



Communicable Disease Management

Covid-19 Response Plan

*This plan is a live document and will be updated as new information
is available or protocols are adopted. 9/21/21*

*While available in hardcopy, this guide is best reviewed online as it contains multiple
electronic links to supplemental or related information.*

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This guide is a supplement to our basic health information located in our Parent Student Handbook. It reviews our basic understanding and approach to Communicable Diseases in a school setting and moves to more direct mitigation with our current Covid-19 pandemic.

Communicable Diseases

Communicable disease control and prevention is significant in creating a safe and healthy environment for students and staff.

A communicable disease is an infectious disease that is transmissible by contact with infected individuals or their bodily discharges or fluids, by contact with contaminated surfaces or objects, by ingestion of contaminated food or water, or by direct or indirect contact with disease transmitters. Although the terms *communicable disease* and *contagious disease* are often used interchangeably, it is important to note that not all communicable diseases that are spread by contact with disease transmitters are "contagious" diseases since they cannot be spread from direct contact with another person.

In the school setting there is a prevention-oriented approach for communicable disease which is grounded in education, role modeling and standard precautions and hygiene. However, the nature of a school setting lends to the need to establish practices for measures and interventions associated with exposures or potential exposure.

Communicable Disease Prevention

There are myriad methods that can be applied to control communicable diseases at a variety of levels. Some of the most common include transmitter control, hygiene, sanitation and immunization. Fully endorsing the control and prevention of communicable diseases requires a level of understanding of how communicable diseases can be spread.

The disease spread depends on the specific infectious agent. Common ways in which communicable diseases spread include:

- ◆ Physical contact with an infected person, such as through touch (staphylococcus), sexual intercourse (gonorrhea, HIV), fecal/oral transmission (hepatitis A), or droplets (influenza, TB, Covid-19)
- ◆ Contact with a contaminated surface or object (Norovirus, Covid-19), food (salmonella, E. coli), blood (HIV, hepatitis B, hepatitis C), or water (cholera, listeria);
- ◆ Bites from insects or animals capable of transmitting the disease (mosquito: malaria and yellow fever; flea: plague); and
- ◆ Travel through the air, such as measles and Covid-19.
- ◆ In the school setting the most frequent risks are associated with direct contact with ill individuals or contamination of surfaces or through airborne transmission. Primary sources of prevention include hand and surface hygiene, isolation, exclusion, and standard precautions.

Common Childhood Infectious Disease

There are a variety of Common Childhood Infectious Diseases that are regularly encountered in the school setting. Routine childhood respiratory illnesses such as the common cold (adenoviruses, coronaviruses, rhinoviruses) or conditions such as bronchitis, sinusitis, and tonsillitis caused by a variety of bacteria and viruses occur throughout the year. Other conditions such as gastroenteritis (norovirus most frequently) and croup (most commonly parainfluenza) and influenza (A & B) most often occur seasonally. Other common conditions include strep throat, hand foot and mouth disease, fifth disease and staph skin infections. Other, more severe infectious diseases can occur sporadically throughout the school during the school year.

Vaccines-General

In the school setting vaccines are an important piece of communicable disease control. Vaccines are a requirement for attending school in Oregon. However, it is important to note that certain populations may not be vaccinated because of medical contraindications or because of religious or philosophical decisions. Our school has record of which students are and are not vaccinated with routine childhood immunizations as a primary control measure for outbreaks of vaccine preventable diseases.

Hygiene

Prevention oriented measures are grounded in education of how diseases are transmitted, and practice application related to appropriate sanitizing measures and precautions. Hygiene and sanitation are some of the most important methods of disease prevention. Handwashing is one of the single most important methods of keeping germs at bay, specifically in the school setting.

Appropriate handwashing practices should be taught, role modeled and practiced. Age-appropriate hand hygiene curriculum can be found from a variety of resources and should be provided annually in the fall and as needed during peak illness season or specific increases of disease in the school setting.

Hand sanitizer should be made available for times that handwashing is not immediately accessible. Hand sanitizer should be easily accessible throughout the campus, specifically in high contact areas and at entrances and exits as feasible. Hand sanitizer should be accessible in each classroom.

Respiratory Hygiene/Cough Etiquette

Respiratory hygiene and cough etiquette are terms used to describe infection prevention measures to decrease the transmission of respiratory illness (e.g., influenza and cold viruses). A respiratory infection is spread when a person who is infected with a virus coughs or sneezes. The droplets released from an ill person's cough or sneeze can travel for several feet reaching the nose or mouth of others and causing illness. Viruses can spread easily from person to person through direct contact via touching or shaking hands. Droplets can also live for a short time on a variety of objects such as high touch areas like doorknobs or desks.

Because some individuals cough without having respiratory infections (e.g., persons with chronic obstructive lung disease), we do not always know who is infectious and who is not. Therefore, respiratory hygiene and cough etiquette are very important components to protecting yourself from illness and preventing others from becoming ill. Like hand hygiene, respiratory hygiene is part of the standard precautions that should be taught, practiced and role modeled to prevent the spread of disease.

Environmental Surface Cleaning

Clean schools contribute to healthy environments and minimize the risk of communicable disease transmission. Some of the important concepts associated with reduction in illness include scheduling routine cleaning of each classroom and common areas, ensuring appropriate stock of appropriate sanitizers and disinfectants, ensuring garbage is emptied regularly and ensuring any classrooms with pets have a cleaning plan in place to minimize odors or contamination. While environmental cleaning is largely accomplished by our custodial services, there are certain classroom measures that can be practiced improving cleanliness and reduce the risk of illness transmission during peak illness such as increasing access to sanitizing wipes, tissue and hand sanitizer.

Communicable Disease Exclusion

Communicable diseases are transmitted from person to person by various routes. While some conditions are restrictable based on diagnosis, more often early identification of signs and symptoms of communicable disease is of paramount importance to increase the health of the school population and decrease school absenteeism. In the school environment, many communicable diseases are easily transmitted from one individual to another. Effective control measures include education, avoidance of risk factors, sanitation, vaccination, early recognition of symptoms, health assessment, prompt diagnosis and adequate isolation or treatment (ODE, 2020). Restriction of some communicable diseases may be imposed by the local public health authority, for reportable conditions (Oregon Administrative Rule 333-019-0010).

Oregon public health law mandates that persons who work in or attend school who are diagnosed with certain diseases or conditions be excluded from school until no longer contagious. However, diagnosis often presumes a physician visit and specific testing, and schools must often make decisions regarding exclusion based on non-diagnostic but readily identifiable signs or symptoms.

Restrictable Diseases

Restrictable diseases are specific infectious disease diagnoses that require students or staff to remain at home for a specified amount of time to limit transmission. Restriction is typically associated with the communicability or severity of a disease. Restrictable diseases are reportable to the local health department (LHD). The local health department typically notifies school health services. Although, there are occasions when the parent will notify the school first.

