regulation skills.
☒ Ensure that staff are trained in effective, evidence-based methods for developing and maintaining their own level of self-regulation and resilience to enable them to remain calm and able to support struggling students as well as colleagues.	• Ensure all staff are trained to support de-escalation, provide lagging skill instruction, and implement alternatives to restraint and seclusion.

☒ Plan for the impact of behavior mitigation strategies on public health and safety requirements:
• Student elopes from area
  • If staff need to intervene for student safety, staff should:
    ● Use empathetic and calming verbal interactions (i.e. "This seems hard right now. Help me understand… How can I help?") to attempt to re-regulate the student without physical intervention.
    ● Use the least restrictive interventions possible to maintain physical safety for the student and staff.
    ● Wash hands after a close interaction.
    ● Note the interaction on the appropriate contact log.
  • *If unexpected interaction with other stable cohorts occurs, those contacts must be noted in the appropriate contact logs.
• Student engages in behavior that requires them to be isolated from peers and results in a room clear.
  • If students leave the classroom:
    ● Preplan for a clean and safe alternative space that maintains physical safety for the student and staff
    ● Ensure physical distancing and separation occur, to the maximum extent possible.
    ● Use the least restrictive interventions possible to maintain physical safety for the student and staff.
    ● Wash hands after a close interaction.
    ● Note the interaction on the appropriate contact log.
  • *If unexpected interaction with other stable cohorts occurs, those contacts must be noted in the appropriate contact logs.
  • Student engages in physically aggressive behaviors that preclude the possibility of maintaining physical distance and/or require physical de-escalation or intervention techniques other than restraint or seclusion. If staff need to intervene for student safety, staff should:
    ● Maintain student dignity throughout and following the incident.
    ● Use empathetic and calming verbal interactions (i.e. "This seems hard right now. Help me understand… How can I help?") to attempt to re-regulate the student without physical intervention.
    ● Use the least restrictive interventions possible to maintain physical safety for the student and staff
    ● Wash hands after a close interaction.
    ● Note the interaction on the appropriate contact log.
	• Ensure that staff are trained in effective, evidence-based methods for developing and maintaining their own level of self-regulation and resilience.
	• Plan for the impact of behavior mitigation strategies on public health and safety requirements.
	• If a student elopes and staff need to intervene for student safety, staff should:
	  o Use empathetic and calming verbal interactions (i.e. "This seems hard right now. Help me understand… How can I help?") to attempt to re-regulate the student without physical intervention.
	  o Use the least restrictive interventions possible to maintain physical safety for the student and staff.
	  o Wash hands after a close interaction.
	  o Note the interaction on the appropriate contact log.
	• If a student engages in behavior that requires them to be isolated from peers and results in a room clear, staff should:
	  o Preplan for a clean and safe alternative space that maintains physical safety for the student and staff.
	  o Ensure physical distancing and separation occur, to the maximum extent possible.
	  o Use the least restrictive interventions possible to maintain physical safety for the student and staff.
	  o Wash hands after a close interaction.
	  o Note the interaction on the appropriate contact log.
	• If a student engages in physically aggressive behaviors that preclude the possibility of maintaining physical distance and/or requires physical de-escalation or intervention techniques other than restraint or seclusion staff should:
	  o Maintain student dignity throughout and following the incident.
	  o Use empathetic and calming verbal interactions (i.e. "This seems hard right now. Help me understand… How can I help?") to attempt to re-regulate the student without physical intervention.
	  o Use the least restrictive interventions possible to maintain physical safety for the student and staff.
	  o Wash hands after a close interaction.
	  o Note the interaction on the appropriate contact log.
	• Spaces that are unexpectedly used to deescalate behaviors will be appropriately cleaned and sanitized after use before the introduction of other stable cohorts to that space.
	Protective Physical Intervention:
	• Reusable Personal Protective Equipment (PPE) will be cleaned/sanitized after every episode of physical intervention as outlined in **Section 2j** in this document.

☒ Ensure that spaces that are unexpectedly used to deescalate behaviors are appropriately cleaned and sanitized after use before the introduction of other stable cohorts to that space. **Protective Physical Intervention** ☒ Reusable Personal Protective Equipment (PPE) must be cleaned/sanitized after every episode of physical intervention (see section 2j of the *Ready Schools, Safe Learners* guidance: Cleaning, Disinfection, and Ventilation).	

