




East Linn Christian Academy Schools

Pandemic Plan

Communicable Disease Management Plan to help prevent and limit the spread of COVID 19



PANDEMIC PLAN

2020 - 2021

Introduction

Seasonal Respiratory Illness, Seasonal Viruses and Pandemic Viruses

Flu is a contagious respiratory illness caused by influenza viruses that infect the nose, throat, and sometimes the lungs. It can cause mild to severe illness, and at times can lead to death (CDC, 2020).

Respiratory Illness

There are several viruses that routinely circulate in the community to cause upper viral respiratory illnesses. These viruses include rhinoviruses, coronaviruses, adenoviruses, enteroviruses, respiratory syncytial virus, human metapneumovirus, and parainfluenza. The “common cold” is caused by rhinoviruses, adenoviruses, and coronaviruses. The symptoms of these seasonal illnesses may vary in severity but include cough, low-grade fever, sore throat (SDDH, 2019; Weatherspoon, 2019).

Influenza

Influenza (flu) is a contagious respiratory illness caused by influenza viruses. There are two main types of influenza (flu) virus: Types A and B. The influenza A and B viruses that routinely spread in people (human influenza viruses) are responsible for seasonal flu epidemics each year. Influenza can cause mild to severe illness. Serious outcomes of flu infection can result in hospitalization or death. Some people, such as older people, very young children, and people with underlying health conditions or weak immune systems, are at high risk of severe flu complications. Routine symptoms associated with flu include fever, cough, sore throat, runny nose, muscle aches, headaches, fatigue, and sometimes vomiting (CDC, 2020).

Novel, Variant and Pandemic Viruses

Novel viruses refer to those not previously identified. A novel virus is a new strain or a strain that has not previously infected human hosts. When a virus that has historically infected animals begins to infect humans, this is referred to as a variant virus. Pandemic refers to the global circulation of a novel or variant strain of viruses. The most common viruses associated with novel and pandemic outbreaks are influenza A and human coronavirus. A flu pandemic occurs when a new virus that is different from seasonal viruses emerges and spreads quickly between people, causing illness worldwide. Most people will lack immunity to these viruses. Pandemic flu can be more severe, causing more deaths than seasonal flu. Because it is a new virus, a vaccine may not be available right away. A pandemic could, therefore, overwhelm normal operations in educational settings (CDC, 2016).

Seasonal Flu vs. Pandemic Flu

What is seasonal flu?



Influenza (flu) is a contagious respiratory illness caused by flu A and B viruses that infect the human respiratory tract. Annual flu epidemics occur among people worldwide.

How often do seasonal flu epidemics occur?



Epidemics of seasonal flu happen every year. Fall and winter is the time for flu in the United States.

How do seasonal flu viruses spread?



Flu viruses are thought to spread mainly from person to person through droplets made when someone with flu coughs, sneezes, or talks near a person (within 6 feet).

Is there a vaccine for seasonal flu?



Seasonal flu vaccines are made each year to vaccinate people against seasonal flu. Everyone 6 months and older should get a flu vaccine every year. For most people, only one dose of vaccine is needed.

Are there medications to treat seasonal flu?



Prescription medications called antiviral drugs can treat seasonal flu. During a severe flu season, there can be spot shortages of these drugs.

Who is at risk for complications from seasonal flu?



Young children, people 65 years and older, pregnant women, and people with certain long-term medical conditions are more likely to have serious flu complications.

What is pandemic flu?



A flu pandemic is a global outbreak of a new flu A virus in people that is very different from current and recently circulating seasonal flu A viruses.

How often do flu pandemics occur?

Flu pandemics happen rarely. Four flu pandemics have happened in the past 100 years, but experts agree another one is inevitable.



How do pandemic flu viruses spread?



Pandemic flu viruses would spread in the same way as seasonal flu, but a pandemic virus will likely infect more people because few people have immunity to the pandemic flu virus.

Is there a vaccine for pandemic flu?



Although the U.S. government maintains a limited stockpile of some pre-pandemic flu vaccines, vaccine may not be widely available in the early stages of a pandemic. Two doses of pandemic flu vaccine will likely be needed.

Are there medications to treat pandemic flu?



Flu antiviral medications may be used to treat pandemic flu if the virus is susceptible to these drugs. While a limited amount of flu antiviral drugs are stockpiled for use during a pandemic, supplies may not be enough to meet demand during a pandemic.