Students with diagnoses of disease restrictable by the local public health authority (LPHA) under Oregon Administrative Rule (OAR) 333-019-0010 should return to school when documentation is obtained from the local health department (LHD) indicating they are no longer communicable including:

- Diphtheria,
- Measles,
- Salmonella
- Typhi infection,
- Shigellosis,
- Shiga-toxigenic Escherichia coli (STEC) infection,
- Hepatitis A,
- Tuberculosis,
- Pertussis,
- Rubella
- Acute Hepatitis B.
- COVID-19 is also declared a restrictable condition under OAR 333-018-0900.

- ◆ Reports should be made to the school office, administration or other school staff in regard to any communicable disease diagnosis in students or staff.
- ◆ This report should be regarded as an urgent referral to the school office if the disease is regarded as a restrictable condition.
- ◆ The school office and administrators will identify the need for communication, surveillance or control measures. The interventions and communication are driven by multiple factors including the diagnosis, student health status, risk of exposure, number of individuals infected and risk to cohort or specific students.
- ◆ School staff receiving reports should deem all information as confidential.

Outbreaks

Outbreaks are most often defined as compatible diagnoses or syndromes in individuals from 2 or more households in the same time period. Because of the nature of the ongoing congregate setting of school, this definition is insufficient for the purposes of seasonal illness, rather an increase in morbidity or severity should be indicators to report to the school office for consideration of outbreak reports or control measure implementation. The attention to outbreaks, interventions and resources are highly dependent on the severity or communicability of the syndrome or pathogen. Outbreak investigations will be facilitated through the school office in collaboration with administration and the Yamhill County health department.

Respiratory Illness

Respiratory illness or disease refers to the pathological conditions affecting the organs and tissues that make gas exchange possible, and includes conditions of the upper respiratory tract, trachea, bronchi, bronchioles, alveoli, pleura and pleural cavity, and the nerves and muscles of breathing. Respiratory diseases range from mild and self-limiting, such as the common cold, to life-threatening entities like bacterial pneumonia. Respiratory illnesses are often observed in the school setting. The following indicators should be reported to the school office in regard to respiratory illness:

- ◆ Any respiratory illness resulting in hospitalization of a student or staff member.
- ◆ Any uncommon incidence of illness in more than two students in a cohort.

Vaccine Preventable Disease

A vaccine-preventable disease (VPD) is an infectious disease for which an effective preventive vaccine exists. Current VPD routinely immunized for in the United States includes:

- | | |
|--|---------------------------------|
| 1. Diphtheria* | 8. Meningococcal disease* |
| 2. Tetanus* | 9. Pertussis (whooping cough) * |
| 3. Measles* | 10. Poliomyelitis (polio)* |
| 4. Mumps* | 11. Hepatitis A* |
| 5. Rubella* | 12. Hepatitis B* |
| 6. Haemophilus influenzae type b infections (Hib)* | 13. Varicella |
| 7. Pneumococcal infections* | 14. Influenza |

Most VPD's are also notifiable diseases*, meaning they are reportable to the local health department and are under consistent surveillance. Other diseases where a risk may arise for a particular person or group of people in specific situations are also notifiable conditions but are not routinely immunized for in the US. These may include as: cholera, plague, rabies, bat lyssavirus, yellow fever, Japanese encephalitis, Q fever, tuberculosis, and typhoid. While these conditions are uncommon locally, a diagnosed case would be of interest. Vaccine Preventable Disease reports should be deferred to the school office whether coming from a parent, provider, community member or the local health department. Indicators for VPD include:

- ◆ A single case of a vaccine preventable disease that is also a notifiable disease* or uncommon locally.
- ◆ More than 2 cases of chickenpox from separate households in the same classroom or more than 5 cases in a school.
- ◆ More than 3 cases of diagnosed influenza from separate households in the same school setting.

Gastroenteritis

An outbreak of gastroenteritis is defined as more cases than expected for a given population and time period. For example, two children in a 25- person classroom with vomiting or diarrhea within one week could potentially indicate an outbreak. Because the nature of norovirus (viral gastroenteritis) is common, seasonal and highly infectious, it is unlikely to result in an outbreak investigation unless the number infected, frequency or duration is unusual. Because symptoms of bacterial gastroenteritis may start with a similar presentation, it is important to evaluate the severity for the duration of illness. Indicators to report to the school office include:

- ◆ Multiple children with compatible symptoms in 48 hours within the same cohort, but separate households.
- ◆ More than 2 cases of diarrhea with bloody stool in the school setting.
- ◆ Sudden onset of vomiting in multiple persons in the same cohort.
- ◆ Any unusual combination of gastrointestinal symptoms, severity, duration or incidence.

Other Circumstances

Less commonly, outbreaks of skin infections and novel diseases occur or unusual infectious disease circumstances arise. In efforts to ensure appropriate disease control, interventions and follow up these other situations should be deferred to the school office immediately and will be handled on a case by case basis. Examples of these circumstance may include:

- ◆ More than 2 students from separate households with reported compatible skin infections in the same school setting or athletic team.
- ◆ Any student or staff member coming into contact with blood, saliva or feces from a non- domestic animal.
- ◆ Any student or staff coming into contact with blood that is not their own.
- ◆ Any combination of illness, symptoms, severity, duration, or frequency that seems unusual as compared to routine seasonal illness.

The school office may decide that additional control measures or data collection is necessary and will consult with administration as needed, regarding determined outbreaks or novel diagnoses. The school office should always be consulted regarding any written communication that may be developed to notify parents about illness, disease outbreaks, and risks to students, families, and staff and/or control measures specific to the outbreak.

Any presentation of illness or combination of illnesses as described above should be reported to the school office and administrator.

Food Safety

For the purpose of school health and food preparation and consumption within the classroom, general food safety standards and disease prevention principles should be endorsed.

Disease Mitigation Strategies at School

- ◆ Hand hygiene is practiced prior to and following eating.
- ◆ General principles of food safety can be taught that are age appropriate.
- ◆ Food sharing should be avoided.
- ◆ For classroom and school sponsored events, only individually packaged food is permitted.

Covid 19 Mitigation Overview

For the foreseeable future, the COVID-19 pandemic is likely to affect our daily school routines. Prudence calls for prayerful, thoughtful, and coordinated planning as we learn how to best respond to this short-to-medium-term challenge. Generally speaking, there are three possible learning models:

Our mission to provide a Christ-centered academic experience for Christian families in Yamhill County is best fulfilled when teachers and students come together on campus and in classrooms. However, until the COVID-19 pandemic has abated, an open school building and related programs require special precautions and protocols in order to safeguard the health and well-being of our students, faculty, and staff. We have developed these protocols in close coordination with local, regional, and state officials.

