

# Family Solutions

2020-21

COVID-19 COMMUNICABLE DISEASE MANAGEMENT PLAN

Residential Child Caring Agency

Facilities:

Willow House#1275

Cascade House #3653

*Updated March, 2021*

## I. PURPOSE AND SCOPE OF PLAN

The purpose of this plan is to provide guidance to facility staff during the 2020 COVID-19 pandemic related to managing this and other communicable diseases. This document will be used together with the Operational Blueprint to meet the agency’s obligation to provide high-quality services, equitable education, nutrition, health and social emotional supports during the 2020-21 school year. This plan and the Operational Blueprint will be used at weekly Residential staff meetings as guidance and a training tool for all congregate care staff.

This plan establishes health and safety protocols and applies whenever staff, students or others are in school. Family Solutions’ educational programming model for 2020–21 is the Comprehensive Distance Learning ([Roles and Responsibilities in Comprehensive Distance Learning](#)) and follows *Guidance for Education Programs in Hospitals, Pediatric Nursing Facilities, and Licensed Residential Treatment Congregate Care Settings*: Students in residential congregate care settings can be considered a specific group of students eligible for limited in-person instruction under [Ready Schools, Safe Learners](#) (see section 0d Exceptions (2)). Under that criteria, an exception to meeting state and county metrics to return to limited in-person instruction under Comprehensive Distance Learning is be prioritized under the following conditions:

- There have been no confirmed cases of COVID-19 among school staff or students in the past 14 days.
- Schools fully comply with sections 1-3 of the [Ready Schools, Safe Learners](#) guidance.
- Schools fully comply with Comprehensive Distance Learning Guidance for Limited In-Person Instruction, which includes further limitations on cohort sizes, time, and more.

This plan addresses current and anticipated future operations for the 2020–21 school year in Family Solutions’ Residential facilities and is required by ODE Guidelines, [Ready Schools, Safe Learners](#).

<b>Name of Program:</b>	Willow House #1275 Cascade House#3653
<b>Key Contact Person for this Plan:</b>	Thomas Johnson
<b>Phone Number of this Person:</b>	541-531-8078
<b>Email Address of this Person:</b>	<a href="mailto:tjohnson@solutionsor.org">tjohnson@solutionsor.org</a>

**Sectors and position titles of those who informed the Plan:**

Family Solutions Executive Director, Chief Operating Officer, Human Resources, Safety Committee Officer, Residential Program Supervisors, Teachers, Educational Assistance, Safety and Facilities Coordinator, Maintenance staff

**Local public health office(s) or officers(s):**

**Jackson County: Communicable Disease Department**

Phone: (541) 774-8209 (During business Hours)

(541) 774-8045 CD Line

(541) 618-4651 (After 5:00 pm message provides contact information for On call person)

Bonnie Simpson-COVID-19 Communicable Disease Mngmt Plan Contact

**Josephine County: Answering Service: (541) 618-4650**

Ask for Anthony Perry or Dr. David Candelaria

**Name of person Designated to Establish, Implement and Enforce Physical Distancing Requirements:**

Physical Distancing Officer: Executive Director, Thomas Johnson

Physical Distancing Site Coordinators:

#3653 Cascade House Supervisor - Amanda Pintarelli

#1275 Willow House Supervisor - Rachel Raines

**Intended Effective Dates for this Plan:** Beginning of 2020-21 School Year through June 2021

**ESD Region:** Southern Oregon Education Service District

**II. PUBLIC HEALTH PROTOCOLS — PREVENTION AND MITIGATION**

Family Solutions follows the published [Communicable Disease Guidelines](#) from the Oregon Department of Education and the Oregon Health Authority. The following measures are in place to limit the spread of COVID-19 within the school setting.

- A. Cleaning, disinfection and ventilation
- B. Face coverings, personal protective equipment (PPE)
- C. Contact Tracing
- D. Entry, screening, dismissal, contract tracing logs
- E. Physical distancing and personal hygiene
- F. Designation of physical distancing officer and site coordinator
- G. Visitors and Volunteers
- H. Isolation measures/restriction of ill or exposed persons
- I. Public health communications
- J. Signage

## **A. Cleaning, Disinfection and Ventilation**

As required by ODE's Ready Schools Safe Learners guidance, this section addresses systematic cleaning and disinfection of classrooms, work spaces, bathrooms, and activity areas. It is intended to address preventive and routine measures. It also addresses expectations about ventilation. For information about disinfection following a confirmed case of COVID-19, see Section IV of this document, Response to Confirmed Cases and/or Outbreak.

### **Cleaning and Disinfecting Products**

Only Agency-provided cleaning and disinfecting products will be used. These products will be selected from the [EPA List N](#) to reduce the risk of asthma.

Staff training and product use information will be provided. Product safety data sheets (SDS) are kept in a binder (Material Safety Data Sheets) on site in the facility main office.

Disinfectants will be applied safely and correctly following the manufacturer's labeled directions. Disinfectant products will be kept away from students.

### **Facilities Staff**

Facilities staff will have primary responsibility for daily cleaning and disinfection as outlined and will use [CDC cleaning guidelines](#). Cleaning logs are kept for twelve months in the facility main office.

