OPERATIONAL BLUEPRINT FOR SCHOOL REENTRY 2020-21

Updated 8/11/2020

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)*** 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:

SCHOOL/DISTRICT/PROGRAM INFORMATION	
Name of School, District or Program	SOESD Long-Term Care and Treatment (LTCT) Inst #3150 Kairos New Beginnings East - Grants Pass
Key Contact Person for this Plan	Jessica Bach
Phone Number of this Person	541-776-8590
Email Address of this Person	Jessica_bach@soesd.k12.or.us
Sectors and position titles of those who informed the plan	SOESD Superintendent, SOESD Administrative Team, SOESD Staff, SOESD Reopening Advisor, Oregon Department of Education, Oregon Health Authority, Local Mental Health Providers, Local Public Health Authorities, Component Districts' Superintendents / Curriculum Directors / ELL Coordinators / Special Education Directors / Technology Directors, Local Tribes, & Families
Local public health office(s) or officers(s)	Josephine County Health District Answering Service (541) 618-4650

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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.

	Ask for Anthony Perry or Dr. Candelaria
Name of person Designated to Establish, Implement and Enforce Physical Distancing Requirements	Program Manager Nina Foster or designee SOESD Contact: Patricia Michiels,SOESD (541) 776-8590 ext. 1104 Email: patty_michiels@soesd.k12.or.us
Intended Effective Dates for this Plan	Start of the 2020-21 school year
ESD Region	SOESD

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.

> SOESD utilized a variety of stakeholder input and information sharing mechanisms, including: ● Coordination of feedback from tribes ● Survey of migrant families ● Surveys sent to parents / guardians of students in served in SOESD programs to gain feedback on Spring 2020 distance learning and school services for Fall 2020 ● Coordination of SOESD plans with component school districts ● Coordination with LPHAs and local school districts by SOESD's Reopening Advisor ● Meetings with community preschool and childcare center directors ● Meetings with EI/ECSE program coordinators in the five county region ● Survey of employees on supporting remote work and distance learning ● Planning with employees ● Meetings with leadership of employee associations ● Compilation, analysis, and sharing of state and county health statistics

3. Indicate which instructional model will be used.

   Select One:

   ☐ **On-Site Learning**   𝗫 **Hybrid Learning**   ☐ **Comprehensive Distance Learning**

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.

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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.***

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Describe why you are selecting Comprehensive Distance Learning as the school's Instructional Model for the effective dates of this plan.

The Governor has mandated that all school districts including ESDs follow the ODE Ready Schools, Safe Learners requirements which currently mandate Comprehensive Distance Learning (CDL) for all school districts and ESDs in Oregon.

In completing this portion of the Blueprint you are attesting that you have reviewed the Comprehensive Distance Learning Guidance. Here is a link to the overview of CDL Requirements. Please name any requirements you need ODE to review for any possible flexibility or waiver.

N/A

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.

SOESD aligns our plans with the plans of the districts and the communities we serve in order to provide services that meet the needs of students and families across our regional service area. To meet the needs of students, families, and districts, we are working through the details for offering limited in-person instruction opportunities under the defined exceptions to the CDL model recently released by ODE on 8/11/20. SOESD plans to offer "Hybrid" or "On-Site" models when county and statewide metrics are met. Before students are provided in-person instruction, we will update sections 1-3 of the blueprint.

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

METRICS FOR ON-SITE OR HYBRID INSTRUCTION

☐ 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	Hybrid/Onsite 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.	Kairos Communicable Disease Management Plan ● Support for this plan was provided by Josephine County Health Department, OHA, ODE and SOESD. ● The Program Manager or her designee will be responsible for establishing, implementing, and enforcing physical distancing requirements consistent with this guidance and other guidance from OHA. ● The importance and requirements of daily logs, hand hygiene, respiratory hygiene, face coverings, and physical

- ☐ 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.
- ☐ Protocol for communicating potential COVID-19 cases to the school community and other stakeholders (see section 1e of the *Ready Schools, Safe Learners* guidance).
- ☐ 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](#).
  - 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.
  - If a student(s) is not part of a stable cohort, then an individual student log must be maintained.
- ☐ Required components of individual daily student/cohort logs include:
  - Child's name
  - Drop off/pick up time
  - Parent/guardian name and emergency contact information

distancing will be covered as part of in-service training before the school year begins. All staff training will take place virtually when possible; physical distancing requirements will be followed if in person.
- Staff will follow protocol outlined in the document linked below to notify SOESD and Josephine County Health Department of confirmed COVID-10 cases among youth or staff or any cluster of any illness among students or staff. [Notifying Public Health Authority](#)

- **Protocol for systematic cleaning and disinfecting**
  - Surfaces are cleaned, then disinfected.
  - All offices, bathrooms, group areas, classrooms and other areas used by the program are disinfected at least once daily and at other times if they become contaminated. Center for Disease Control (CDC) guidelines for disinfecting public spaces are followed.
  - High touch surfaces (e.g., door handles, bathroom fixtures, etc.) are disinfected in the morning, after each bathroom use, periodically during the day and after the close of the school day by staff.
  - Other surfaces, such as desks in classrooms, will be disinfected between multiple youth uses, even if youth are in the same cohort.
  - Outdoor equipment is disinfected daily and between uses by cohorts, as applicable.
  - Ensure that spaces that are unexpectedly used to de-escalate behaviors are appropriately cleaned and sanitized after use before the introduction of other stable cohorts to that space.
  - Electronics are disinfected using wipes with at least 60% alcohol content.
  - Cleaning products are approved by the CDC for COVID-19 disinfection. Products with asthma-safer ingredients are selected whenever possible.
  - Staff are assigned specific areas they are responsible to disinfect on a daily basis and complete logs to indicate completion.
  - Staff are expected to wear applicable PPE when disinfecting and complete hand hygiene upon completion.
  - SOESD will provide all cleaning supplies and PPE. Staff will contact ESD when 1.5 weeks of supplies are left.
  - Disinfecting products are stored in locked locations at each site.
- The Program Manager is responsible for coordinating with the Josephine County Health Department in:

- All staff (including itinerant staff, district staff, substitutes, and guest teachers) names and phone numbers who interact with a stable cohort or 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.
- ☐ 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.
- ☐ 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.
- ☐ Protocol to respond to potential outbreaks (see section 3 of the **Ready Schools, Safe Learners** guidance).