It is our intention to open the school buildings and hold classes full time as much as possible, but only if we can accomplish that goal safely.

Thank you for your patience and your prayers as we persevere through this unprecedented challenge.

Coordination with State and County Agencies

The agencies primarily responsible for overseeing the opening of private schools is the Oregon Health Authority and the Oregon Department of Education. We fall under the Yamhill County Public Health and Public Services. This plan follows the recommendations, guidelines and requirements of those agencies.

ODE/OHA Resiliency Framework

C.S. Lewis Academy protocols align with and follow the school guidance document issued by ODE/OHA, the [Resiliency Framework for 2021-22](#).

If CSLA has a confirmed case of COVID-19, we will immediately contact Yamhill County Public Health and Public Services and follow the [Planning for COVID-19 Scenarios in Schools guidance](#).

General Policy Statements

Modified Medical Policy

This policy serves as an interim modification to our Parent/Student Handbook Health and Safety, Medical Policies and Illness sections.

Student Screenings

We will routinely visually screen all students during the school day. Teachers, staff and administrators will be aware of students who don't seem to be feeling well. In circumstances where a student is exhibiting symptoms, we will use the standard COVID-19 screening questions and take a temperature. If given parent permission, we also have the ability in this circumstance to test.

The primary COVID-19 symptoms include the following and will be the basis for Exclusion ([see the ODE Exclusion Summary Guidance](#) at this link and in the appendix of this document).

- ◆ A body temperature of 100.4* or higher
- ◆ Persistent cough (not already evaluated by a health care professional)
- ◆ Shortness of breath or difficulty breathing
- ◆ New loss of taste or smell
- ◆ Chills

Any person determined by a staff member to present with one of these symptoms during the school day will be sent home or placed in a designated isolation area at school until they are taken home. It is required that parents make immediate arrangements for the pick-up of a child presenting any of these symptoms.

Key Practices for Reducing Spread of Covid-19 in Schools

It is critical that we all adhere to the key practices for reducing spread of COVID-19 in schools, to ensure that our schools can open with safe protocols and stability:

- ◆ Maintain physical distancing
- ◆ Use face coverings
- ◆ Maximize airflow and ventilation
- ◆ [Increase hand hygiene](#)
- ◆ Be prepared to isolate and quarantine at the first sign of illness or exposure
- ◆ Regularly clean and disinfect facilities in the environment

Physical Distancing and Mitigation Strategies

Personal Protection Equipment (PPE)/Masks

Face masks or shields (where appropriate) will be made available for all students and staff who do not have their own. Gowns and gloves will also be made available on site when needed.

Summary of OHA Guidance

Face Coverings

Oregon is placing a priority on ensuring that every student is able to attend school in-person for the entire school year. Students are required to attend school, which is a congregate setting where COVID-19 can spread easily if precautions are not taken. Universal and correct use of face coverings keeps students learning in-person. ODE, OHA, the CDC and the American Academy of Pediatrics (AAP) all agree that returning to full-time, in-person learning is best for our children. A recent CDC Morbidity and Mortality Weekly Report emphasizes the importance of face coverings in schools in the context of the Delta variant of COVID-19.

On August 27, 2021, OHA updated OAR 333-019-1025 requiring everyone age five (5) or older to wear a face covering anywhere indoors, and outdoors where people from separate households gather. OHA has completed an FAQ for this rule which has additional detail and information.

On September 3, 2021, OHA updated OAR 333-019-1015 requiring face coverings in all K-12 indoor and outdoor settings. ODE has created an FAQ for this rule. This rule applies to public, private, parochial, charter, youth corrections education programs (YCEP) and juvenile detention education programs (JDEP) or alternative educational programs offering kindergarten through grade 12 or any part thereof. The rules require the following:

- ◆ All individuals 5 years of age and older to wear a face covering while indoors in a K-12 school, during school hours. Certain accommodations for medical needs or disability may be necessary, and certain conditions for exceptions are detailed in the OAR 333- 019-1015.
 - Children under 5 who are learning in preschool classrooms that operate in school settings are not required to wear face coverings. In any early learning program serving 0 to 5 year olds, students are not required to wear a face covering.

- ◆ All individuals 5 years of age and older to wear a face covering outdoors when individuals cannot or do not consistently maintain at least 6 feet of physical distance from people not in their household.
- ◆ All individuals aged two (2) or older who are using public transportation, including riding a school bus operated by a public or private school, must wear a face covering. OAR 333-019-1015 and OAR 333-019-1025 do not require a person to wear a face covering indoors when playing competitive extracurricular sport at any level, nor when officiating a competitive sport that requires a high level of physical exertion by the official. OARs 333-019-1015 and 333-019-1025 require all spectators and officials who are not actively officiating at a high level of physical exertion at competitive sport events of any level to wear a face covering. OHA will review OAR 333-019-1015 monthly to determine the need for it to continue. Other COVID-19 mitigation protocols (physical distancing, airflow/ventilation, etc.) remain local decisions.

Faculty/Staff Training

- ◆ All staff will be trained/advised on symptoms to determine when a student should be referred to the office for further symptom screening and isolation.
- ◆ Designated staff will be trained on appropriate procedures for complete symptom screening, isolation, testing, and enforcement of social distancing.

Lunch Operations/Food on Campus

- ◆ Hot lunch program is suspended at this time.
- ◆ [Students wash hands](#) or use hand sanitizer before eating.
- ◆ Students eat in their classrooms or outside at level and/or teacher discretion.
- ◆ No microwave availability.
- ◆ Food sharing is discouraged.
- ◆ Students will use hand sanitizer when finished eating before leaving the classroom for recess.
- ◆ All outside food for celebrations must be individually wrapped at this time. Hand washing applies as necessary.

Ventilation

Classrooms have had upgraded filters and teachers are strongly encouraged to keep windows and doors open when possible. Room air filters are available, and teachers have been encouraged to have class sessions outside when feasible.

Physical Distancing-Seating

- ◆ Classrooms will be arranged to maximize distancing when possible.
- ◆ The sharing of supplies among students should be avoided. When supplies are shared, they will be disinfected between uses.

Six feet of distancing between adults or adult with students will be a general goal. The nature of the teacher to student relationship makes absolute adherence to this impractical, and perhaps undesirable. However, teachers will use common sense when applying distancing practices between themselves and their students.

Library, Assemblies, and Chapels

The library will be temporarily closed. Assemblies and Chapels will be designed for smaller groups and to maximize ventilation and spacing.

Physical Education Classes

Physical education is important for student health. We will continue to offer these classes using safe protocols. Person-to-person contact sports or activities will be avoided. All equipment will be frequently sanitized. Classes will be held outdoors as much as possible.