Facilities staff will, not less than once per day, perform cleaning and disinfecting of all high touch points throughout the buildings, including but not limited to restrooms, common areas, door knobs, light switches, and student desks throughout the building. Cleaning logs be kept on site for twelve months. Facilities staff will continue performing disinfecting of common touch points throughout the day, to the extent possible.

Any cleaning and disinfecting needs based on known or suspected illness or when bodily fluids are present, will be addressed only by trained personnel.

### **All Staff**

All frequently touched surfaces (such as door handles and sink handles) and shared objects (such as toys, games, and art supplies) must be cleaned, sanitized and disinfected between uses multiple times a day. Cleaning and disinfecting will be done in accordance with [CDC Cleaning Guidelines](#).

Playground equipment will be cleaned at least once a day or between uses in accordance with [CDC Cleaning Guidelines](#). Playground structures will be routinely cleaned but do not need to be disinfected.

All staff will have a role in supporting cleaning and disinfection of classrooms, offices, bathrooms, activity areas and frequently touched surfaces. For example, teachers and educational assistants may be assigned to clean high touch point areas and shared objects within the classroom or other school setting. Staff will be required to clean their personal workspaces and points of contact after use, including spraying disinfectant on

restroom sinks, meeting tables, or other areas of shared furnishings or equipment (e.g. laminators, copy machines).

Disinfectant spray and towels or disinfectant wipes, with use instructions, will be made available in each classroom for staff use to periodically disinfect common touch points within the classroom. All staff-designated areas will be supplied with disinfectant spray and towels or wipes to be used throughout the day as needed/desired.

### **Technology Devices**

Distribution of devices:

- Device will be prepped by staff wearing PPE
- Device will be wiped down using a technology-compatible wipe as necessary
- Device will be placed in a container for distribution to student
- Device is assigned to student and to be used as their personal device for the school year
- The device will be placed in a container, and subsequently prepped and cleaned by staff wearing PPE. Staff will clean the device pre- and post-prep and before returning it to the student.

### **Ventilation**

- The Agency facilities staff will operate and maintain all HVAC and ventilation systems so that they continue to function properly. When needed, modifications will be made to HVAC and ventilation systems to increase air dilution and filtration. In addition, HEPA air filters ([EPA Air filters](#)) are placed in classrooms and other common areas and are replaced as necessary to ensure proper functioning of the system.
- Ventilation systems will be checked and maintained by maintenance staff on a regular basis. The Agency will consider modifications or enhancements of building ventilation and filtration systems where feasible, following current guidance. All intake ports that provide outside air to the HVAC system are cleaned, maintained and cleared of any debris that may affect the function and performance of the ventilation system quarterly.

### **B. Face Coverings, Personal Protective Equipment**

Family Solutions maintains a sufficient inventory of face coverings including medical grade disposable masks, gloves, aprons, gowns, shoe coverings, and alcohol-based hand sanitizer with 60-95% alcohol. Hand sanitizer is easily accessible near all entry doors and other high-traffic areas.

It is established that asymptomatic people can spread the virus that causes COVID-19, and this is a significant contributor to person-to-person spread. Face coverings decrease the spread of COVID-19 as “source control” of a contagious person’s respiratory secretions. Use of face coverings does not change physical distancing requirements.

Instructions on how to wear face coverings can be found at [CDC Face Covering Guidance](#).

## Staff

Face coverings or other CDC-approved alternatives are required for all staff in accordance with guidance at [CDC Face Coverings Guidance](#).

- Staff must wear face coverings in common areas, when interacting with students or the public.
- Staff will wear masks unless they have a medical note that excuses them.
- Staff who refuse to wear appropriate face coverings will be referred to Human Resources, 541-414-1720.
  - For staff, contractors, other service providers, and essential visitors:
    - Face shields are an acceptable alternative to masks only when a person has a medical condition that prevents them from wearing a mask, or when people need to see mouth and tongue motions in order to communicate, or when a person is speaking to an audience for a short period of time and clear communication is otherwise not possible.
  - **Medical-grade face masks (available at the Administrative Support desk of each Residential facility) are required for personnel assigned to provide direct close contact and personal care (within six feet) of students or staff displaying symptoms.**
  - ADA accommodations: A staff member requiring accommodation for the face covering requirement should contact Human Resources at 541-414-1720.
  - The Agency will supply disposable face coverings for use by essential visitors and staff as requested. Staff is encouraged to use a cleanly washed face covering each day. Some staff may be required to wear clear plastic face covering; if required, the Agency will provide the staff with one upon a staff's request.

Staff using clear plastic masks will be provided supplies to complete daily cleaning of the plastic mask.

## Students

Students must wear face coverings at all times when at school, on school-provided transportation, or participating in school activities.