- o Providing contact logs to them in a timely manner to assist with contact tracing, and
- o Cooperating with all LPHA recommendations
- All staff, youth, and essential visitors are screened daily prior to entry into the building. Staff may self-screen and attest to their own health.
  - o Teachers will screen youth at the beginning of the school day and record that the screening occurred.
  - o Staff will self-screen at the beginning of the school day and attest that they self-screened. This attestation is recorded on the sign-in sheet when they arrive on site. Kairos is responsible for keeping those sheets with the attestation.
- Individuals should be isolated when any of the following occurs:
  - o Fever of greater than 100.4° Fahrenheit or positive for any visual screening/self-assessment items
  - o Youth, staff, or essential visitors with any of the above symptoms should be sent home or isolated until they can go home. Full isolation procedures are detailed in the Isolation section below.
  - o Restrict from Kairos property any individual known to have been exposed to COVID-19.
- Staff will follow protocol outlined in the document linked below to provide families with information about prevention and possible outbreaks.
  [Letters to Families: Prevention and Information](#)

- **Cohort Logs**
  - o Kairos youth are assigned to 3 stable cohorts, and tracking will be done by cohort. The Residential Treatment Daily Cohort Tracking Log is completed each day by the education assistant. This provides the following information:
    - Name
    - If close contact (less than 6 feet of distance for 15 or more minutes) occurred with another individual
    - Staff interacting with cohort
    - Name
    - Arrival and departure date and times
    - Phone number
    - If close contact (less than 6 feet of distance for 15 or more minutes) occurred with another individual
    - Essential visitors interacting with cohort
      - o Name
      - o If close contact (less than 6 feet of distance for 15 or more minutes) occurred with another individual

- o Arrival/departure date and time and contact information is available on the Essential Visitor Health Screening Log
- Residential Treatment Daily Cohort Tracking Logs are maintained electronically and stored for a minimum of four weeks.

- The Program Manager is responsible for coordinating with the Josephine County Health Department and providing contact logs to them in a timely manner to assist with contact tracing.

- **Visitor and Itinerant Staff Logs**
    - o Office Staff maintain the daily log of entry into the building. Visitors and Itinerant Staff must enter the building at the main entry by the office. Kairos program staff will screen and accompany maintenance staff or other approved visitors (such as IT staff) that do not interact with students.
    - o Staff members can self-screen and attest to their own health. Staff members such as student teachers, itinerant staff, substitute teachers and other district staff who move between buildings are not considered visitors.
    - o Staff will complete a visual screening of visitors with the same symptom check as youth, and ask about symptoms.
    - o Office staff will ask the visitor for the information required on the daily log. Include:
        - ▪ Name
        - ▪ Contact Information (phone, address)
        - ▪ Date of Visit
        - ▪ Time of Entry and Exit
    - o If the visitor has any of the symptoms from the visual screening, they will be asked to go home and not enter the rest of the building.
- 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:
- Time in each school building
- Who they were in contact with at each site
- Daily logs will be stored in a locking filing cabinet in the main office for a minimum of 4 weeks.
- In the event of a confirmed COVID-19 case, the program will follow directions provided by the Josephine County Health Department related to additional cleaning and disinfection of the classroom and determinations about classroom closure and/or the program site. This will include: Cleaning, sanitizing, and disinfecting surfaces (e.g., playground equipment, door handles, sink handles,

| | drinking fountains, transport vehicles) and follow CDC guidance for classrooms, cafeteria settings, restrooms, and playgrounds.
- Staff will follow protocol described on the Protocol for Isolation Measures document linked below.
[Protocol for Isolation Measures](#) |

1b. HIGH-RISK POPULATIONS

OHA/ODE Requirements	Hybrid/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.
 	
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.
	Kairos does not serve students who are medically fragile or nursing dependent.

- 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.
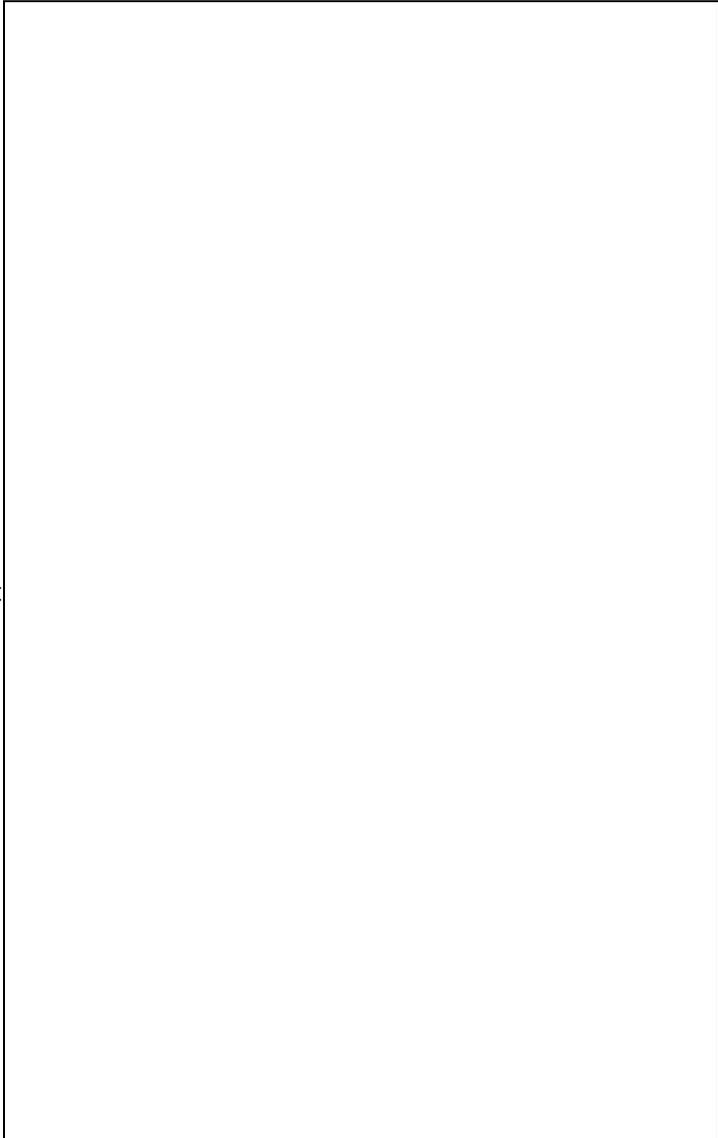
1c. PHYSICAL DISTANCING

OHA/ODE Requirements	Hybrid/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,	• All Kairos youth are assigned to 3 stable cohorts. • Rooms have been measured for usable space. Classrooms, group rooms, office spaces and other areas used by youth/staff maintain a minimum of 35 square feet of space for each individual. Furniture is excluded from available square footage. The maximum capacity is posted outside each room. • Use of upholstered furniture is minimized. • Youth, staff and essential visitors will maintain 6 feet between individuals during all daily activities and instruction to the maximum extent possible. • Interactions between cohorts will be minimized. • Standing in line for any reason will be minimized and physical distancing will be observed.

staggered schedules to avoid hallway crowding and gathering).	● Staff will maintain physical distancing during all staff meetings and conferences, and web-based meetings will be held when possible.
☐ Plan for students who will need additional support in learning how to maintain physical distancing requirements. Provide instruction; don't employ punitive discipline.	● During the school day, hallways will be assigned to cohorts to avoid cross-pollination.
☐ Staff should maintain physical distancing during all staff meetings and conferences, or consider remote web-based meetings.	o Hallways are monitored by teaching staff for cohort interaction and assigned to cohorts to minimize interaction.
	o Signs on the walls will show hallway traffic flow/cohort assignment
	o Taped arrows on floors showing traffic flow and 6 foot distance guidelines while in the hallway.