Music Classes

Music classes will be modified to only those activities allowable under the guidelines.

Recess Procedures

- ◆ Students apply hand sanitizer or wash their hands upon leaving the classroom for recess.
- ◆ After recess, students apply hand sanitizer or wash their hands upon entering the classroom.
- ◆ Outdoor recess will not require masks unless minimal physical distancing is not able to be maintained.

Outdoor areas

We will encourage the use outdoor spaces as much as possible. Classes can be held at teacher's discretion, lunches, or other larger cohorts will use available outdoor space.

Visitors and Volunteers

- ◆ We will suspend many of our volunteer programs to limit the number of people inside our buildings.
- ◆ We will also be limiting visitors who enter any building to help maintain social distancing. Volunteers will be required to check in at front office.
- ◆ Volunteers will be required to wear face coverings at all times while indoors.
- ◆ Volunteer contact with students will be kept to a minimum.
- ◆ At this time, all volunteers will need to show proof of vaccination to our front office staff. Specific procedures are being developed. (as of October 18)
- ◆ Visitors (15 minutes and under) will not need to show proof of vaccine.

Athletics & Co-curricular Activities

As an Oregon High School Athletic Association (OSAA) member, CSLA is required to abide by the direction of the OSAA for high school sports. The OSAA is under the guidance of the OHA and other state governing bodies. The OSAA is continuing to work on COVID-19 acceptable practices and competition within the OHA structure. There have been many changes throughout the pandemic. Nevertheless, our athletic director, and coaches are prepared to implement appropriate or mandated protocols for the safety of our student-athletes, coaches, and fans while offering opportunities within the guidelines. Grade school and middle school sports will likely follow the criteria and protocols established for high school sports.

Student Government activities will be modified to meet all school requirements.

Gatherings and Field Trips

- ◆ Field Trips, full student assemblies, special performances, school-wide parent meetings etc., are allowed but will be scrutinized for the ability to ensure proper safety protocols to allow for these opportunities.
- ◆ When small school related meetings or gathers are held, we will promote social distancing, face coverings (or outdoor meetings) and all safety protocols with limited group sizes.
- ◆ Online meetings may be utilized where needed.

Transportation

For at least the first semester, 2021-22, CSLA will not be responsible for any transportation to or from school events.

- ◆ Organizers will inform parents as to when and where students need to be for an off-campus event.
- ◆ CSLA can supply contact lists of the families/parents involved in the trip.
- ◆ Drivers of other students need to be cleared volunteers
- ◆ Parents are free to organize their own carpools understanding CSLA is not vetting drivers and their records. Parents within the group will need to communicate to coordinate the carpool.
- ◆ Faculty/Staff must drive themselves.

Daily Sanitation Protocols

School-Wide Disinfections

Although the primary method of coronavirus transmission is reportedly through respiratory means, clean surfaces and environments play an important role. We will utilize a combination of CDC-approved to clean desks, common tables, countertops, doorknobs and handles, hands-on learning items, bathroom fixtures, phones, and other high-touch areas.

- ◆ Daily (evening) cleaning and sanitizing by the school's cleaning company will take place with safe disinfectants labeled for use against SARS-CoV-2, paying particular attention to high touch surfaces like door handles, desks, and shared materials.
- ◆ All classrooms and common spaces will have access to cleaning supplies.
- ◆ Interior doors will be propped open during class changeovers, and whenever else it is practical to avoid significant touching by multiple people.
- ◆ The Heating/Ventilation/Air Conditioning (HVAC) systems in each building will be set to draw in fresh outside air rather than using recycled air.
- ◆ Teachers will be instructed to keep windows and doors open whenever feasible to assist with good ventilation.
- ◆ UVC lights may be used in certain areas to assist with sanitation.

Hand Sanitizer Stations

Teachers, staff, and students will keep their hands sanitized using the dispensers of hand sanitizer that are installed at every building entrance and in every classroom.

Hygienic Practices

We rely on parents to promote the same hygienic practices we will direct students to practice at school, including:

- ◆ [Covering coughs or sneezes with a bent arm or tissue and washing hands or using hand sanitizer afterward;](#)
- ◆ [Washing hands with soap and water for 20 seconds,](#) dry hands with a paper towel, and using the paper towel to turn off the faucet;
- ◆ When hand washing is not available, utilize hand sanitizer
- ◆ Keeping hands away from nose, mouth, and eyes; and
- ◆ Avoiding the sharing of food, drinks, and personal care items (e.g. lip balm).

Home Learning for Homebound Students

With CSLA utilizing fulltime on-campus learning, our resources may not facilitate a long-term home learning option for an individual or small group of students. For shorter-term periods, we expect to require some students to stay at home (noted as “exclusion” by the ODE), if only for a short period of time, as a precautionary measure. This exclusion would occur if a meets any of the criteria on the exclusion chart.

In addition to the CSLA Parent Student Handbook, the following attendance categories are in effect:

- ◆ Attendance policies will take into account the special circumstances of the COVID-19 pandemic. Homebound students will not be penalized for their absences.
 - Absent (due to COVID-19 illness): no attendance penalty or academic restrictions
 - Absent (due to parent COVID-19 health concerns): no attendance penalty or academic restrictions
 - We will offer the following flexibilities to accommodate students who are homebound:
- ◆ Classes with a student not able to be physically present due to COVID-19 related concerns, may be live-streamed only when possible and appropriate (depending on daily curriculum, etc.).
 - Students with symptoms, will certainly not be expected to attend when online is available, but are welcome at any time.
- ◆ Classroom teachers will be in close contact with homebound students.
- ◆ School materials will be made available to homebound students. Details will be coordinated with each student's family.

Procedure for Positive or Suspected COVID-19 Case

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.

- ◆ Should a student, staff member, faculty member, administrator or other person closely related to on campus activities be diagnosed with COVID-19, we will immediately move to the [Planning for COVID-19 Scenarios in Schools guidance](#). This guidance will include contacting and following the guidance of Yamhill County Health and Human Services.

The following procedure is to be used if a student or employee *on campus* is identified as COVID-19 positive or suspected positive.

Student or employee is respectfully asked to isolate in the holding room.

- ◆ For students, the front office staff will call parents or legal guardians for pickup.
- ◆ For employees, the front office staff will coordinate with school leadership to manage follow-up.
- ◆ Student or employee will be provided appropriate personal protection equipment and any employee interacting with the confirmed or suspected case will be provided with a mask and gloves.

Isolation Space

CSLA have utilize one of a few designated rooms utilized as a holding/isolation area for sick students that are waiting to be picked up. The intent is to mitigate the risk of transmission from an ill individual to well individuals.