Who is at risk for complications from pandemic flu?



Because this is a new virus not previously circulating in humans, it's not possible to predict who would be most at risk of severe complications in a future pandemic. In some past pandemics, healthy young adults were at high risk for developing severe flu complications.

Purpose

The purpose of this document is to provide guidelines specifically related to intervention procedures and processes to be used during a novel viral pandemic. These steps are being implemented to help slow the spread of all respiratory flu viruses, including the novel corona virus. The preventative measures address the level of threat and provide incremental intervention. This document is meant to be used as a “pliable” contingency plan. Updates and revisions will be made in response to current information from health authorities regarding the level of threat.

Preventative Measures

Prophylactic vaccine and antiviral medication are appropriate interventions in some viral respiratory conditions – specifically seasonal influenza. These are not always accessible for novel strains. Non-pharmaceutical interventions (NPI’s) are essential actions that can aid in the reduction of disease transmission. It is important to note that a disease that is widely spread in the community has many options for transmission beyond the school setting, and the school can only account for NPI’s in the school setting and at school-sponsored events (CDC, 2017).



(CDC Image)

Measures to Limit the Spread

Measures to limit the spread of communicable diseases are implemented as a critical part of the school preventative plan to ensure the health/ safety of the school community. The following is a list of preventative guidelines implemented by the school as recommended by the CDC:

EVERYDAY PREVENTITIVE ACTIONS

Everyone should always practice good personal health habits to help prevent flu.

- **Stay home when you are sick.** Stay home for at least 24 hours after you no longer have a fever or signs of a fever without the use of fever-reducing medication.
- **Cover your coughs and sneezes with tissue.**
- **Wash your hands with soap and water** for at least 20 seconds.
- **Clean frequently touched surfaces often and clean objects between use.**

NPI’s RESERVED FOR A FLU PANDEMIC

Educators should be prepared to take these actions, if recommended by public health officials.

- **Be prepared to allow staff and students to stay home if someone in their house is sick.**
- **Increase space between people at school to at least 6ft** (as much as possible).
- **Modify, postpone, or cancel large school events. Temporarily dismiss students attending childcare facilities, and K-12 schools.**

Measures to Control a Novel Virus

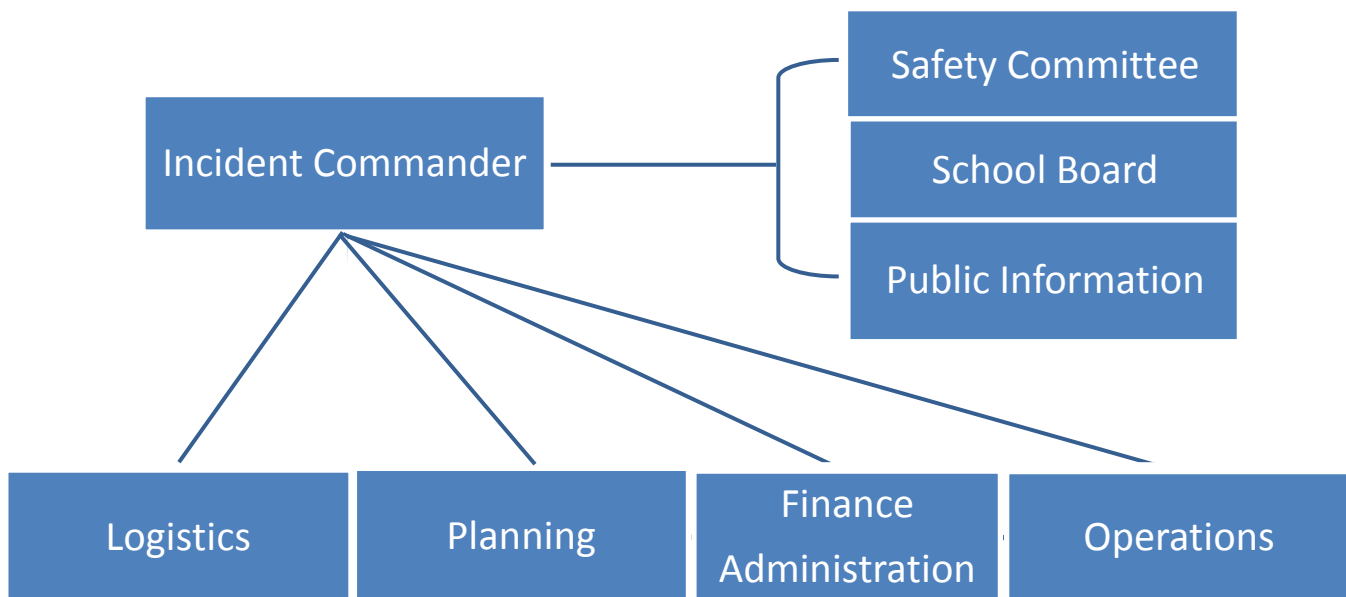
Historical pandemic responses provide a general guide for creating an evidence-based framework that can be used to establish procedures for controlling a novel virus outbreak in the school setting. Measures taken to control a novel virus are based on the current situation, context and level of severity. The level of response will be based on information provided by local health authorities. Routine controls and exclusion measures will be used.