1d. COHORTING

OHA/ODE Requirements	Hybrid/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. ☐ 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. ☐ Staff who interact with multiple stable cohorts must wash/sanitize their hands between interactions with different stable cohorts.	● All Kairos youth are assigned to 3 stable cohorts. Rooms have been measured for usable space. Classrooms, group rooms, office spaces and other areas used by youth /staff maintain a minimum of 35 square feet of space for each individual. Furniture is excluded from available square footage. The maximum capacity is posted outside each room. ● The Residential Treatment Daily Cohort Tracking Log is completed each day by the education assistant. This provides the following information: o Name o If close contact (less than 6 feet of distance for 15 or more minutes) occurred with another individual o Staff interacting with cohort ▪ Name ▪ Arrival and departure date and times ▪ Phone number ▪ If close contact (less than 6 feet of distance for 15 or more minutes) occurred with another individual o Essential visitors interacting with cohort ▪ Name ▪ If close contact (less than 6 feet of distance for 15 or more minutes) occurred with another individual ▪ Arrival/departure date and time and contact information is available on the Essential Visitor Health Screening Log ● Residential Treatment Daily Cohort Tracking Logs are maintained electronically and stored for a minimum of four weeks. ● Cohort interaction is monitored to minimize interactions by the following: o Each of the 3 cohorts is assigned to a unique classroom.

	o Each of the 3 cohorts has a different break time during the school day.
	o Each of the 3 cohorts has an assigned bathroom.
	● All offices, bathrooms, group areas, classrooms and other areas used by the program are disinfected at least once daily and at other times if they become contaminated. Center for Disease Control (CDC) guidelines for disinfecting public spaces are followed.
	o High touch surfaces (e.g., door handles, bathroom fixtures, etc.) are disinfected in the morning, after each bathroom use, periodically during the day and after the close of the school day by staff.
	o Other surfaces, such as desks in classrooms, will be disinfected between multiple youth uses, even if youth are in the same cohort.
	o Outdoor equipment is disinfected daily and between uses by cohorts, as applicable.
	o Ensure that spaces that are unexpectedly used to de-escalate behaviors are appropriately cleaned and sanitized after use before the introduction of other stable cohorts to that space.
	● Staff who interact with multiple stable cohorts will wash/ sanitize their hands between interactions with different stable cohorts.

1e. PUBLIC HEALTH COMMUNICATION

OHA/ODE Requirements	Hybrid/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.	● Staff will be trained at the start of year and periodically throughout the year on 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.	● Kairos will coordinate notifications to staff, families of youth and essential visitors where exposure to COVID-19 occurred. (Exposure is defined as being within 6 feet of a COVID-19 case for 15 minutes or longer.) Notifications may be completed by staff or by the program supervisor.
● The definition of exposure is being within 6 feet of a COVID-19 case for 15 minutes (or longer).	o Staff: Notifications are made in-person or phone and email.
☐ 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.	o Families of youth: Notifications are made via phone and encrypted email or written notification.
	o Essential visitors: Notifications are made via phone and email (if known).
☐ Provide all information in languages and formats accessible to the school community.	● Notifications will preserve the PHI of the infected individual.
	● Notifications will include what actions the program is taking to address and minimize the spread of COVID-19.
	● Information will be provided in a language and format that is understandable to the recipient.
	● Staff will use the document linked below to communicate with youth, families and staff who have been exposed to a confirmed case. (Exposure is defined as being within 6 feet of a COVID-19 case for 15 minutes or longer.)

● Staff will use the script in the link below to verbally report positive cases of COVID-19 to families.
Script for Teachers/Staff-Positive Case at School

● Staff will follow guidelines and use communication tools specified for various scenarios when responding to COVID-19 related illness events in the facility. Scenarios are presented on page 7 of this document, and communication tools start on p.21.
Planning for COVID-19 Scenarios in Schools

● Families of all youth who were exposed to a person diagnosed with COVID-19, and all exposed adults, will be notified within 24 hours and advised to quarantine at home for 14 days after the date of last exposure to the COVID-19 positive contact. If additional household members become ill with COVID-19, or if the exposed person cannot avoid continued close contact, the length of quarantine may be >14 days.

1f. ENTRY AND SCREENING

OHA/ODE Requirements	Hybrid/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:
   o Trouble breathing
   o Persistent pain or pressure in the chest
   o New confusion or inability to awaken
	● All staff and youth are directed 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.
	● All staff, youth, and essential visitors are screened daily prior to entry into the building. Staff may self-screen and attest to their own health.
	● Teachers need to screen youth at the beginning of the school day and record that the screening occurred.
	● Staff need to self-screen at the beginning of the school day and attest that they self-screened. This attestation is recorded on the sign-in sheet when they arrive on site. Kairos is responsible for keeping those sheets with the attestation.
	● Screenings consist of: visual screening and self-assessment for cough, shortness of breath/difficulty breathing, and chills.
	● Staff will follow guidelines in the link below for screening (Visual and Full Screening and Student Complaint) protocol.
	Symptom Screening Tool

- o Bluish lips or face (lighter skin); greyish lips or face (darker skin) - o 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.	● Screening protocol will recognize that youth and staff who have conditions that cause chronic symptoms (e.g., asthma, allergies, etc.) should not be automatically excluded from school. **Cough is an exception**: Staff or youth 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 youth who have other symptoms that are chronic or baseline symptoms (e.g., asthma, allergies, etc.) from school. ● Youth, staff, or essential visitors with any of the above symptoms should be sent home or isolated until they can go home. Full isolation procedures are detailed in the Isolation section below. ● Staff will follow guidelines and use communication tools specified for various scenarios when responding to COVID-19 related illness events in schools. Scenarios are presented on page 7 of this document, and communication tools start on p.21. Planning for COVID-19 Scenarios in Schools ● All staff and youth will use hand hygiene upon entry each day. Upon entry into school building and/or the beginning of the school day, youth and staff will have access to the following: o Handwashing stations (i.e. sinks in the bathroom) with soap and water for 20 seconds or alcohol based hand sanitizer (with 60-95% alcohol) stations ● Handwashing strategies will be taught and signs explaining the best way to wash hands will be displayed next to hand washing stations/in bathrooms.

1g. VISITORS/VOLUNTEERS

OHA/ODE Requirements	Hybrid/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.*"	● Non-essential visitors will be restricted from entering the facility. ● All essential visitors will maintain six-foot distancing, wear face coverings, and adhere to all other hand and respiratory hygiene guidelines required of staff and youth. ● Essential visitors include staff from DHS, SOESD, OHA; family members; IT; medical staff; and maintenance staff. ● Office Staff maintain the daily log of entry into the building. Visitors and Itinerant Staff must enter the building at the main entry by the office.