CDC guidelines should be followed with four driving principles in mind:

- ◆ Isolation space must be private space
- ◆ Students must be supervised
- ◆ Staff must have appropriate, medical grade PPE
- ◆ Physical distancing must be maintained

- ◆ All attempts should be made to pick up sick student as soon as possible.

Follow-up Protocol

In individual cases,

- ◆ School leadership will follow all guidance in the [Planning for COVID-19 Scenarios in Schools guidance](#)
- ◆ School leadership communicates appropriate details to the school community.
- ◆ School leadership will update the school community (parents/guardians) via ParentAlert or FACTS mass communications system (email/text/voice) with appropriate incident details.

In the case of a large break out:

- ◆ School leadership will coordinate potential closure decision with Yamhill County Health and Human Services.
- ◆ School leadership will coordinate potential closure decision with the CSLA Board of Directors.
- ◆ School leadership communicates appropriate details to the school community.
- ◆ School leadership will update the school community (parents/guardians) via ParentAlert or FACTS mass communications system (email/text/voice) with appropriate incident details.

Contact Tracing

The purpose of contact tracing is to be able to identify those with the potential exposure risk of a communicable disease. C.S. Lewis staff will be expected to keep accurate records of attendance, seating charts, and any other information which could help identify an exposure.

OHA has updated its exposure (close contact) definition for K–12 settings in alignment with CDC guidance released in July 2021. There is now an exception to the exposure definition (having been within 6 feet of a confirmed or presumptive COVID-19 case for 15 minutes or more within one day) for the K–12 indoor classroom setting: **students** who were within 3 to 6 feet of someone with COVID-19 where both students were engaged in consistent and correct use of well-fitting masks **and** other K–12 school prevention strategies (such as universal and correct mask use, physical distancing, increased ventilation) were in place are not considered exposed. **This exception does not apply to teachers, staff, or other adults.**

To be able to provide necessary information for the LPHA, CSLA will plan in advance by:

- ◆ Having easily accessible rosters of each class
- ◆ A log will also be kept in the main office to identify individuals who:
 - Are absent due to COVID-19
 - Have any symptoms and have been in close contact with a confirmed case
 - Call out absent with compatible illness or symptoms associated with COVID-19
 - Have been dismissed to home for symptoms associated with COVID-19

All students should always be accounted for, whether injured or ill, or visiting the front office for alternate reasons. It is important to be able to determine potential exposures in the front office, thus all students visiting the front office for health reasons must be logged in.

Vaccinations-Staff, Faculty, Volunteers

- ◆ Beginning Oct. 18, 2021, our staff, faculty and volunteers need to meet [OAR 333-019-1030](#). To meet this requirement, staff, faculty and volunteers will need to show proof of full vaccination or have a medical or religious exception confirmed by Mr. Swanson and Mr. Wallo
- ◆ Exceptions can be approved for medical or religious reasons.
- ◆ Specific procedures for the submission of proof of vaccination and submitting an application for an exception will be distributed to faculty/staff and made available for volunteers on our volunteer website.
www.cslewisacademy.com/volunteering
- ◆ [OHA, School Program Vaccine Rule FAQ](#)

Communication Systems

CSLA will implement and provide communications, including health promotion, communication of policies and restrictions, and communication regarding potential exposures or exclusions.

Signs and Messages

- ◆ Post signs in highly visible locations (e.g., school entrances, restrooms) that promote everyday protective measures and describe how to stop the spread of germs (such as by properly washing hands and properly wearing a cloth face covering where applicable)
- ◆ Messages will be included on websites, in newsletters, and on school social media

Direct Communication

In addition to posting exclusion criteria on web pages and in newsletters, families will be advised on policies related to sick students, potential home isolation criteria, and student exclusion criteria.

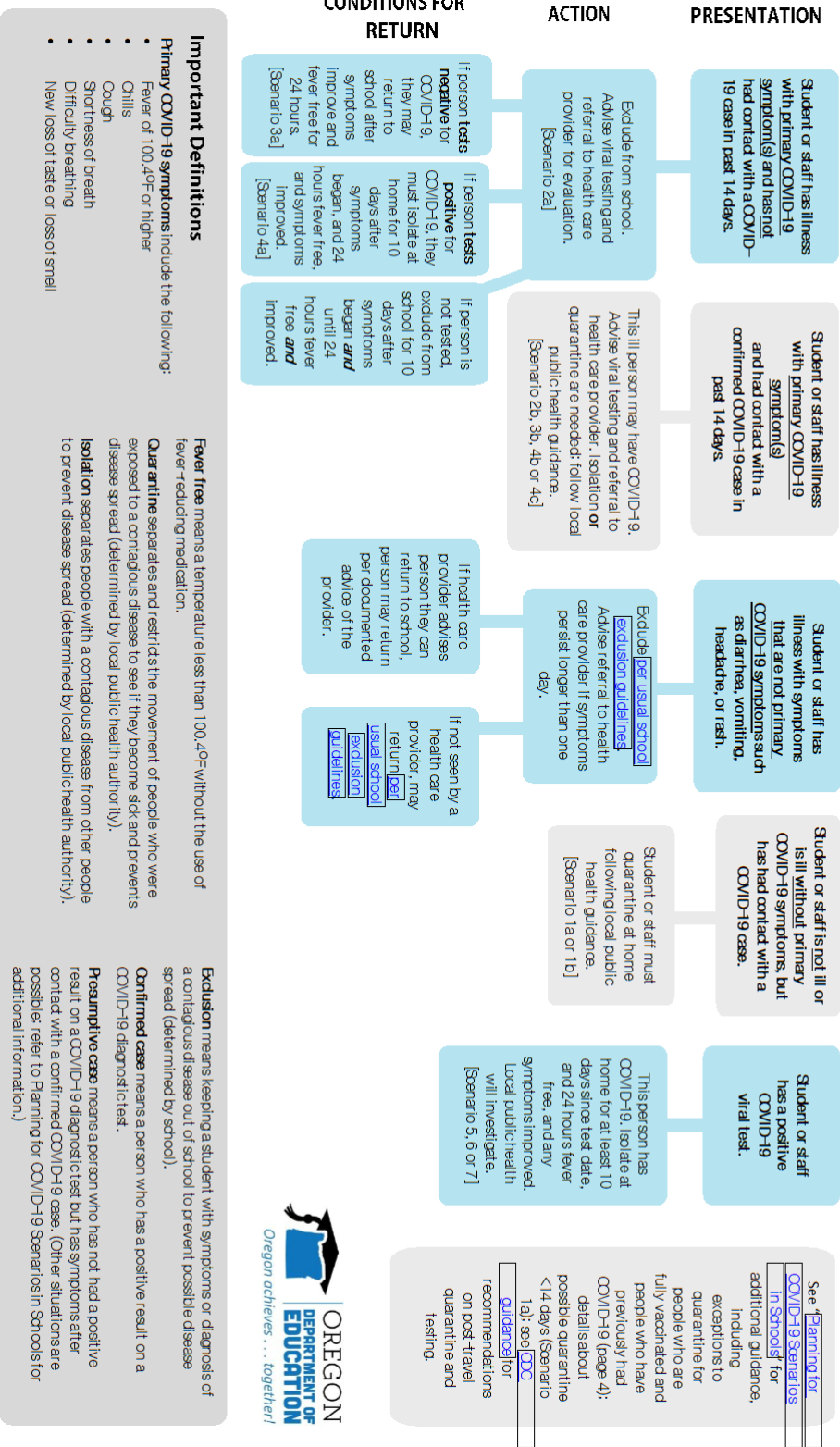
Families and staff will receive communication on logistical changes for arrival and departure, physical distancing, schedule changes, and non-pharmaceutical interventions employed