- For students, kindergarten and older:
  - Face shields are an acceptable alternative only when a student has a medical condition that prevents them from wearing a mask, or when people need to see their mouth and tongue motions in order to communicate.
- Students/families refusing to wear appropriate face coverings for a values-based reason must have their educational needs met through Comprehensive Distance Learning. However, additional provisions do apply to students protected under ADA and IDEA.
- If a student removes a face covering, or demonstrates a need to remove the face covering for a short period of time, the educational team must:
  - Provide space away from peers while the face covering is removed; students should not be left alone or unsupervised
  - Provide additional instructional supports to effectively wear a face covering
  - Provide students adequate support to re-engage in safely wearing a face covering
  - Students cannot be discriminated against or disciplined for an inability to safely wear a face covering during the school day
- Students needing accommodations for face coverings:
  - If any student requires an accommodation to meet the requirement for face coverings, Educational staff will work to 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 or CDC-approved alternatives 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
- Students with medical conditions
  - The Agency may not deny access to on-site instruction for students with existing medical conditions, doctor's orders to not wear face coverings, or other health-related concerns.
- IEP and 504 compliance

- If students eligible for or receiving services under a 504 Plan or IEP cannot wear a face covering due to the nature of their disability, the school must review the IEP or 504 plan and take the additional steps outlined in [Ready Schools, Safe Learners](#) Section 1h.
- Staff must consider implications for students who are not currently eligible for or receiving services under 504 or IDEA who demonstrate an inability to consistently wear a face covering as required. Teachers should alert the SOESD administrator in such cases.

### **C. Contact Logs**

Staff will maintain contact logs of all visitors, students, staff, contractors and others, entering a facility at any time, or engaged in Family Solutions activities on Agency premises. The records will be maintained for a minimum of two months in a secure and confidential location. The Agency will support Jackson and Josephine County LPHA in contact tracing. Family Solutions will submit all contact log information and forms to the Local Public Health Agency (LPHA) as requested within 24 hours.

### **D. Entry, Screening, Dismissal, Contact Logs**

#### **Staff**

Staff is required to conduct a self-check of health and potential exposure before entering sites, and to answer the following questions on a sign-in sheet:

- Have you had close contact with, or do you live with anyone currently ill and diagnosed with COVID-19?
- Are you currently sick or are you experiencing any COVID-19 related symptoms? See symptoms [from the CDC](#)
- Do you have a fever? [CDC Fever Definition](#)
  - If the answer is “yes” to any of the above questions, the staff is to stay home or go home.
- Effective March 1, 2021, staff members who develop symptoms consistent with COVID-19 while at school may verbally grant consent to test and will immediately be tested. Regardless of the test results, the staff member will leave school immediately and will not return until allowed by [Ready Schools, Safe Learners](#) guidance.
- Family Solutions COVID-19 Testing Protocol aligns with guidance in [COVID-19 Testing in Oregon K-12 Schools](#).
- [FS Residential COVID-19 Testing Protocol](#)
  - Primary symptoms of concern: cough, fever of 100.4 or more, new loss of taste or smell, 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.



Staff will also be excluded from school for signs of other infectious diseases. See [OHA/ODE Communicable Disease Guidance](#)

### Emergency Care

**COVID-19 is known to require emergency care in some cases. Emergency signs requiring immediate medical attention include:**

- **Trouble breathing**
- **Persistent pain or pressure in the chest**
- **New confusion or inability to awaken**
- **Bluish lips or face (lighter skin): greyish lips or face (darker skin)**
- **Other severe symptoms**

**Staff will call 911 for emergency services should they see a student or staff member exhibiting emergency signs of COVID-19.**

All Agency Itinerant Staff/staff who move between buildings or community locations (including but not limited to facilities, courier, and administrative staff) will use the [FS Itinerant Staff Contact Log](#) to record visits. On a daily basis, these logs are submitted to the Safety and Facility Coordinator for filing. The logs are kept for two months and may be needed for contact tracing.

- Location
- Date of visit
- Arrival time
- Departure time
- Location within the building, if appropriate
- Names of individuals interacted with during the visit
- Contact information

All itinerant and district staff (maintenance, administrative, delivery, nutrition, and any other staff) who move between buildings must keep a log or calendar with a running 4-week history that includes the dates and times they were in the facility and who they were in contact with at the facility.

### Students

Students will be visually screened at the beginning of each school day. The [Cascade House Classroom Daily Symptom Tracker Log](#) or the [Willow House Classroom Daily Symptom Tracker Log](#) will document screenings. Educational staff will perform screenings and submit a copy of the log to the facility Administrative Assistant for filing. The records will be maintained for a minimum of two months in a secure and confidential location. If a student displays or reports COVID-19 symptoms, or other signs of infectious diseases, an immediate isolation of the student will go into effect.

- Effective March 1, 2021, when a student develops symptoms consistent with COVID-19 while at school and the school has a consent form on file, the student will immediately be tested.

Regardless of the test results, the student will be isolated/quarantined immediately and will not return to class until allowed by [Ready Schools, Safe Learners](#) guidance.