☐ 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.
	o Office Staff will complete a visual screening of visitors with the same symptom check as youth, and ask about symptoms.
	o Office staff will ask the visitor for the information required on the daily log.
	  ▪ Name
	  ▪ Contact Information (phone, address)
	  ▪ Date of Visit
	  ▪ Time of Entry and Exit
	o If the visitor has any of the symptoms they will be asked to go home and not enter the rest of the building.
	o Daily logs will be stored in a locking filing cabinet in the main office for a minimum of 4 weeks.
	● All itinerant and all district staff (maintenance, administrative, delivery, nutrition, and any other staff) who move between buildings will keep a log or calendar with a running four-week history of:
	  o Time in each school building
	  o Who they were in contact with at each site

1h. FACE COVERINGS, FACE SHIELDS, AND CLEAR PLASTIC BARRIERS

OHA/ODE Requirements	Hybrid/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 coverings or face shields for all students in grades Kindergarten and up following CDC guidelines for Face Coverings.
☐ 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;"
    o Students should not be left alone or unsupervised;
    o 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;
	● The following protocol on expectations for face coverings will be communicated to parents, families, and youth at the beginning of the school year, the beginning of a youth's enrollment in the program if enrolled during the school year, and repeated as needed. The youth will be trained on this protocol.
	  o All K-12 youth, along with all staff, contractors, other service providers, or visitors or volunteers, are required to wear face coverings or face shields following CDC guidelines Face Coverings.
	  o Face coverings and face shields should be washed daily or a new covering worn daily.
	● Any youth with existing medical conditions, doctor's orders to not wear a face covering, or other health related concerns should not wear a face covering or other coverings. The program will not deny access to on-site instruction.
	● If any youth requires an accommodation to meet the requirement for face coverings, the program will work to limit the youth's proximity to other youth and staff to the extent possible to minimize the possibility of exposure.
	  o Youth will be offered different types of face coverings that may meet the needs of the youth.
	  o Youth will be offered short periods of the educational day that do not include wearing the face

- 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;

☐ 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.

☐ 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:

covering while following the other health strategies to reduce the spread of disease.
- o Youth will not be discriminated against or disciplined for an inability to wear a face covering during the school day.
- If a youth removes their mask during the school day, the following protocol will be followed:
  - o Youth will be offered the opportunity to wear a different type of face covering or face shield.
  - o Youth will be provided a chair/space away from peers while the face covering is removed for a sensory break.
  - o The designated break area will be at least six feet from other youth.
  - o The seat the youth is provided will be of a material that is easily disinfected after each use.
  - o Youth will be supervised.
  - o Youth will be provided additional instructional supports to effectively wear a face covering.
  - o Youth will not be discriminated against or disciplined for an inability to safely wear a face covering during the school day.
- School/District nurses or other medical personnel must wear medical-grade face masks and should wear appropriate Personal Protective Equipment when providing direct contact care and monitoring of staff/youth displaying symptoms.
- If a staff member cannot wear a face covering or face shield due to an existing medical condition, doctor's orders to not wear a face covering, or other health-related concerns, they should not wear a face covering or face shield. The program will work to limit the staff member's proximity to youth and staff to the extent possible to minimize the possible exposure.

- All 504/IEP plans are being reviewed to make sure students are receiving and have access to appropriate instruction and services that are meeting the goals of the student's plan. Plans will be updated or modified as needed.
- All staff have been trained and educated on face covering requirements and alternatives if a student is unable or unwilling to wear a face covering. They are also trained on strategies to support hygiene and safety practices within the school setting.

If a youth is not able to consistently wear a face mask and they are not currently served under an IEP or 504, the program will consider whether or not the student's inability to consistently wear a face covering or face shield as

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.
  o 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,
  o 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.
☐ 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.
☐ 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.
	required is due to a disability. If needed, staff will recommend an evaluation to determine eligibility for support under IDEA or Section 504.

1i. ISOLATION AND QUARANTINE

OHA/ODE Requirements	Hybrid/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 https://docs.google.com/document/d/1F7gysntDv 1ohyy_y5175DRtqRcgWbI6AeuNuBNg6BM0/edit other staff with expertise to determine necessary modifications to areas where staff/students will be isolated. If two students present COVID-19	● Staff will follow protocol described on the Protocol for Isolation Measures document below. Protocol for Isolation Measures ● All staff, youth, and essential visitors are screened daily prior to entry into the building. Staff may self-screen and attest to their own health. ● Teachers need to screen youth at the beginning of the school day and record that the screening occurred. ● Staff need to self-screen at the beginning of the school day and attest somewhere that they self-screened. This

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).

attestation is recorded on the sign-in sheet when they arrive on site. Kairos is responsible for keeping those sheets with the attestation.
- Screenings consist of: visual screening and self-assessment for cough, shortness of breath/difficulty breathing, and chills.
- Staff will use the COVID Monitoring and Tracking spreadsheet linked below to monitor students and staff being isolated or sent home.
COVID Symptom Monitoring

- Anyone developing cough, fever, chills, shortness of breath, and/or difficulty breathing while at school must be given a face covering to wear, isolated from others immediately, and sent home as soon as possible.
  o Anyone in contact with symptomatic individuals will wear medical-grade face masks and other PPE as needed. These are stored in a locked location.
  o Container for disposal of masks and PPE used by isolated individuals and school nurse/health staff located in the isolation area.
  o After removing PPE, hands will be immediately washed with soap and water for 20 seconds. If soap and water are not available, hands can be cleaned with an alcohol-based hand sanitizer that contains 60-95% alcohol.
- There is a designated space to isolate youth or staff members who develop COVID-19 symptoms. There will be supervision of youth in the isolation room by a school nurse, school-based health provider, or other staff as designated until youth can be isolated in their own room.
  o While in the isolation room, youth and supervising staff will wear facial coverings unless youth are nauseous, having trouble breathing, or are in distress.
  o To lessen anxiety, youth will be provided with clear expectations of procedures, including use of PPE and handwashing.
  o Staff will be sent home and youth will be isolated in their own room as soon as possible. The youth who is showing symptoms will be assigned a separate bathroom to use from the rest of the residential youth and staff.
  o Medical assistants will record and monitor students and staff being isolated or sent home for the Josephine County Health District LPHA review.

☐ Record and monitor the students and staff being isolated or sent home for the LPHA review.	• Medical assistants will be involved in the development of further protocols and the assessment of symptoms when available. • The message to parents is that anyone with these symptoms will be advised they must remain home for at least 10 days after the illness onset AND 24 hours after fever is gone, without the use of fever reducing medicine, and other symptoms are improving. It will also be communicated that alternatively a person may return to school after receiving a negative COVID-19 viral (PCR) test result (and if they have multiple tests, all tests are negative) and fever is gone for 24 hours, without use of fever reducing medicine, and other symptoms are improving. • There is a designated space for students to receive non-COVID-19 health services that is separate from COVID-19 isolation space.

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	Hybrid/Onsite Plan
☐ Enroll all students (including foreign exchange students) following the standard Oregon Department of Education guidelines. ☐ The temporary suspension of the 10-day drop rule does not change the rules for the initial enrollment date for students: ● The ADM enrollment date for a student is the first day of the student's actual attendance. ● A student with fewer than 10 days of absence at the beginning of the school year may be counted in membership prior to the first day of attendance, but not prior to the first calendar day of the school year. ● If a student does not attend during the first 10 session days of school, the student's ADM	The program will follow all enrollment requirements outlined in the Ready Schools Safe Learners guidance.