Age-appropriate classroom curriculum will be used to encourage positive hygiene behaviors

- ◆ Families will be advised to report if:
 - Their student has symptoms of illness,
 - Their student has had a positive test for COVID-19,
 - Their student was exposed to someone with COVID-19.
- ◆ The staff point of contact, to the best of their ability should attempt to obtain:
 - Date of onset of illness
 - Date of positive test, if applicable
 - Last day of exposure to confirmed case (for case contacts)
 - Last day present in the school building
- ◆ Confidentiality should be strictly observed

APPENDIX I – Covid 19 Exclusion Summary Guidance

COVID-19 Exclusion Summary Guidance for K-12
Version 7/22/2021



Important Definitions

- Primary COVID-19 symptoms include the following:
 - Fever of 100.4°F or higher
 - Cough
 - Shortness of breath
 - Difficulty breathing
 - New loss of taste or loss of smell

Fever free means a temperature less than 100.4°F without the use of fever-reducing medication.

Quarantine separates and restricts the movement of people who were exposed to a contagious disease to see if they become sick and prevents disease spread (determined by local public health authority).

Isolation separates people with a contagious disease from other people to prevent disease spread (determined by local public health authority).

Exclusion means keeping a student with symptoms or diagnosis of a contagious disease out of school to prevent possible disease spread (determined by school).

Confirmed case means a person who has a positive result on a COVID-19 diagnostic test.

Presumptive case means a person who has not had a positive result on a COVID-19 diagnostic test but has symptoms after contact with a confirmed COVID-19 case. (Other situations are possible; refer to Planning for COVID-19 Scenarios in Schools for additional information.)

APPENDIX II – Key Links and Resources

- ◆ [Planning for Covid-19 Scenarios in Schools](#)
- ◆ [Planning for the 2021-22 School Year and the RESILIENCE FRAMEWORK \(ODE/OHA\)](#)
- ◆ [CDC- Schools and Childcare](#)
- ◆ [Communicable Disease Guidance for Schools ~ Oregon Department of Education \(ODE\)/Oregon Health Authority \(OHA\)](#)
- ◆ [Alameda County Public Health Department \(2013\) Communicable Disease.](#)
- ◆ [A quick Guide to Common Childhood Diseases.](#)
- ◆ [Influenza \(CDC\)](#)
- ◆ [Communicable Disease: A guide for Schools in Montana.](#)
- ◆ [Virginia Department of Health \(2011\) FAQ Respiratory Hygiene and Cough Etiquette.](#)
- ◆ [Acute Viral Respiratory Infections.](#)

FREQUENTLY ASKED QUESTIONS

Q: How will classrooms be set up to comply with the recommended distancing?

To the extent possible, student chairs/desks will be arranged to accommodate a minimum of 3 feet of distancing. In addition, other mitigation strategies will be used including mask wearing and frequent handwashing.

Q: Will P.E. classes occur inside?

P.E. classes, especially those with strenuous activity will be held outside to the extent possible. Weather will dictate a great deal of P.E. location.

Q: Will students share supplies?

Sharing of supplies will be limited. As always, student will be encouraged to do frequent handwashing or sanitizing.

Q: Can students drink water in class?

If allowed by the teacher, students can take a sip and then replace their masks.

Q: How often will school spaces be cleaned?

The CDC advises that when no people with positive or presumptive COVID-19 cases are known to have been in a space, cleaning once a day is enough to sufficiently remove any virus that may be on surfaces and help maintain a healthy facility. Our custodial staff will clean and disinfect spaces daily.

Q: What products will be used to disinfect school spaces?

Staff and custodians will use disinfection products that are on the Environmental Protection Agency's (EPA) List N, which is a list of products that kill the coronavirus SARS-CoV-2 (COVID-19).

Q: How can I report a COVID-related protocol concern?

Parents, students and staff can personally or anonymously report any COVID-related protocol concern by contacting Steve Wallo or Clay Swanson

Q: How can I find out how many COVID-19 cases have been reported at CSLA?

From the start of the pandemic CSLA has maintained a very transparent stance in our xxxxxx. We will certainly notify all families with exposure concerns anytime we are aware of them and track that data as best we can.

Q: Will students be screened for COVID-19 symptoms?

Parents/guardians should perform a daily health evaluation before sending students to school. If a student is exhibiting a fever, cough, chills, shortness of breath, difficulty breathing, a new loss of taste or smell or any of the primary Covid 19 symptoms, the student should stay home.

Staff members will continually be aware via visual checks as students arrive at school and go about their day.

Q: What happens if a student exhibits COVID-19 symptoms at school?

- If a student exhibits or complains of any COVID-19 symptoms (fever, cough, chills, shortness of breath, difficulty breathing, a new loss of taste or smell), an adult will accompany the student to the school isolated space. A designated staff member will then take the student's temperature. If a staff member has permission from a parent/guardian, the student will be given a diagnostic, self-administered Abbot BinaxNOW COVID-19 test.
- If the COVID-19 test is positive, a parent/guardian will be called to pick up the student, and the student will need to isolate for 10 days.
- If the COVID-19 test is negative or does not take the test, a parent/guardian will still be called to pick up the student. The student would not be required to quarantine if there were no known COVID contacts and instead, would follow

the non-symptomatic protocol to return. If there were known COVID contacts, the student would need to quarantine for 10 days.

- The above applies to both vaccinated and unvaccinated students.

Q: What happens if a student exhibits non-COVID 19 symptoms (e.g. runny nose)?

The student would follow the school sickness guidance. Any absence would be handled in the traditional way.

Q: What happens if a staff member exhibits COVID-19 symptoms at work?

The employee should notify an administrator. The employee will be instructed to leave work and encouraged to see a health care provider for evaluation.