- Under OHA's CLIA waiver, the Abbott BinaxNOW test may only be used to test:
  - Students or staff with symptoms consistent with COVID-19
  - Students or staff in exposed cohorts; when recommended by the local public health authority, testing may be used in order to facilitate early release from quarantine.
- Tests are to be administered to students or staff who are on campus only. Symptomatic individuals will not be asked to come to school specifically for testing.
- Test kits are intended to test symptomatic and exposed students and staff only and should not be used to screen asymptomatic individuals or those without a known exposure to COVID-19.
- The test requires a shallow nasal swab which **must** be self-administered under observation. If a student or staff member is not able to self-collect the specimen under observation, the school testing administrator should refer the student or staff member to their healthcare provider for COVID-19 testing.
- Tests can be administered by any person who has completed all of the required training including this [video](#) by Dr. Susan Coffin which provides an excellent overview of the Abbott BinaxNOW testing process from start to finish and the [Abbott BinaxNOW training modules](#) prior to performing tests.
  - Module 1: Getting Started
  - Module 2: Quality Control
  - Module 3: Specimen Collection and Handling
  - Module 4: Patient (Individual) Test
- School testing administrators should wear the following components:
  1. A disposable medical-grade surgical mask (an N95 respirator is not needed)
  2. Reusable eye protection (goggles or face shield)
  3. Disposable gloves.
    - Before collecting the specimen(s) for testing, personal protective equipment (PPE) should be put on in the following order:
      1. Perform hand hygiene by washing hands with soap and water or using an alcohol-based hand sanitizer.
      2. Remove cloth face mask and put on medical-grade mask.
      3. Put on face shield or goggles.
      4. Put on disposable gloves.
    - Best practice recommendations for PPE use include:
      - Medical-grade mask and eye protection should cover the eyes, nose, and mouth at all times.
      - Staff must perform hand hygiene before and after touching, readjusting, or taking off mask or eye protection.
    - When multiple people are being tested in one time period, the same medical-grade mask and eye protection can be worn during multiple specimen collection events (e.g., in the case of group testing).

- Gloves should be changed after each test is completed. A new pair of disposable gloves should be worn for each test performed.
- After all specimens have been collected and all tests have been completed, PPE should be taken off in the following order:
  1. Remove gloves and discard into a trash can.
  2. Perform hand hygiene by washing hands with soap and water or using an alcohol-based hand sanitizer.
  3. Remove face shield or goggles by carefully grabbing the strap and pulling upwards and away from the head without touching the front of the face shield or goggles.
  4. Put on a new pair of disposable gloves.
  5. Clean and disinfect eye protection following manufacturer labeling directions. If manufacturer directions aren't available, follow the guidelines found in [COVID-19 Testing in Oregon K-12 Schools](#).
  6. Remove gloves and discard into a trash can.
  7. Perform hand hygiene by washing hands with soap and water or using an alcohol-based hand sanitizer.
  8. Put away clean eye protection in a bag or container labeled with your name.
  9. Remove medical-grade mask by carefully untying or unhooking and pulling away from the face without touching the front of the mask.
  10. Perform hand hygiene by washing hands with soap and water or using an alcohol-based hand sanitizer.
  11. Put on your personal non-medical face covering.
- Eye protection and storage bag/container should be labeled with staff name to prevent sharing and should not be stored with other belongings or other PPE.
- Specimens must be collected by the person being tested, under observation by the school testing administrator.
- All components of the test kit should be discarded into a trash can. Additional information about the proper disposal of medical waste exposed to COVID-19 may be found [here](#).
- Results of each test must be promptly logged in the [Abbott BinaxNOW Testing Log](#).
- OHA requires all COVID-19 test results, both positive and negative, to be reported daily. Schools must submit all test results through the [OHA K-12 Reporting Portal](#).
- All positive cases should be reported immediately to the local public health authority.
  - Jackson County Communicable Disease Department  
(541) 774-8209 (during business hours)  
(541) 618-4651 (after 5:00 pm message provides contact information for on call)
  - Josephine County  
Answering Service (541) 618-4650 - Anthony Perry or Dr. David Candelaria
- School testing administrators **must** follow the instructions provided in the Abbott BinaxNOW package insert regarding test storage, quality control, specimen collection and handling, and specimen disposal as detailed [here](#).
- Student test results will be shared with the student and their parent/guardian/caregiver only.
- Staff test results will be shared with the staff member only.
- When a school cohort has been exposed to a case of COVID-19 and quarantined, testing on

day 5 through 7 following exposure may be used to facilitate early release from quarantine after day 7 when recommended by the local public health authority.

- Test kits (test cards and reagent) must be stored at room temperature (between 59 and 86°F).
- Each time an Abbott BinaxNOW test is performed, the school testing administrator must verify that the built-in quality controls are functional. There are two built-in quality controls described in [COVID-19 Testing in Oregon K-12 Schools](#).
  - Primary symptoms of concern: cough, fever of 100.4 or more, new loss of taste or smell, 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 the CDC](#)
    - Students will also be excluded from school for signs of other infectious diseases. See [OHA/ODE Communicable Disease Guidance](#)
    - Baseline / chronic coughs: Students with a chronic or baseline cough that has worsened or is not well-controlled with medication will be excluded from school. Students who have other symptoms that are chronic or baseline symptoms (e.g., asthma, allergies, etc.) will not be excluded. Pre-existing chronic conditions are documented in the student's health history.
- Staff will refer to the [Planning for COVID-19 Scenarios in Schools](#) and the [COVID-19 Exclusion Summary Guide](#) to determine whether staff or students are able to attend class or must be isolated, quarantined, or sent home. For further guidance, staff will refer to [Planning for COVID-19 Scenarios in Schools](#).
  - For further guidance, staff will refer to the [School Decision Tree and Definitions](#) developed by Jackson County Health Department for Jackson, Josephine, and Klamath Counties.

## **E. Physical Distancing and Personal Hygiene**

Staff and students are expected to:

- Maintain a distance of at least 6 feet from others.
- Wear face coverings at all times when at school, indoors and outdoors (including during recess), or participating in school activities.
- Staff must maintain physical distancing during all staff meetings, professional development activities, and conferences.