enrollment date must reflect the student's actual first day of attendance. ● Students who were anticipated to be enrolled, but who do not attend at any time must not be enrolled and submitted in ADM. ☐ If a student has stopped attending for 10 or more days, districts must continue to try to engage the student. At a minimum, districts must attempt to contact these students and their families weekly to either encourage attendance or receive confirmation that the student has transferred or has withdrawn from school. This includes students who were scheduled to start the school year, but who have not yet attended. ☐ When enrolling a student from another school, schools must request documentation from the prior school within 10 days of enrollment per OAR 581-021-0255 to make all parties aware of the transfer. Documentation obtained directly from the family does not relieve the school of this responsibility. After receiving documentation from another school that a student has enrolled, drop that student from your roll. ☐ Design attendance policies to account for students who do not attend in-person due to student or family health and safety concerns. ☐ When a student has a pre-excused absence or COVID-19 absence, the school district should reach out to offer support at least weekly until the student has resumed their education. ☐ When a student is absent beyond 10 days and meets the criteria for continued enrollment due to the temporary suspension of the 10 day drop rule, continue to count them as absent for those days and include those days in your Cumulative ADM reporting.	
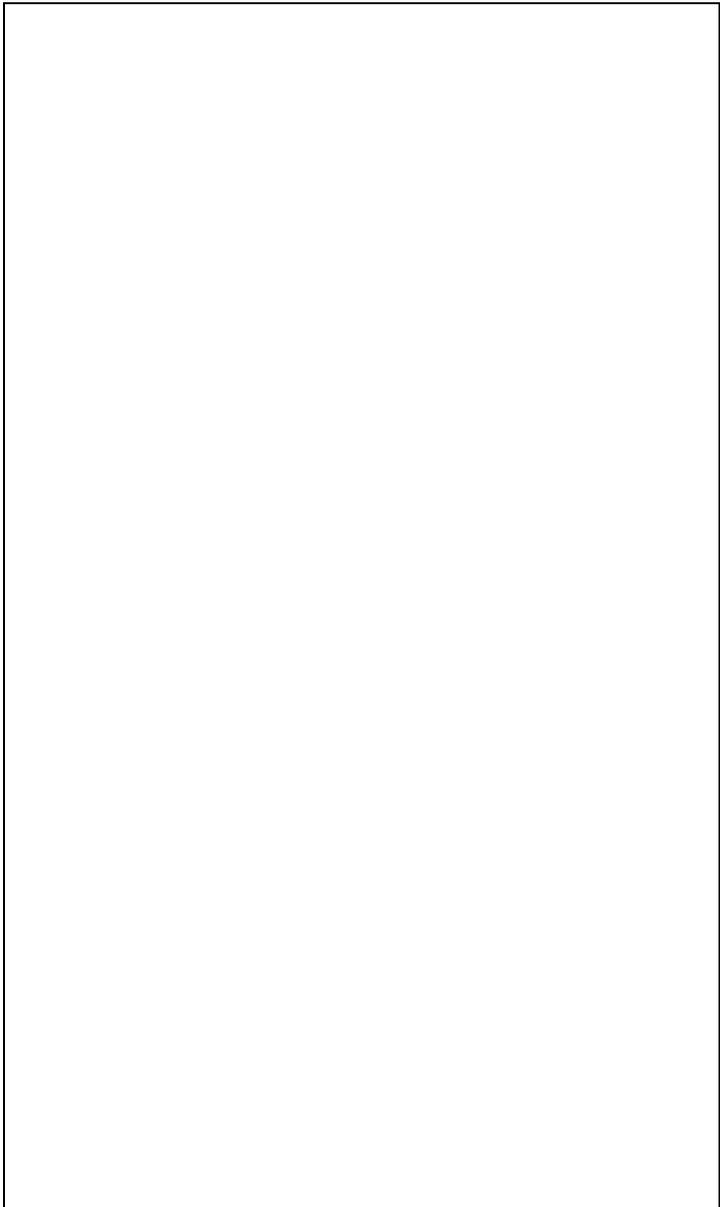
2b. ATTENDANCE
(Note: Section 2b does not apply to private schools.)

OHA/ODE Requirements	Hybrid/Onsite Plan
☐ Grades K-5 (self-contained): Attendance must be taken at least once per day for all students enrolled in school, regardless of the instructional model (On-Site, Hybrid, Comprehensive Distance Learning, online schools). ☐ Grades 6-12 (individual subject): Attendance must be taken at least once for each scheduled class that day for all students enrolled in school, regardless of the	Attendance is taken daily for all students in all grades and shared daily with SOESD. Confirmation of the visual screen for COVID-19 symptoms is included in the attendance sheet. Any student who is absent is called and their symptoms tracked in the COVID Symptom Monitoring tracker.

instructional model (On-Site, Hybrid, Comprehensive Distance Learning, online schools).
☐ Alternative Programs: Some students are reported in ADM as enrolled in a non-standard program (such as tutorial time), with hours of instruction rather than days present and days absent. Attendance must be taken at least once for each scheduled interaction with each student, so that local systems can track the student's attendance and engagement. Reported hours of instruction continue to be those hours in which the student was present.
☐ Online schools that previously followed a two check-in per week attendance process must follow the Comprehensive Distance Learning requirements for checking and reporting attendance.
☐ Provide families with clear and concise descriptions of student attendance and participation expectations as well as family involvement expectations that take into consideration the home environment, caregiver's work schedule, and mental/physical health.

2c. TECHNOLOGY

OHA/ODE Requirements	Hybrid/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.	● Electronics are disinfected using wipes with at least 60% alcohol content. ● Electronics will be cleaned daily and/or between uses by multiple youth or staff. ● Social distancing will be observed when distributing, returning, inventorying, and updating electronics.

2d. SCHOOL SPECIFIC FUNCTIONS/FACILITY FEATURES

OHA/ODE Requirements	Hybrid/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.
	● **Handwashing**
	  o Youth will complete hand hygiene at a minimum:
	    ▪ Upon arrival and dismissal
	    ▪ Prior to and after eating lunch or snacks
	    ▪ After restroom use (must wash hands with soap and water for 20 seconds)
	    ▪ Before and after using outdoor equipment or being in outdoor spaces
	    ▪ Before donning and after doffing PPE
	    ▪ After handling trash
	    ▪ After handling shared items such as play equipment, toys or supplies
	    ▪ After disposing of used Kleenex

☐ **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.

- ▪ Any other time the hands are potentially contaminated
- o Staff will complete hand hygiene at a minimum:
  - ▪ When arriving and leaving the program site
  - ▪ Before donning and after doffing PPE
  - ▪ After using the bathroom (must wash hands with soap and water for 20 seconds)
  - ▪ Prior to and after preparing meals/snacks or eating
  - ▪ After using cleaning/disinfecting products
  - ▪ After handling trash
  - ▪ After returning indoors
  - ▪ Before and after providing first aid
  - ▪ After assisting youth with toileting needs (must use soap and water for 20 seconds)
  - ▪ After handling shared items such as logs/pens
  - ▪ After disposing of used Kleenex
  - ▪ After handling materials with body fluids
  - ▪ After handling shared items such as play equipment, toys or supplies
  - ▪ Any other time the hands are potentially contaminated
  - ▪ After a de-escalation event (must use soap and water for 20 seconds)
- o All essential visitors will maintain six-foot distancing, wear face coverings, and adhere to all other hand and respiratory hygiene guidelines observed by staff and youth.

● **Equipment**
  - o Outdoor equipment is disinfected daily and between uses by cohorts, as applicable.
  - o Shared supplies and items are disinfected between uses and minimized whenever possible.
  - o Youth are provided their own supply kits (e.g., pens, markers, paper, scissors) whenever possible that are readily accessible.

● **Events**
  - o Field trips and walks off campus are not permitted.
  - o Walks and outdoor activities on campus are encouraged as long as physical distancing, face coverings/face shields and hand hygiene expectations are followed.