3. Response to Outbreak

3a. PREVENTION AND PLANNING

OHA/ODE Requirements	LIPI/Onsite Plan
☒ Review the "*Planning for COVID-19 Scenarios in Schools*" toolkit. ☒ Coordinate with Local Public Health Authority (LPHA) to establish communication channels related to current transmission level.	**Prevention and Planning:** The Planning for COVID-19 Scenarios in Schools toolkit will be reviewed and used as a reference should any COVID-19 questions or situations arise. • The school nurse will coordinate with the LPHA and MESD to establish communication channels related to current transmission rates and will follow recommendations for communication and response to an outbreak. • No large in person district events will be planned for the year.

3b. RESPONSE

OHA/ODE Requirements	LIPI/Onsite Plan
☒ Review and utilize the "*Planning for COVID-19 Scenarios in Schools*" toolkit. ☒ Ensure continuous services and implement Comprehensive Distance Learning. ☒ Continue to provide meals for students.	**Response:** In the event of an outbreak the *Planning for COVID-19 Scenarios in Schools* toolkit will be reviewed and utilized. • If an outbreak causes LIPI to be suspended the district will continue to provide Comprehensive Distance Learning as outlined in the CDL Blueprint of August 2020 • Clear communication will be sent to families regarding the criteria that must be met in order for LIPI to resume.

3c. RECOVERY AND REENTRY

OHA/ODE Requirements	LIPI/Onsite Plan
☒ Review and utilize the "*Planning for COVID-19 Scenarios in Schools*" toolkit. ☒ Clean, sanitize, and disinfect surfaces (e.g., playground equipment, door handles, sink handles, drinking fountains, transport vehicles) and follow CDC guidance for classrooms, cafeteria settings, restrooms, and playgrounds. ☒ When bringing students back into On-Site or Hybrid instruction, consider smaller groups, cohorts, and rotating schedules to allow for a safe return to schools.	**Recovery and Reentry:** If the metrics indicate a possibility of returning to LIPI the leadership staff will review and utilize the *Planning for COVID-19 Scenarios in Schools* toolkit. • All surfaces will be cleaned/sanitize according to CDC guidance prior to returning to LIPI. • When able to return to LIPI the district will follow the plan that is outlined in this document.

ASSURANCES

This section must be completed by any public school that is providing instruction through On-Site or Hybrid Instructional Models.
Schools providing Comprehensive Distance Learning Instructional Models do not need to complete this section unless the school is implementing the** Limited In-Person Instruction **provision under the Comprehensive Distance Learning guidance.
This section does not apply to private schools.

☒ We affirm that, in addition to meeting the requirements as outlined above, our school plan has met the collective requirements from ODE/OHA guidance related to the 2020-21 school year, including but not limited to requirements from:
- Sections 4, 5, 6, 7, and 8 of the ***Ready Schools, Safe Learners*** guidance,
- The ***Comprehensive Distance Learning*** guidance,
- The ***Ensuring Equity and Access: Aligning Federal and State Requirements*** guidance, and
- ***Planning for COVID-19 Scenarios in Schools***

☐ We affirm that we cannot meet all of the collective requirements from ODE/OHA guidance related to the 2020-21 school year from:
- Sections 4, 5, 6, 7, and 8 of the ***Ready Schools, Safe Learners*** guidance,
- The ***Comprehensive Distance Learning*** guidance,
- The ***Ensuring Equity and Access: Aligning Federal and State Requirements*** guidance, and
- ***Planning for COVID-19 Scenarios in Schools***

We will continue to work towards meeting them and have noted and addressed which requirement(s) we are unable to meet in the table titled "Assurance Compliance and Timeline" below.

4. Equity

5. Instruction

6. Family, Community, Engagement

7. Mental, Social, and Emotional Health

8. Staffing and Personnel

Assurance Compliance and Timeline
If a district/school cannot meet the requirements from the sections above, provide a plan and timeline to meet the requirement.

List Requirement(s) Not Met	Provide a Plan and Timeline to Meet Requirements *Include how/why the school is currently unable to meet them*