- Wash hands with soap and water for 20 seconds or use an alcohol-based hand sanitizer with 60–95% alcohol on entry to school or work site every day
- Clean hands frequently, and avoid touching eyes, nose, or mouth with gloves or unwashed hands. Key times to clean hands include:
  - After blowing one’s nose, coughing, or sneezing
  - After using the restroom
  - Before eating or preparing food
  - Before and after going outside
- Use respiratory etiquette and hand hygiene. Respiratory etiquette means covering coughs and sneezes with an elbow or tissue. Tissues should be disposed of in a garbage can, then hands washed or sanitized.

### **Physical Distancing in Classrooms**

Family Solutions has established a minimum of 35 square feet per person when determining room capacity, calculating only usable classroom space, understanding that desks and room setup will require use of all space in the calculation. This also applies for program based professional development and staff gatherings.

Educational staff will:

- Support physical distancing in all daily activities and instruction, maintaining at least 6 feet between individuals to the maximum extent possible. For example, desks will be rearranged to at least 6 feet apart. Students should be assigned a single seat to use consistently throughout the day and every day
- Minimize time standing in lines and take steps to ensure that 6 feet of distance between students is maintained, including marking spacing on floor, one-way traffic flow in constrained spaces, etc.
- Modify or stagger schedules to limit the number of students in spaces at the same time
- Limit transitions to the extent possible during the student day, and create hallway procedures to promote physical distancing and to minimize gatherings
- Plan for students who will need additional support in learning how to maintain physical distancing requirements. Reinforce physical distancing expectations through positive behavior support and instruction; refrain from punitive discipline
- Advise and encourage all people on campus to wash their hands frequently
- Expect and teach students to avoid sharing community supplies, and to clean shared items frequently
- Use signage and regular reminders to encourage students and staff to adhere to requirements for hand hygiene and respiratory etiquette
- Provide the Agency-established instruction minutes to students by level

- Clean and wipe surfaces (e.g., desks, door handles, etc.) between multiple student uses

#### **F. Designation of Physical Distancing Officer and Site Coordinators**

Physical or spatial distancing is the intentional physical distance placed between individuals to limit the likelihood of respiratory droplets reaching other individuals. As school reopens, spatial measures are taken to ensure physical distance between individuals. Generally speaking, this is 6 feet between individuals since respiratory droplets often spread between 3 and 6 feet (CDC, 2020).

As required by ODE guidelines, Family Solutions Executive Director has been designated as the Agency Physical Distancing Officer (PDO). The PDO is responsible to establish, implement, and enforce physical distancing policies, consistent with guidelines from Oregon Department of Education and Oregon Health Authority.

Each site has a physical distancing site coordinator (PDSC) who will work with the PDO to establish building and/or department practices for physical distancing. The PDSCs for each site are as follows:

- Cascade House Supervisor - Amanda Pintarelli
- Willow House Supervisor - Rachel Raines

#### **G. Visitors and Volunteers**

Staff will maintain contact logs of all visitors, students, staff, contractors and others, entering a facility at any time, or engaged in Family Solutions activities on Agency premises. The records will be maintained for a minimum of two months in a secure and confidential location. The Agency will follow the lead of Jackson and Josephine County LPHA in contact tracing. Family Solutions will submit all tracking information and forms to the Local Public Health Agency (LPHA) as requested in a timely manner.

Volunteers are allowed only when providing a support essential to the program operations; otherwise volunteers are restricted from Agency buildings.

In the event of a situation requiring a visitor or volunteer's presence in an indoor Agency space, the visitor or volunteer is required to answer the following questions:

- Have you had close contact with, or do you live with anyone currently ill and diagnosed with COVID-19?
- Are you currently sick or are you experiencing any COVID-19 related symptoms? See symptoms [from the CDC](#)
- Do you have a fever? [CDC fever definition](#)

**If the answer is "yes" to any of the above questions, the visitor or volunteer is not allowed access.**

Visitors and volunteers on site:

- Must maintain 6 feet of physical distance between people

- Must wear a face covering or CDC-approved alternative. The Agency will provide disposable face coverings for visitors in need
- Must wash or sanitize their hands upon entry and exit
- Will be screened for symptoms upon entry
- Will be restricted from Agency property if they are known to have been in close contact with someone who has COVID-19, within 6 feet for at least 15 cumulative minutes in a day, within the preceding 14 calendar days

## **H. Isolation Measures/Restriction of Ill or Exposed Persons**

Family Solutions has established guidelines related to restrictions of students and staff for communicable diseases. COVID-19 has been declared a restrictable disease.

### **Isolation and Monitoring**

- Effective March 1, 2021, when a student develops symptoms consistent with COVID-19 while at school and the school has a consent form on file, the student will immediately be tested. Regardless of the test results, the student will be isolated/quarantined immediately and will not return to class until allowed by [Ready Schools, Safe Learners](#) guidance.
- Effective March 1, 2021, staff members who develop symptoms consistent with COVID-19 while at school may verbally grant consent to test and will immediately be tested. Regardless of the test results, the staff member will leave school immediately and will not return until allowed by [Ready Schools, Safe Learners](#) guidance.

The Residential Supervisor will contact the assigned contracted nurse and the student's guardian/case manager immediately.

If able to do so safely, a symptomatic student should wear a face covering.