Q: Will COVID-19 testing be available at schools?

Diagnostic self-administered Abbot BinaxNOW COVID-19 testing will be offered to students at school in two circumstances: (1) if they develop new symptoms of COVID-19 while at school and (2) if they are exposed to COVID-19 in a school group and the Yamhill County Health recommends testing.

COVID-19 testing for students is optional, and parents/guardians may refuse consent. Parents/guardians will be asked to provide consent for COVID-19 testing on a form available in the main office.

Q: Will CSLA staff be required to get the COVID-19 vaccine?

Per the OHA's recent requirement, CSLA will now require all staff members to provide proof of vaccination; with exceptions possible for eligible medical or religious reasons. CSLA appreciates the support shown by our current staff and faculty. For those of who need to be vaccinated, please check the state's [Get Vaccinated Oregon website](#) or call 211 for the nearest vaccination location. According to the governor's mandate, all employees must receive the two-dose Pfizer or Moderna vaccine OR the single-shot Johnson & Johnson vaccine AND be at least 14 days past their final vaccine dose by October 18 or six weeks after the date that the Food and Drug Administration (FDA) approves a vaccination, whichever is later. All vaccines are free of charge.

Q: Will I know if my student's teacher is vaccinated before October 18?

CSLA will not be releasing the vaccination status of individual staff members.

Q: Will volunteers be required to show proof of vaccination?

Per the OHA's requirement, all volunteers will be required to show proof of vaccination to volunteer in a school. This will begin October 18 and process details are being designed.

Q: How can I record my student's COVID-19 vaccination status?

On your student's medical form (under Immunization Registration), you voluntarily can enter whether your child has received the COVID-19 vaccine. While the vaccine is not required, this information is useful to our school in cases where quarantines are being considered.

Q: Will all students and staff be required to wear masks at school?

The Oregon Health Authority (OHA) now requires masks indoors in all K-12 schools for staff, students and visitors, regardless of whether they're vaccinated or not. The rule applies to individuals ages 5 and older. The requirement aligns all Oregon schools with the most recent guidance issued by the Centers for Disease Control and Prevention (CDC) and American Academy of Pediatrics (AAP). Both recommend mandatory indoor masking in schools because of the recent spread of the delta variant of COVID-19.

Q: What kinds of masks are acceptable?

CSLA is following the [CDC's guidance](#) on how to select, wear and clean masks. The school is also providing disposable masks (adult and student sizes).

Q: Can a student be exempted from wearing a mask?

Some students may be entitled to accommodations related to Oregon face covering requirements. Per Oregon Department of Education direction as of September 2021, in order to be entitled to an accommodation, a student must be eligible for either a Section 504 Plan (under the Rehabilitation Act of 1973) or an Individualized Education Program (IEP) (under the Individuals with Disabilities Education Act). An evaluation must be conducted prior to considering a student for eligibility under Section 504 or the IDEA.

Q: What happens if students remove their masks?

Staff will insist that students correctly wear their masks. After reasonable intervention on the part of the teacher, non-compliance or refusal will be reported to the school principal for further support.

Q: Will students be able to remove masks while eating or drinking?

Students will be able to remove masks while eating and drinking.

Q: Will students be able to remove masks during outdoor recess?

Students will be able to remove masks during outdoor recess while being monitored for distancing by the recess monitor.

Q: Will students be able to remove masks during outdoor classes, including outdoor P.E.?

Students will be able to remove masks during outdoor classes at the discretion of the teacher and related to the activity.

Q: When else are masks required?

Students and staff must wear masks when engaging in educational activities such as field trips or off-campus classes during regular school hours and when engaging in educational activities indoors but outside of regular school hours.

Q: Will students be able to take mask breaks?

Teachers will coordinate mask breaks outdoors.

Q: Can students wear face shields instead of masks?

A face shield may be worn instead of a mask if an individual cannot wear a mask for medical reasons. Students must have documentation from their doctors. Masks are preferred over face shields, as they provide better containment of small aerosols that can be produced while talking.

Q: What is the difference between a positive or presumptive COVID-19 case? Positive (Confirmed) COVID-19 Case: Report of a person with COVID-19 and meeting confirmatory laboratory evidence.

Presumptive COVID-19 Case: The individual has at least two of the following COVID-19 symptoms: shortness of breath, cough, fever, new loss of smell or taste; has not had a positive COVID-19 viral test; AND had close contact with a confirmed case in the past 14 days.

Q: What constitutes close contact?

OHA has updated its exposure (close contact) definition for K–12 settings in alignment with CDC guidance released in July 2021. There is now an exception to the exposure definition (having been within 6 feet of a confirmed or presumptive COVID-19 case for 15 minutes or more within one day) for the K–12 indoor classroom setting: **students** who were within 3 to 6 feet of someone with COVID-19 where both students were engaged in consistent and correct use of well-fitting masks **and** other K–12 school prevention strategies (such as universal and correct mask use, physical distancing, increased ventilation) were in place are not considered exposed. **This exception does not apply to teachers, staff, or other adults.**

Q: What happens if a student is diagnosed with a positive or presumptive case of COVID-19?

The student will have to isolate at home for 10 days and is encouraged to seek medical care.

Q: Will students need to quarantine if a positive or presumptive case of COVID-19 is reported in school?

- If a student comes in contact with another student with a positive or presumptive case of COVID-19 in a *classroom setting*, the student does not need to quarantine if they maintained at least 3 feet of distance and were wearing a mask at the time of exposure.
- If a student comes in contact with another student with a positive or presumptive case of COVID-19 *outside of a classroom setting*, the student does not need to quarantine if they maintained at least 6 feet of distance and were wearing a mask at the time of exposure.
- If a student comes in contact with an *adult* with a positive or presumptive case of COVID-19, the student does not need to quarantine if they had maintained at least 6 feet of distance and were wearing a mask at the time of exposure.
- If a student comes in contact with another student or an adult with a positive or presumptive case of COVID-19, the student does not need to quarantine if they're fully vaccinated and at least 14 days beyond completion of the vaccine series at the time of the exposure.
- Even so, the Centers for Disease Control and Prevention (CDC) recommend fully vaccinated people who have had a known exposure to someone with a positive or presumptive case of COVID-19 should be tested 3 to 5 days after exposure, regardless of whether they've had symptoms.
- School personnel in cooperation with the Yamhill County Health will do contact tracing and communicate with affected students and families in a timely manner.
- However, in the case of the student who actually is positive or presumptive for COVID-19, that student's classmates would be evaluated to determine close contact (see above) and may be subject to quarantine.

Q: How will parents be notified if a positive or presumptive case of COVID-19 is reported at school?