Global Virus Prevention

Extended absenteeism and school closure measures may be used when a novel virus is identified globally. If the situation warrants international travel restriction due to a global pandemic; students, staff and parents are expected to inform the school of any travel outside of the United States.

Regional and National Novel Virus

When a novel disease is reported in the United States the geographic location and specific public health messaging and directions will be taken into consideration and addressed according to the Center of Disease Control. Prevention will be implemented based on current guidance from the Center for Disease Control (CDC) and Oregon Health Authorities (OHA). When cases are reported in the local region, the school will assemble a response team. The response team should consist of individuals who can fulfill roles with expertise in district policy and administration, clinical information, human resources, building level management, risk management, and facilities. The response team will use school-centered communication provided by the Local Health Department to communicate with the school community using the school emergency alert system, email, website and social media. If OHA reports a pandemic alert in Linn County the school will subscribe to pertinent pandemic specific content being provided. The superintendent of the district will subscribe to the alerts to keep track of updates and report to the response team.



When public health authorities deem a novel virus pandemic threat, the CDC checklist (CDC 2019) for schools will be used by the response team to establish the specific emergency response and initiate the level of action required. The response team will initiate distance learning in the event of a school closure. During this time the response team will hold regular meetings to evaluate and respond to information being provided by LH A and ODE.

LEVEL 1 ACTIONS: Prevention Focus

The following actions will be implemented when a virus is reported in the region:

Personal NPI's	Community NPI's	Environmental NPI's	Communication
<ul style="list-style-type: none"> • Increase good hygiene instruction: <ul style="list-style-type: none"> - Cover cough/sneeze - Throw away tissue - Wash hands often - Stay home when ill • Increase routine hand washing during school day • Use recommended hand sanitizer • Increase communication: <ul style="list-style-type: none"> - Stay at home 24 or 72 hrs (as recommended by CDC) after symptoms are no longer present without fever reducing medication 	<ul style="list-style-type: none"> • Identify baseline absentee rates to determine if rates have increased by 20% or more • Continue communication and education on respiratory etiquette and hand hygiene in classroom and school communication • Initiate monitor screening and reporting of illness • Increase space between students in classroom • Initiate cohort groups as much as possible 	<ul style="list-style-type: none"> • Increase sanitizing of frequently used and shared surfaces • Initiate prevention sanitizing procedures as recommended by health authorities • Isolate students who become ill at school until parents can pick them up • Discourage sharing of supplies and materials in classroom 	<ul style="list-style-type: none"> • Communicate information provided by local health authorities • Provide current information for staff • Communicate with and provide information to immunocompromised student families and staff regarding attendance

LEVEL 2 ACTIONS: Intervention Focused

The following actions will be implemented when cases of novel virus are reported in the community:

Personal NPI's	Community NPI's	Environmental NPI's	Communication
<ul style="list-style-type: none"> • Continue level 1 • Follow specific Public Health directives • Plan to allow staff and students to stay home if someone in their home is sick 	<ul style="list-style-type: none"> • Continue level 1 • Follow specific Public Health directives • Increase space between people at school to at least 3 ft, as much as possible • Temporarily discontinue childcare services 	<ul style="list-style-type: none"> • Continue level 1 • Follow specific Public Health directives • Modify, postpone, or cancel large school events as directed by Local Health Authorities 	<ul style="list-style-type: none"> • Continue level 1 • Provide staff and families communication regarding directives and guidance from Local Health Authorities Provide staff with information regarding sick leave • Remind staff to stay home if ill • Advise parents to report symptoms • Request parents to report diagnosed cases to the school • Report all cases to LHA