Anyone providing supervision and symptom monitoring must wear a medical grade-face covering or CDC approved alternative. Any program staff in close contact with symptomatic students (less than 6 feet for 15 cumulative minutes in a day) shall wear a medical-grade face covering.

Other personal protective equipment (PPE) is available and ready for use in the facility storage area labeled "Sick Room Kit" and may be needed depending on symptoms and care provided.

When moving a student into isolation, staff will maintain at least 6 feet of distance from the student, unless impossible, and will wear a face covering or CDC-approved alternative.

Any PPE used during care of a symptomatic individual shall be properly removed, and cleaned or disposed of, prior to exiting the care space. After removing PPE, hands should be immediately cleaned with soap and water for at least 20 seconds. If soap and water are not available, hands can be cleaned with an alcohol-based hand sanitizer that contains 60-95% alcohol.

To reduce fear, anxiety, or shame related to a student's isolation, staff should provide a clear explanation of procedures, including use of PPE and hand washing.

## Cleaning

All areas where a symptomatic student or staff member was working prior to isolation or exiting the facility should be thoroughly cleaned and sanitized. Upon vacating a student from the area, staff in coordination with facilities maintenance will provide appropriate cleaning and sanitization of the space prior to being used again. *See Section IV D-Response to Confirmed Cases and/or Outbreak: Cleaning and Disinfection.*

### Isolation and Exclusion of Symptomatic Students and Staff

Family Solutions will follow all guidance from the latest version of [Planning for COVID-19 Scenarios in Schools](#).

Staff and students who are ill must stay home from school.

If a student or staff member has a positive COVID-19 test result, the person should remain home/isolated for at least 10 days after illness onset and 24 hours after fever is gone, without use of fever-reducing medicine, and other symptoms are improving.

If they have a negative COVID-19 viral test (and if they have multiple tests, all tests are negative), they should remain home/isolated until 24 hours after fever is gone, without use of fever reducing medicine, and other symptoms are improving.

If a clear alternative diagnosis is identified as the cause of the person's illness (e.g., a positive strep throat test), then usual disease-specific return-to-school guidance should be followed and the person should be fever-free for 24 hours, without use of fever reducing medicine.

If they do not undergo COVID-19 testing, the person should remain at home/isolated for 10 days and until 24 hours after fever is gone, without use of fever-reducing medicine, and other symptoms are improving.

Program Supervisors will notify Family Solutions Human Resources Manager of any staff absences related to COVID-19. Human Resources will track COVID-19 related absences.

## I. Public Health Communications

The Agency will coordinate with Jackson/Josephine County Public Health to disseminate critical information. The Agency will strive to provide accurate, consistent and timely communications with staff, students, and guardians.

The Agency will follow the guidelines in the [Cascade House Protocol to Notify Jackson County](#) or the [Willow House Protocol to Notify Josephine County](#).

Staff will utilize the [Cascade House Communication Flowchart](#) or the [Willow House Communication Flowchart](#) to notify essential individuals.

### Confirmed Cases

When an individual in the Residential facility or staff is confirmed to have COVID-19, the Agency will work under the guidance of Jackson/Josephine County Public Health regarding action, communication and facility cleaning.



As directed by Public Health, the Agency will promptly notify students, families, guardians, and staff who are known to have come into close contact with a confirmed case of the fact of a potential exposure. The CDC has defined “close contact” with someone who has COVID-19 as being within 6 feet for at least 15 cumulative minutes within the preceding 14 days.

The Agency will communicate to staff and families of the impacted program that a case of COVID-19 has been identified, including a description of how the Agency is responding, as required by ODE and OHA [Ready Schools, Safe Learners](#) guidelines.

### **Privacy**

As required by privacy laws, such communications will not identify a particular student or staff member as having COVID-19, or disclose other personally identifiable information about that person, without prior written consent. The Agency will make a reasonable determination that the communication will not cause the individual to be personally identifiable, taking into account other reasonably available information.

In rare instances, the Agency may determine, in conjunction with Public Health, that disclosure of identifiable information about a student with COVID-19 to the parent/guardian of another student is necessary in order to enable that family to take precautions or other actions to ensure the health or safety of their child or themselves, especially if their child or they have a higher risk of developing severe complications from COVID-19. The determination of whether disclosure of an individual’s name is absolutely necessary to protect the health or safety of others will be on a case-by-case basis.

Similarly, information about a staff’s illness with COVID-19 will be stored in a confidential medical file and maintained in confidence, except that supervisors must notify the administrator in Human Resources who is a designated point of contact with Public Health, and who shall notify Public Health. Agency staff are expected to make every effort to limit the number of staff with knowledge of the infected staff’s name. In addition, when the Agency learns that a staff has been confirmed to have COVID-19, or is a presumed positive; the Agency will follow the guidance of Public Health to determine which other persons may have been exposed to the virus.

When notifying others about their possible exposure, the Agency will maintain the infected staff’s name in confidence. Nothing in this section will prohibit the Agency from following the most current guidance from LCPH and OHA regarding COVID-19.

### **J. Signage**

Signs are posted in multiple locations throughout the programs noting/picturing respiratory hygiene, hand washing, physical distancing, face coverings, stay at home if sick, and screening.

### III. FACILITIES AND SCHOOL OPERATIONS

#### A. Exercise Equipment, Recess, Break Rooms, and Restrooms

##### Exercise Equipment and Recess

While at recess or when using playgrounds and fields, students are to wear face masks and maintain physical distancing requirements and square footage requirements.