● **Transitions/Hallways**
  - o During the school day, hallways will be assigned to cohorts to avoid cross-pollination.
  - o Signs on the walls will show hallway traffic flow/cohort assignment
  - o Taped arrows on floors showing traffic flow and 6 foot distance guidelines while in the hallway.
  - o Interactions between cohorts will be minimized.

● **Personal Property**

| | o Youth are discouraged from bringing backpacks and personal items from home. |
| | ▪ If personal items are brought to school, they must be labeled prior to entering school and use should be limited to the item owner. |

2e. ARRIVAL AND DISMISSAL

OHA/ODE Requirements	Hybrid/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.
☐ 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.
	● All physical distancing requirements will be observed during arrival and dismissal.
	● Kairos youth are assigned to 3 stable cohorts.
	● All staff, youth, and visitors will observe hand hygiene upon arrival and dismissal.
	● The Residential Treatment Daily Cohort Tracking Log is completed each day by the education assistant.
	● All staff, youth, and essential visitors are screened daily prior to entry into the building. Staff may self-screen and attest to their own health.
	● Teachers need to screen youth at the beginning of the school day and record that the screening occurred.
	● Staff need to self-screen at the beginning of the school day and attest somewhere that they self-screened. This attestation is recorded on the sign-in sheet when they arrive on site. Kairos is responsible for keeping those sheets with the attestation.
	● Upon entry into school building and/or the beginning of the school day, youth and staff will have access to handwashing stations (i.e. sinks in the bathroom) with soap, or alcohol-based hand sanitizer (with 60-95% alcohol).
	    o Handwashing strategies will be taught and signs explaining the best way to wash hands will be displayed next to hand washing stations/in bathrooms.

2f. CLASSROOMS/REPURPOSED LEARNING SPACES

OHA/ODE Requirements	Hybrid/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.
	● **Seating**
	    o Seating is arranged to ensure six (6) feet of space between individuals.
	    o Youth have assigned desks and chairs that are labeled with their names.
	    o Rooms have been measured for usable space. Classrooms, group rooms, office spaces and other areas used by youth /staff maintain a minimum of 35 square feet of space for each individual. Furniture is excluded from available square footage. The maximum capacity is posted outside each room.
	● **Materials**

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.

- o Shared supplies and items are disinfected between uses and minimized whenever possible.
- o Youth are provided their own supply kits (e.g., pens, markers, paper, scissors) whenever possible that are readily accessible.

● **Handwashing**
- o Handwashing strategies will be taught and signs explaining the best way to wash hands will be displayed next to hand washing stations/in bathrooms.
- o Handwashing: All people on campus should be advised and encouraged to wash their hands frequently.
- o Respiratory hygiene is expected of all staff, youth, essential visitors and families of youth visiting the campus for the purpose of an outdoor family session.

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

OHA/ODE Requirements	Hybrid/Onsite Plan

☐ Keep school playgrounds closed to the general public until park playground equipment and benches reopen in the community (see Oregon Health Authority's Specific Guidance for Outdoor Recreation Organizations).
 	
☐ After using the restroom students must wash hands with soap and water for 20 seconds. Soap must be made available to students and staff.
 	
☐ Before and after using playground equipment, students must wash hands with soap and water for 20 seconds or use an alcohol-based hand sanitizer with 60-95% alcohol.
 	
☐ Designate playground and shared equipment solely for the use of one cohort at a time. Disinfect at least daily or between use as much as possible in accordance with CDC guidance.
 	
☐ Cleaning requirements must be maintained (see section 2j of the *Ready Schools, Safe Learners* guidance).
 	
☐ Maintain physical distancing requirements, stable cohorts, and square footage requirements.
 	
☐ Provide signage and restrict access to outdoor equipment (including sports equipment, etc.).
 	
☐ Design recess activities that allow for physical distancing and maintenance of stable cohorts.
 	
☐ Clean all outdoor equipment at least daily or between use as much as possible in accordance with CDC guidance.
 	
☐ Limit staff rooms, common staff lunch areas, elevators and workspaces to single person usage at a time, maintaining six feet of distance between adults.
	● Youth will complete hand hygiene at a minimum:
	   o Prior to eating lunch or snacks; youth will wash/ sanitize hands after lunch or snacks.
	   o After restroom use (must wash hands with soap and water for 20 seconds)
	   o Before and after using outdoor equipment or being in outdoor spaces
	   o Before donning and after doffing PPE
	   o After handling trash
	   o After handling shared items such as play equipment, toys or supplies
	   o After disposing of used Kleenex
	   o Any other time the hands are potentially contaminated
	● Outdoor equipment is disinfected daily and between uses by cohorts, as applicable.
	● Outdoor is designed to allow for physical distancing and maintenance of stable cohorts.
	● **Protocol for systematic cleaning and disinfecting**
	   o Surfaces are cleaned, then disinfected.
	   o All offices, bathrooms, group areas, classrooms and other areas used by the program are disinfected at least once daily and at other times if they become contaminated. Center for Disease Control (CDC) guidelines for disinfecting public spaces are followed.
	   o High touch surfaces (e.g., door handles, bathroom fixtures, etc.) are disinfected in the morning, after each bathroom use, periodically during the day and after the close of the school day by staff.

o Other surfaces, such as desks in classrooms, will be disinfected between multiple youth uses, even if youth are in the same cohort.
o Outdoor equipment is disinfected daily and between uses by cohorts, as applicable.
o Ensure that spaces that are unexpectedly used to de-escalate behaviors are appropriately cleaned and sanitized after use before the introduction of other stable cohorts to that space.
o Electronics are disinfected using wipes with at least 60% alcohol content.
o Cleaning products are approved by the CDC for COVID-19 disinfection. Products with asthma-safer ingredients are selected whenever possible.
o Staff are assigned specific areas they are responsible to disinfect on a daily basis and complete logs to indicate completion.
o Staff are expected to wear applicable PPE when disinfecting and complete hand hygiene upon completion.
o Disinfecting products are stored in locked locations at each site.
● Youth, staff and essential visitors will maintain 6 feet between individuals to the maximum extent possible.
● Each of the 3 cohorts has a different break time during the school day. Activities will be designed to maintain physical distancing protocols.
● Staff rooms, common staff lunch areas, and workspaces will be limited to single person usage at a time, maintaining six feet of distance between adults.

2h. MEAL SERVICE/NUTRITION

OHA/ODE Requirements	Hybrid/Onsite Plan
☐ Include meal services/nutrition staff in planning for school reentry.	● Meals and snacks are served individually to each youth in their cohort room by a staff member who is wearing a face covering.
☐ Prohibit self-service buffet-style meals.	● Staff and youth will not share food or drinks.
☐ Prohibit sharing of food and drinks among students and/or staff.	● Youth will remove their masks during designated meal and snack times and put them back on after.
☐ At designated meal or snack times, students may remove their face coverings to eat or drink but must maintain six feet of physical distance from others, and must put face coverings back on after finishing the meal or snack.	● Physical distancing protocols will be maintained during meal and snack times.
	● Youth will wash/sanitize their hands before meals and will be encouraged to do so after meals.
	● All items used to create and deliver meals will be cleaned daily. This includes meal touch-points.
☐ Staff serving meals and students interacting with staff at mealtimes must wear face shields or face covering (see section 1h of the **Ready Schools, Safe Learners** guidance).	● All tables will be disinfected before and after meals and snacks.