School staff in coordination with Yamhill County Health will identify any close contacts. An administrator will then send a letter via FACTSIS to those close contacts, notifying them of the need to quarantine and to be tested for COVID-19. (The COVID-positive student or staff member will not be identified.) Phone calls may also be made.

Q: Will the entire school or class be notified if there is a positive or presumptive case of COVID-19 reported?

Typically, only those students and staff identified as close contacts to the positive or presumptive case will be notified.

Q: If a teacher tests positive for COVID-19, do all of the teacher's students have to quarantine?

If a school cannot confirm that 6 feet of distancing was consistently maintained during the school day, any unvaccinated students and vaccinated students showing COVID-19 symptoms will have to quarantine.

Q: If a student's parent/guardian, sibling or immediate family member tests positive for COVID-19 and that student quarantines, will other students who've been around that student need to quarantine?

No. Only unvaccinated students who are in close contact with a positive or presumptive positive case need to quarantine.

Q: If a student is quarantined because of a positive or presumptive COVID-19 exposure, can the student get a COVID-19 test, test negative and return to school before the 10-day quarantine ends?

No. A student cannot test out of quarantine. If a student is quarantined, that student will need to stay home for the full 10 days.

Q: When can students who tested positive for COVID-19 return to school?

Students can return after 10 days of isolation if their symptoms are improving and they are fever-free for 24 hours.

Q: How will students continue to learn in quarantine?

The health and safety of our students is our number one priority. Students should be monitored for symptoms of COVID-19 while they are in quarantine. Students will have the opportunity to do schoolwork from home if they feel well enough. Teachers will access and determine a course of action dependent upon the situation. The number of student's in

quarantine and the level of symptoms can affect this plan. A student's grade cannot be negatively impacted due to time in quarantine.

Students will be able to be marked present for attendance purposes for each day that they complete online learning tasks and have two-way communication with the assigned educator (e.g. email, phone, Zoom call, etc.).

Q: Will students be discipline for getting too close?

Our students understand the need for safety protocols. We're confident that through positive reinforcement and reminders, our students will comply with masking and social distancing rules. Students, however, will not be disciplined for inadvertently getting closer than required distances.

Q: Will equipment be cleaned after each use?

There will be no touch-point cleaning of playground equipment after use. Students will be encouraged to wash their hands upon re-entering school.

Q: Will students be required to socially distance?

In accordance with the recommendations from the Oregon Department of Education (ODE), classrooms will be set up to maintain 3 feet of social distancing, to the extent possible. When it's not possible to maintain a physical distance of at least 3 feet, it will be especially important to layer multiple prevention strategies, such as mask wearing and frequent handwashing. Students are encouraged to exercise at least 6 feet of social distance to the extent possible especially with adults.

Q: How is my student's teacher supposed to assist my student if they have to maintain 6 feet of distance?

There may be times when a staff member needs to get closer than 6 feet to assist a student. However, as long as that staff member doesn't spend more than 15 minutes (cumulative total per day), the interaction does not constitute a close contact. In addition, all staff are required to wear masks.

Q: How will middle and high school students move between classes?

Students will move from one class to another as they have in the past. Schools will emphasize face coverings and distancing as strategies to support student health and safety.

Q: How is CSLA addressing proper ventilation for classrooms?

CSLA is promoting as much ventilation as possible in all learning spaces. All spaces have open air windows and many include portable air purifiers which are to be left on during the school day. CSLA has had all furnace and filtration systems serviced with new filters during the summer.

Q: Will visitors be allowed on school property, during school hours?

Visitors will be allowed for 15 minutes or less during the school day. For example, parents can drop off paperwork in the office or pick up a child.

Admissions office visitors may be on campus for 30 minutes, but are limited to 15 minutes inside of buildings.

Q: Do visitors have to wear masks?

Visitors must be masked.

Q: Will visitors have to provide proof of vaccination?

No

Q: Will visitors be allowed to have lunch with students?

No

Q: Will parents/guardians and student be able to attend open houses and welcome events?

Visitors will be allowed to attend open houses and welcome events. All visitors should be masked and practice social distancing between family groups.

Q: Will parents/guardians and students be able to evening special events?

CSLA is evaluating Back-to-School Nights, Parent-teacher conferences and similar events at this time. Details will be released closer to each event including the possibility of virtual events.

Q: What about athletic competitions or other indoor or outdoor events during non-school hours?

Visitors are required to wear masks at all indoor events and outdoor events where proper distancing cannot be maintained during non-school hours. Visitors also are encouraged to maintain at least 6 feet of distance between families/groups, to the extent possible. We recognize that social distancing at some athletic competitions may be challenging, so please only attend if you're comfortable doing so.

Q: Will volunteers be allowed?

Before October 18: Volunteers will be allowed to volunteer for tasks identified by staff and approved by the principal or administrator.

Starting October 18: To comply with the OHA requirement, all volunteers will need to provide proof of vaccination.

Q: How will volunteers provide proof of vaccination?

CSLA is currently developing a process for accepting this documentation.

Q: How does a volunteer apply for a medical or religious vaccination exemption?

CSLA is currently developing a process for accepting this documentation.

Q: Does the vaccination rule apply to students who volunteer?

Yes, student-volunteers (ages 16 and older) would need to provide proof of vaccination.

Q: Will volunteers need to wear masks?

All volunteers will need to wear masks following the school requirements.

Q: Will students need to wear masks to participate in after-school athletics?

Students are not required to wear masks indoors or outdoors when practicing or playing a competitive sport at any level, including cheerleading and dance/drill, outside of normal school hours.

Students and coaches who are not actively participating (i.e. on the sideline during an indoor or outdoor competition) are required to wear masks.

Q: Will referees need to wear masks?

Per the Oregon School Activities Association (OSAA), officials on the field actively officiating soccer games, plus basketball officials on the court are not required to wear masks given the high level of physical exertion required by the official. Referees in volleyball are required to wear masks as those roles don't require a high level of physical exertion by the official. Volleyball line judges, track and field officials, and score table staff are required to wear masks as those roles don't require a high level of physical exertion by the official.

Q: Will indoor sports be allowed to occur?

Per the Oregon Schools Activities Association (OSAA), indoor sports like volleyball will be allowed as long as all safety precautions are followed.

Q: Will students-athletes need to socially distance?

Students-athletes are encouraged to exercise at least 3 feet of social distance from other students and at least 6 feet of distance from adults, to the extent possible when not actively participating.

Q: What are the rules for spectators at athletic events?

Spectators are required to wear masks at all indoor and outdoor events. Spectators also are encouraged to maintain at least 6 feet of distance between families/groups, to the extent possible. We recognize that social distancing at some games may be challenging, so please only attend if you're comfortable doing so. If 6' of space is maintained on the sidelines at soccer matches between family groups, masks are not mandatory.