Students must wash their hands before and after going outside. Before and after using playground equipment, students must wash their hands with soap and water for 20 seconds or use an alcohol-based hand sanitizer with 60–95% alcohol. Shared equipment will be cleaned and disinfected at least daily or between uses as much as possible in accordance with [CDC Guidance](#). Playground structures will be routinely cleaned but do not require disinfection. Cleaning requirements must be maintained per Section 2j of the [Ready Schools, Safe Learners](#) guidance.

##### Restrooms

After using the restroom students and staff must wash their hands with soap and water for 20 seconds. Facilities staff will ensure soap is available.

##### Staff rooms

Limit staff rooms, common staff lunch areas, and workspaces to maintain 6 feet of distance between adults. In smaller spaces this may limit use to a single person at a time.

#### B. Meal Service and Nutrition

Meals will be eaten in the dining area. Meals will be served individually. Self-service buffet-style meals are prohibited. Tables or surfaces where meals are consumed will be sanitized before meals. Students will receive their meal after washing or sanitizing hands, and should be encouraged to wash or sanitize their hands after eating. Students will not share food, utensils, or serving items.

Staff will sanitize carts, cafeteria tables, and any counter surface between uses. Only facilities staff is allowed access to the kitchen.

Any meal items such as plates, utensils, and transport items used in classrooms where meals are consumed will be cleaned on a daily basis.

All school staff assisting with meal service will wear a face covering when serving students, interacting with students, or unable to maintain 6 or more feet of distance from any other person.

Meals provided to students will be accessible (open packages, etc.)

Students may remove face coverings while eating meals or snack, but must put face coverings back on after finishing the meal or snack. Students must maintain social distancing while face masks are removed for eating.

Since staff must remove their face coverings during eating and drinking, staff are encouraged to eat snacks and meals independently, and not in staff rooms when other people are present.

### **C. Health Services**

Each facility will isolate students in their bedrooms when they experience illness. These designated spaces will include access to a restroom reserved for symptomatic individuals and shall not be used by asymptomatic students and staff until thoroughly cleaned and disinfected by custodial staff.

### **D. Safety Drills**

Routine drills are conducted per the Family Solutions Emergency Response Testing Policy and Procedures in a trauma-informed manner and with physical distancing taken into account. Drills will be conducted Time considerations are made to reduce close contact and standing in line. Drills will be carried out as closely as possible to the procedures that would be used in an actual emergency. Drills will only be carried out if they can be practiced correctly. If social distancing cannot be observed, the drill will be kept under 15 minutes. 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. Thirty minutes per month is devoted to educating students regarding essential safety drills and emergency response.

- Fire drills occur monthly
- Earthquake drills occur twice a year.
- Drill for 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 will be conducted twice a year.

### **E. Emergency Safety Interventions**

All Residential staff is trained in Collaborative Problem Solving (CPS) and Crisis Prevention Institute (CPI) techniques. ESI's are avoided whenever possible.

- Face coverings are required by staff and in addition, staff may use PPE such as gloves and apron.
- Following any CPI event, students and staff complete hand hygiene.
- Following the event, the area is disinfected and aired.

### **F. Student and Staff Attendance Reporting**

Communicable disease reporting and identification of a cluster of students or staff illness is done daily and faxed to the LPHA. The form, [COVID Symptom Monitoring Tracker](#) has been developed for this reporting.

### III. Response to Confirmed Cases and/or Outbreak

#### A. Prevention and Planning

During the COVID-19 pandemic, the Agency has worked and will continue to work to prevent the spread of disease. Family Solutions will work together with Jackson and/or Josephine County Public Health for future planning.

#### B. Determination of Outbreak

The CDC defines an outbreak as a higher-than-expected number of occurrences of disease in a specific location and time. Outbreaks are determined by the state and local public health authorities. The Agency plays a key role in reporting confirmed cases, but does not determine whether there is an “outbreak.”

#### C. Notification and Communication — Confirmed Case

If a staff, student or campus visitor self-discloses a confirmed or presumptive diagnosis of COVID-19:

The Agency will follow the guidelines in the [Cascade House Protocol to Notify Jackson County](#) or the [Willow House Protocol to Notify Josephine County](#).

Staff will utilize the [Cascade House Communication Flowchart](#) or the [Willow House Communication Flowchart](#) to notify essential individuals.

- The staff member receiving the report shall notify (a) the Residential Supervisor 541-621-2645 or (b) Chief Operating Officer 541-414-1743.
  - The Residential Supervisor or Chief Operating Officer will, as required by law, notify Public Health.
  - Notify Patricia Michiels, SOESD Human Resources Director, at 541-776-8590.
  - The designated program administrators will follow the guidelines up to and including program quarantine and closure in Section II-I (Public Health Communications) above.
  - Notifications are made to: Oregon Department of Human Services – Treatment Services Sara Fox at 503-400-5575 and Oregon Health Authority-Child Care Licensing Tom Vanderveen at 503-569-1091.

#### **D. Cleaning and Disinfecting – Following Suspected or Confirmed COVID-19 Case**

Agency staff will use the following cleaning and disinfection process when staff or students present symptoms consistent with COVID-19 and have been in an Agency facility.