OHA/ODE Requirements	Hybrid/Onsite Plan
☐ Students must wash hands with soap and water for 20 seconds <u>or</u> use an alcohol-based hand sanitizer with 60-95% alcohol before meals and should be encouraged to do so after. ☐ Appropriate daily cleaning of meal items (e.g., plates, utensils, transport items). ☐ Cleaning and sanitizing of meal touch-points and meal counting system between stable cohorts. ☐ Adequate cleaning and disinfection of tables between meal periods. ☐ Since staff must remove their face coverings during eating and drinking, staff should eat snacks and meals independently, and not in staff rooms when other people are present. Consider staggering times for staff breaks, to prevent congregation in shared spaces.	• Since staff will remove face coverings while eating and drinking, they should eat their snacks and meals independently and not in places where other people are present.

2i. TRANSPORTATION

OHA/ODE Requirements	Hybrid/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).
☐ 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.
☐ Consult with parents/guardians of students who may require additional support (e.g., students who experience a disability and require specialized
	As a residential facility, our youth do not use transportation to get to school. In addition, all off-campus field trips have been suspended due to COVID-19 until further notice.

transportation as a related service) to appropriately provide service.

☐ Drivers wear face shields or face coverings when not actively driving and operating the bus.

☐ 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.

2j. CLEANING, DISINFECTION, AND VENTILATION

OHA/ODE Requirements	Hybrid/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.
 	
 ☐ 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, such as increasing exposure to pollen/allergies or exacerbating asthma symptoms. 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
	● **Protocol for systematic cleaning and disinfecting**
	    o Surfaces are cleaned, then disinfected.
	    o All offices, bathrooms, group areas, classrooms and other areas used by the program are disinfected at least once daily and at other times if they become contaminated. Center for Disease Control (CDC) guidelines for disinfecting public spaces are followed.
	    o High touch surfaces (e.g., door handles, bathroom fixtures, etc.) are disinfected in the morning, after each bathroom use, periodically during the day and after the close of the school day by staff.
	    o Other surfaces, such as desks in classrooms, will be disinfected between multiple youth uses, even if youth are in the same cohort.
	    o Outdoor equipment is disinfected daily and between uses by cohorts, as applicable.
	    o Ensure that spaces that are unexpectedly used to de-escalate behaviors are appropriately cleaned and sanitized after use before the introduction of other stable cohorts to that space.
	    o Electronics are disinfected using wipes with at least 60% alcohol content.
	    o Cleaning products are approved by the CDC for COVID-19 disinfection. Products with asthma-safer ingredients are selected whenever possible.
	    o Staff are assigned specific areas they are responsible to disinfect on a daily basis and complete logs to indicate completion.
	    o Staff are expected to wear applicable PPE when disinfecting and complete hand hygiene upon completion.
	    o Disinfecting products are stored in locked locations at each site and the office assistant is responsible for

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.	managing the supplies and reaching out to SOESD to order additional supplies at least a week before they are needed.
☐ 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	Hybrid/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.	● There is a designated space to isolate students or staff members who develop COVID-19 symptoms. There will be supervision of students in the isolation room by a school nurse, school-based health provider, or other staff as designated until students can go home.
☐ 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).	● There is a designated space for students to receive non-COVID-19 health services that is separate from COVID-19 isolation space.

2l. BOARDING SCHOOLS AND RESIDENTIAL PROGRAMS ONLY

OHA/ODE Requirements	Hybrid/Onsite Plan
☐ Provide specific plan details and adjustments in Operational Blueprints that address staff and student safety, which includes how you will approach: ● Contact tracing ● The intersection of cohort designs in residential settings (by wing or common restrooms) with cohort designs in the instructional settings. The same cohorting parameter limiting total cohort size to 100 people applies. ● Quarantine of exposed staff or students ● Isolation of infected staff or students ● Communication and designation of where the "household" or "family unit" applies to your residents and staff	These items are covered in other areas of the blueprint. **Congregate housing:** ● Youth are housed in single rooms. No residential dorm rooms are shared. ● Dorm rooms meet or exceed the standard of 64 square feet per resident. ● Residential density is being managed to ensure sufficient space for the isolation of sick or potentially infected individuals, as necessary.

☐ Review and take into consideration [CDC guidance](#) for shared or congregate housing:
- Not allow more than two students to share a residential dorm room unless alternative housing arrangements are impossible
- Ensure at least 64 square feet of room space per resident
- Reduce overall residential density to ensure sufficient space for the isolation of sick or potentially infected individuals, as necessary;
- Configure common spaces to maximize physical distancing;
- Provide enhanced cleaning;
- Establish plans for the containment and isolation of on-campus cases, including consideration of PPE, food delivery, and bathroom needs.
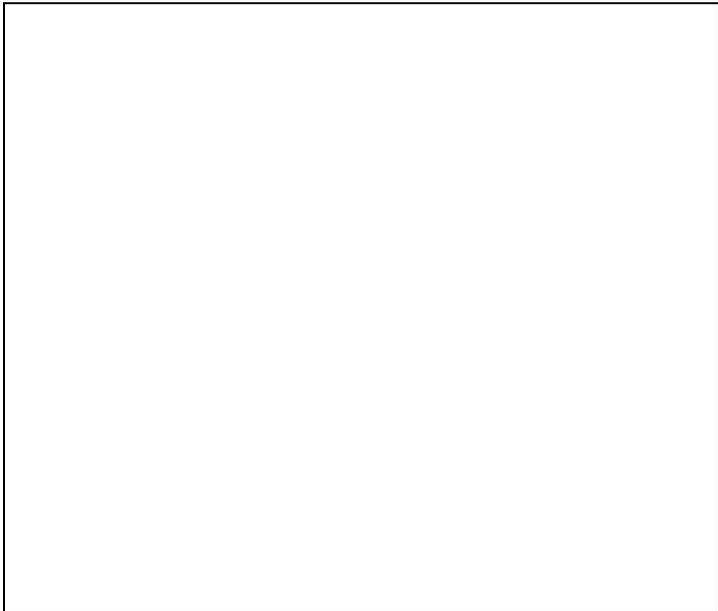
2m. SCHOOL EMERGENCY PROCEDURES AND DRILLS

OHA/ODE Requirements	Hybrid/Onsite Plan

☐ In accordance with [ORS 336.071](#) and [OAR 581-022-2225](#) all schools (including those operating a Comprehensive Distance Learning model) are required to instruct students on emergency procedures. Schools that operate an On-Site or Hybrid model need to instruct and practice drills on emergency procedures so that students and staff can respond to emergencies.
● At least 30 minutes in each school month must be used to instruct students on the emergency procedures for fires, earthquakes (including tsunami drills in appropriate zones), and safety threats.
● Fire drills must be conducted monthly.
● Earthquake drills (including tsunami drills and instruction for schools in a tsunami hazard zone) must be conducted two times a year.
● Safety threats including procedures related to lockdown, lockout, shelter in place and evacuation and other appropriate actions to take when there is a threat to safety must be conducted two times a year.
 	