* Local Health Authorities (LHA), Non-pharmaceutical interventions (NPI), Public Health Authorities (PHA)

LEVEL 3 ACTIONS: Response Focused

When cases of a novel virus are reported in the school setting the following actions will be implemented:

Personal NPI's	Community NPI's	Environmental NPI's	Communication
<ul style="list-style-type: none"> Continue level 1 & 2 Follow Local Health Authorities 	<ul style="list-style-type: none"> Continue level 1 & 2 Follow exclusion guidelines provided by Local Public Health Authorities Close school as directed by Local Health Authorities 	<ul style="list-style-type: none"> Continue level 1 & 2 Follow specific Public Health directives on sanitizing and cleaning facilities Close school and cancel major events as directed by Local Health Authorities 	<ul style="list-style-type: none"> Continue level 1 & 2 Provide communication presented by Local Health Authorities for school community Identify potentially impacted students

POST EVENT

Personal NPI's	Community NPI's	Environmental NPI's	Communication
<ul style="list-style-type: none"> Continue routine hand washing and respiratory etiquette based on guidance from LPHA Continue to remind staff, students and families to stay home when ill Continue to adhere to the 24 hr policy – Remain home when ill until symptom free for 24 hrs without use of fever reducing medications 	<ul style="list-style-type: none"> Follow routine illness exclusion guidelines as directed by Local Public Health Authorities 	<ul style="list-style-type: none"> Continue routine sanitation and cleaning as directed by Local Public Health Authorities 	<ul style="list-style-type: none"> Continue seasonal illness communication to prevent illness and make aware of exclusion policies Hold post event evaluation to determine adjustments and modifications to plan as needed Create plan to make up missed education as necessary

* Local Health Authorities (LHA), Non-pharmaceutical interventions (NPI), Public Health Authorities (PHA)

Special Considerations

Employee Sick Leave

Administration in coordination with the school board should address and adjust policies regarding sick leave to accommodate for extended periods of school closure, extended time for illness recovery, and any other recommendations and guidance from Local Public Health Authorities.

School Closures

If a school closure is advised by Local Public Health Authorities, the school should provide clear communication regarding the provision of continued off-site educational services to ensure comprehensive learning for all students. The school will make special accommodations for students with immunocompromised health conditions. These students should provide the school with documentation from their medical provider.

References

Oregon Department of Education in conjunction with the Oregon Health Authority, Public Health Division, and Oregon-OSHA (2020). *Communicable Disease Guidance*. https://www.oregon.gov/ode/students-and-family/healthsafety/Documents/commdisease.pdf?utm_medium=email&utm_source=govdelivery

US Department of Education (2020). *School District (K-12) Pandemic Influenza Planning Checklist - Flu.gov* (2020). <https://www.yumpu.com/en/document/read/33330081/school-district-k-12-pandemic-influenza-planning-checklist-flugov>

Center for Disease Control and Prevention (2020). *Influenza*. <https://www.cdc.gov/flu/about/index.html>

Center for Disease Control (2019). *K-12 Schools and Childcare Programs*. <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/schools-faq.html>

Center for Disease Control (2017) *Getting Your School Ready for Pandemic Flu*. <https://www.cdc.gov/nonpharmaceutical-interventions/pdf/gr-pan-flu-ed-set.pdf>

Center for Disease Control (2016) *Variant Influenza Viruses: Background and CDC Risk Assessment and Reporting*. <https://www.cdc.gov/flu/swineflu/variant.htm>

Oregon Health Authorities (2017) *Communicable Disease Reporting*. <http://public.health.oregon.gov/diseaseconditions/communicabledisease/reporting/commoabledisease/>

Oregon Department of Education (2016) *Exclusion Guidelines*. https://doh.sd.gov/diseases/infectious/disease_facts/viral-respiratory.aspx

Weatherspoon, D. (2019) *Acute Viral Respiratory Infections*. <https://www.healthline.com/health/acute-respiratory-disease>

Images:

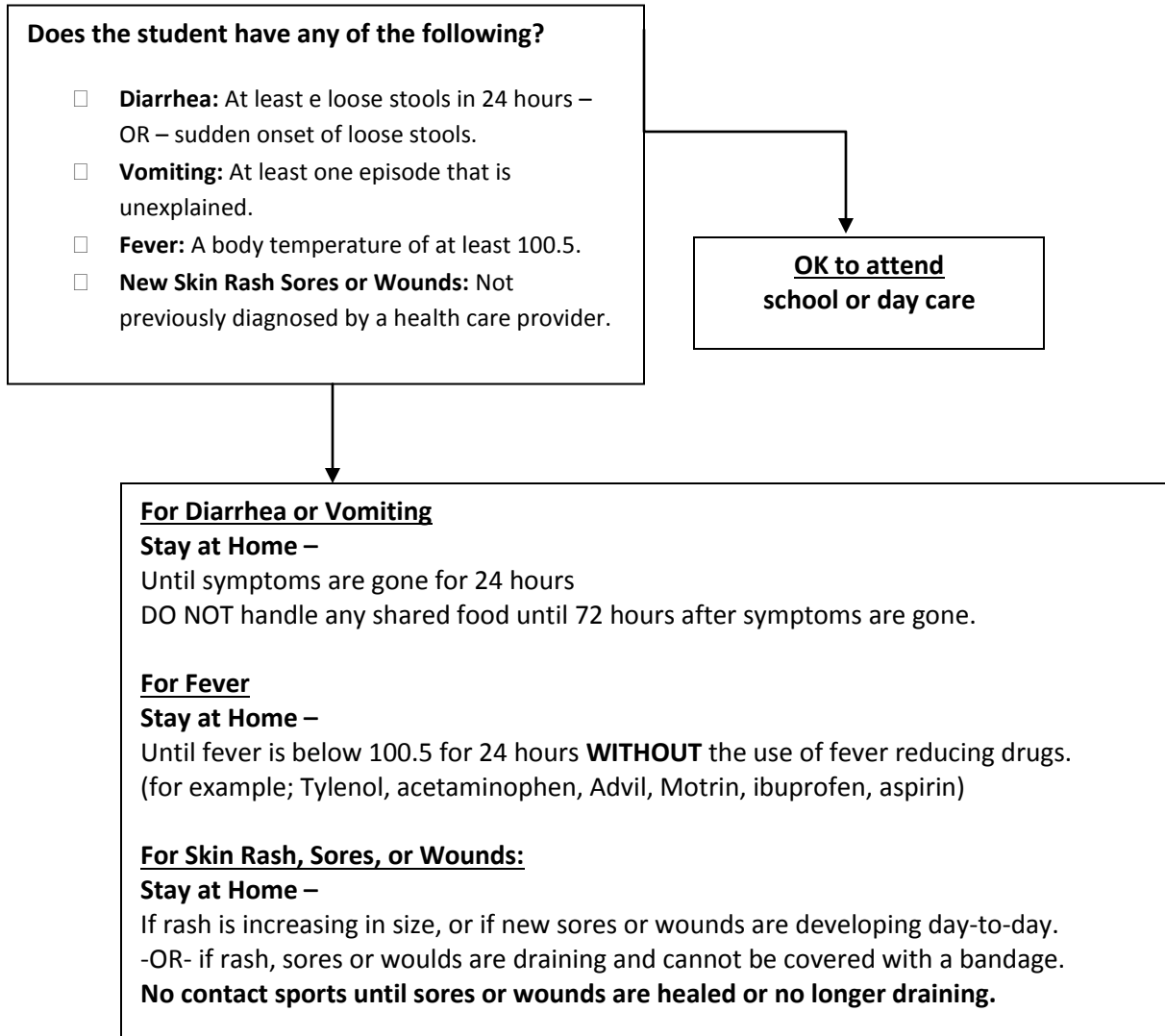
Ready.gov
<https://www.ready.gov/>

CDC.gov.
<https://emergency.cdc.gov/>

AdCouncil.
<http://coronavirus.adcouncilkit.org/all-assets/>

Yumpu.com
<https://www.yumpu.com/en/document/view/33330081/school-district-k-12-pandemic-influenza-planning-checklist-flugov>

Exclusion Guidelines for Schools and Child Care Settings



For a cough lasting 2 weeks or longer, call your health care provider.