When building or program staff identifies a person who has concerning symptoms, the individual will be evaluated and relocated to the designated isolation area. Facilities staff will be notified and will initiate cleaning procedures as recommended in [CDC guidelines cleaning your Facilities when someone has been sick](#).

Spaces where the individual was within the facility will remain unoccupied for 24 hours when possible. Appropriate personal protective equipment (PPE) and hand hygiene will be required when cleaning all impacted spaces.

##### **Damage to PPE**

All staff shall immediately report breaches in PPE (e.g., tear in gloves) or any potential exposures to their supervisor. Such staff must also immediately notify their supervisor and complete an Incident Report form by the end of their shift.

##### **Hygiene Practices**

Facilities staff shall clean hands often before, during and after cleaning. Facilities staff will be instructed if it is advisable to remove and clean all clothing worn while cleaning as soon as practical. Staff is encouraged to bring a spare change of clothing to work.

##### **Training**

The Facilities Supervisor will:

- Assign the cleaning personnel and train them on the cleaning protocol.
- Training should include when to use PPE, what PPE is necessary, how to properly put on, use, and take off PPE, and how to properly dispose of PPE.
- Ensure all needed and approved PPE and supplies are available at the location prior to initiating the cleaning protocol.

#### **E. School, Department or Location Closure for an Outbreak**

##### **Closure of school for in-person instruction**

The COVID-19 pandemic creates the possibility of buildings or programs closing to in-person instruction and mid-year transitions between in-person instruction and comprehensive distance learning. The Agency will monitor and adhere to these requirements, and create a transition plan to ensure effective transitions between in-person instruction and comprehensive distance learning.

The COVID-19 pandemic creates the possibility of temporary closures where there are clusters of illness. The Executive Director or designee, in consultation with Jackson/Josephine County Public Health, may temporarily close a classroom, program, department, or building location.

A closure decision will trigger these additional actions:

- The Executive Director or designated administrator will coordinate with LPHA and provide communications to ODHS Treatment Services, OHA Child Care Licensing, ODHS Case Workers, families, and staff.
- Comprehensive distance learning will be implemented during any short-term school closure, and shall be designed to support all learners.
  - Access to the impacted area will be secured and restricted by the Facilities Department.
  - The Safety Officer will be notified.
  - The Facilities Supervisor will determine the specific areas that require additional cleaning. If specific area(s) cannot be identified as impacted, the entire building will be considered exposed.
  - The authorized person will close off areas used by the ill persons and wait as long as practical before beginning cleaning and disinfection to minimize potential for exposure to respiratory droplets. Outside doors and windows will be opened to increase air circulation in the area. When there is a suspected outbreak impacting a whole school or building, staff will wait up to 24 hours before beginning cleaning and disinfection.
  - Cleaning staff will clean and disinfect all identified areas (e.g., offices, bathrooms, and common areas) used by the ill persons, focusing especially on frequently touched surfaces.
  - The Agency will follow health authority guidance to begin bringing students back into on-site instruction.

#### **IV. TRAINING AND COMMUNICATION**

The Agency will communicate to staff and guardians at the start of the school year/work year and at periodic intervals, explaining infection control measures being implemented to prevent spread of disease.

The Agency staff will receive ongoing professional training regarding daily cleaning and disinfection of personal workspace and commonly used spaces, safety protocols, expectations for staff and students, and procedural and cleaning updates as they are adopted.

#### **VI. ASSUMPTIONS**

COVID-19 has been declared a pandemic. The following assumptions apply to this situation:

- It is imperative the Agency staff work through the challenges to providing an equitable and high-quality education to students.

- The Agency may be required to close school sites for days, weeks, or months, but will continue to deliver educational and related services as required by ODE guidelines and the facility's operational blueprint.
- Buildings will need to be cleaned and/or sanitized.
- Staff may be restricted from coming to work and students restricted from coming to school.
- All staff are expected to work unless on an approved leave; the Agency will comply with applicable leave and disability laws.
- Absenteeism of staff and/or students may affect operations.
- Consumer demands for resources and other factors could create supply shortages and interrupt delivery of resources without advance warning.
- Regular coordination with public health agencies is required.
- Applicable executive orders and guidelines from Oregon Health Authority and Oregon Department of Education are subject to change. The most recent applicable guidelines are available online.

## **VII. COOPERATING AND COORDINATING AGENCIES**

Local and state health departments will provide guidance and assistance to the Agency to confirm and identify cases, document and count cases, identify and eliminate transmission sources, and institute control measures.

## **VIII. PLAN DEVELOPMENT AND FUTURE UPDATES**

This plan was developed by the Family Solutions BRS Management team. The plan will be reviewed regularly by the team and updated as needed. Comments and suggestions on this plan may be sent to [dprovencio@solutionsor.org](mailto:dprovencio@solutionsor.org).

## **IX. STATE GUIDANCE**

- Oregon Department of Education/Oregon Health Authority, *Communicable Disease Guidance* [Communicable Disease Guidelines](#)
- Outbreak Investigation in Schools – [Safety Procedures and Guidance for Child Care Facilities Operating During COVID-19 – Oregon Health Authority](#)
- [Oregon Department of Education, Ready Schools Safe Learners 3.78 September 8, 2020](#)
- Governor's Executive Order 20-29, *Ready Schools Safe Learners* (June 24, 2020)
- ODE Comprehensive Distance Learning Guide