☐ Drills can and should be carried out <u>as close as possible</u> to the procedures that would be used in an actual emergency. For example, a fire drill should be carried out with the same alerts and same routes as normal. If appropriate and practicable, COVID-19 physical distancing measures can be implemented, but only if they do not compromise the drill.
 	
☐ When or if physical distancing must be compromised, drills must be completed in less than 15 minutes.
	● Routine drills are conducted in a trauma-informed manner and with physical distancing taken into account.
	  ○ Fire drills occur monthly.
	  ○ Earthquake and dangerous person drills (lockout, shelter in place, evacuation, etc.) occur twice a year.
	● Thirty minutes per month is devoted to educating youth regarding essential safety drills and emergency response.
	● Time and physical distance considerations are considered and modifications made to reduce close contact and standing in line.
	  ○ When physical distancing is compromised, drills will be completed in less than 15 minutes.
	  ○ Staff will be trained on safety drills prior to the first day of school.
	● Staff and youth will complete hand hygiene after safety drills.

☐ Drills should not be practiced unless they can be practiced correctly.	
☐ Train staff on safety drills prior to students arriving on the first day on campus in hybrid or face-to-face engagement.	
☐ If on a hybrid schedule, conduct multiple drills each month to ensure that all cohorts of students have opportunities to participate in drills (i.e., schedule on different cohort days throughout the year).	
☐ Students must wash hands with soap and water for 20 seconds or use an alcohol-based hand sanitizer with 60-95% alcohol after a drill is complete.	
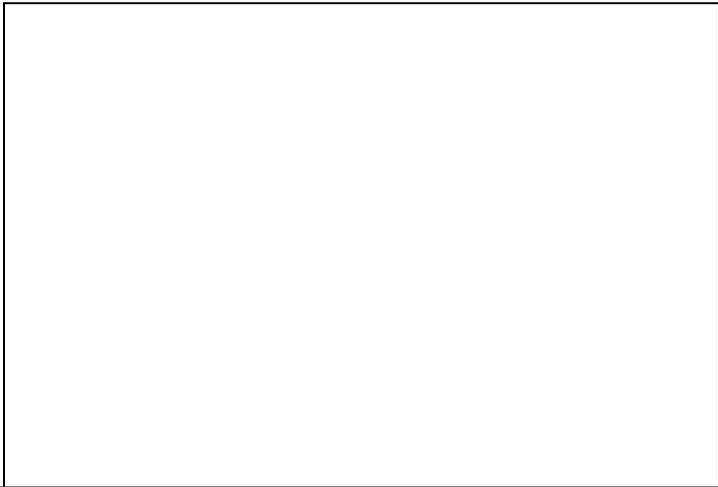
2n. SUPPORTING STUDENTS WHO ARE DYSREGULATED, ESCALATED, AND/OR EXHIBITING SELF-REGULATORY CHALLENGES

OHA/ODE Requirements	Hybrid/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.	• Staff are trained in Collaborative Problem Solving (CPS) and Crisis Prevention Institute (CPI). These principles are applied to assist youth in de-escalating through verbal intervention. Daily programming for youth includes daily routines designed to build self-regulation skills.
☐ Take proactive/preventative steps to reduce antecedent events and triggers within the school environment.	• Staff are proactive in planning for known behavioral escalations and are adjusting antecedents where possible to minimize student and staff dysregulation. Emergency Safety Interventions are avoided whenever possible.
☐ 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.	• Staff must wear a face covering, face shield or both during an event. o Staff may use other PPE such as gloves and/or aprons. • Staff and youth complete hand hygiene after the event. • After the event, the area is promptly disinfected and aired as much as possible. Interaction will be noted on the appropriate contact log, and if unexpected interaction with other stable cohorts occurs, those contacts must be noted in the appropriate contact logs.
☐ 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.	• Staff will ensure that spaces that are unexpectedly used to de-escalate behaviors are appropriately cleaned and sanitized after use before the introduction of other stable cohorts to that space.
☐ Ensure all staff are trained to support de-escalation, provide lagging skill instruction, and implement alternatives to restraint and seclusion.	• Staff are encouraged to have a spare set of clothing and face mask or face shield at the program to change into after an Emergency Safety Intervention. Hand hygiene is completed before and after changing clothes and donning/doffing face masks and face shield.
☐ 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.	• In the event of an Emergency Safety Intervention or the situation preceding the ESI poses a COVID-19 risk (e.g.: person served purposefully coughing or spitting on staff,

☐ Plan for the impact of behavior mitigation strategies on public health and safety requirements:
    ● Student elopes from area
      o 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.
  - o *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.
  - o 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.
  - o *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 (e.g., hitting, biting, spitting, kicking, self-injurious behavior).
  - o 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.

removing staff's face covering or face shield, etc.), the Clinical Director is consulted for further direction.
- Reusable Personal Protective Equipment will be cleaned/sanitized after every episode of physical intervention.

- Kairos has planned for the impact of behavior mitigation strategies on health and safety requirements. If the student engages in behavior that requires them to be isolated from peers and results in a room clear, the staff has prepared by doing the following:
  - o 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.
  - o *If unexpected interaction with other stable cohorts occurs, those contacts must be noted in the appropriate contact logs.
- If a 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 (e.g., hitting, biting, spitting, kicking, self-injurious behavior), the staff has prepared by doing the following:
  - o 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.

<table>
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- Note the interaction on the appropriate contact log.
  - o *If unexpected interaction with other stable cohorts occurs, those contacts must be noted in the appropriate contact logs.

☐ Ensure that spaces that are unexpectedly used to de-escalate 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).

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- o *If unexpected interaction with other stable cohorts occurs, those contacts must be noted in the appropriate contact logs.

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3. Response to Outbreak

3a. PREVENTION AND PLANNING

OHA/ODE Requirements	Hybrid/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.	• The day treatment program follows all regulations and guidance per the Common Protocols for COVID-19 School Scenarios as described in the most current version of Oregon Department of Education Planning for COVID-19 Scenarios in Schools. • The day treatment program will follow the protocol in the *Day Treatment Confirmed COVID-19 Communication Responsibilities and Completion Checklist* in the Kairos Communicable Disease Management Plan • to communicate with the Josephine County Health Department.

3b. RESPONSE

OHA/ODE Requirements	Hybrid/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.	• The day treatment program follows all regulations and guidance per the Common Protocols for COVID-19 School Scenarios as described in the most current version of Oregon Department of Education Planning for COVID-19 Scenarios in Schools. • Families will be notified by teaching staff about participating in Comprehensive Distance Learning with a tentative plan to return to in-person learning when allowable. • Kairos will continue to provide meals for youth.

OHA/ODE Requirements	Hybrid/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.	• The day treatment program follows all regulations and guidance per the Common Protocols for COVID-19 School Scenarios as described in the most current version of Oregon Department of Education Planning for COVID-19 Scenarios in Schools. • In the event of a confirmed COVID-19 case, the program will follow directions provided by the Josephine County Health Department related to additional cleaning and disinfection of the classroom, and determinations about classroom closure and/or the program site. This will include: Cleaning, sanitizing, and disinfecting surfaces (e.g., playground equipment, door handles, sink handles, drinking fountains, transport vehicles) and follow CDC guidance for classrooms, cafeteria settings, restrooms, and playgrounds.

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.

X   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*