For questions, concerns or suspected outbreak call the school office at 541-259-2304, or the local health department:
Linn County Public Health Department 541-451-5932

References:

The County Health Department may issue specific recommendations for when an individual may return to school of daycare,

Appendix B

SCHOOL DISTRICT (K-12) PANDEMIC INFLUENZA PLANNING CHECKLIST

Local educational agencies (LEAs) play an integral role in protecting the health and safety of their district’s staff, students and their families. The Department of Health and Human Services (HHS) and the Centers for Disease Control and Prevention (CDC) have developed the following checklist to assist LEAs in developing and/or improving plans to prepare for and respond to an influenza pandemic.

Building a strong relationship with the local health department is critical for developing a meaningful plan. The key planning activities in this checklist build upon existing contingency plans recommended for school districts by the U.S. Department of Education (Practical Information on Crisis Planning: A Guide For Schools and Communities <http://www.ed.gov/admins/lead/safety/emergencyplan/crisisplanning.pdf>).

Further information on pandemic influenza can be found at www.pandemicflu.gov.

1. Planning and Coordination:

Completed	In Progress	Not Started	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Identify the authority responsible for declaring a public health emergency at the state and local levels and for officially activating the district’s pandemic influenza response plan.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Identify for all stakeholders the legal authorities responsible for executing the community operational plan, especially those authorities responsible for case identification, isolation, quarantine, movement restriction, healthcare services, emergency care, and mutual aid.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As part of the district’s crisis management plan, address pandemic influenza preparedness, involving all relevant stakeholders in the district (e.g., lead emergency response agency, district administrators, local public health representatives, school health and mental health professionals, teachers, food services director, and parent representatives). This committee is accountable for articulating strategic priorities and overseeing the development of the district’s operational pandemic plan.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Work with local and/or state health departments and other community partners to establish organizational structures, such as the Incident Command System, to manage the execution of the district’s pandemic flu plan. An Incident Command System, or ICS, is a standardized organization structure that establishes a line of authority and common terminology and procedures to be followed in response to an incident. Ensure compatibility between the district’s established ICS and the local/state health department and state education department’s ICS.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Delineate accountability and responsibility as well as resources for key stakeholders engaged in planning and executing specific components of the operational plan. Assure that the plan includes timelines, deliverables, and performance measures.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Work with your local and/or state health department and state education agencies to coordinate with their pandemic plans. Assure that pandemic planning is coordinated with the community’s pandemic plan as well as the state department of education’s plan.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Test the linkages between the district’s Incident Command System and the local/state health department and state education department’s Incident Command System.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Contribute to the local health department’s operational plan for surge capacity of healthcare and other services to meet the needs of the community (e.g., schools designated as contingency hospitals, schools feeding vulnerable populations, community utilizing LEA’s healthcare and mental health staff). In an affected community, at least two pandemic disease waves (about 6-8 weeks each) are likely over several months.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Incorporate into the pandemic influenza plan the requirements of students with special needs (e.g., low income students who rely on the school food service for daily meals), those in special facilities (e.g., juvenile justice facilities) as well as those who do not speak English as their first language.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Participate in exercises of the community’s pandemic plan.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Work with the local health department to address provision of psychosocial support services for the staff, students and their families during and after a pandemic.

1. Planning and Coordination (cont.):

Completed	In Progress	Not Started	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consider developing in concert with the local health department a surveillance system that would alert the local health department to a substantial increase in absenteeism among students.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Implement an exercise/drill to test your pandemic plan and revise it periodically.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Share what you have learned from developing your preparedness and response plan with other LEAs as well as private schools within the community to improve community response efforts.

2. Continuity of Student Learning and Core Operations:

Completed	In Progress	Not Started	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Develop scenarios describing the potential impact of a pandemic on student learning (e.g., student and staff absences), school closings, and extracurricular activities based on having various levels of illness among students and staff.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Develop alternative procedures to assure continuity of instruction (e.g., web-based distance instruction, telephone trees, mailed lessons and assignments, instruction via local radio or television stations) in the event of district school closures.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Develop a continuity of operations plan for essential central office functions including payroll and ongoing communication with students and parents.

3. Infection Control Policies and Procedures:

Completed	In Progress	Not Started	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Work with the local health department to implement effective infection prevention policies and procedures that help limit the spread of influenza at schools in the district (e.g. promotion of hand hygiene, cough/sneeze etiquette). Make good hygiene a habit now in order to help protect children from many infectious diseases such as flu.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Provide sufficient and accessible infection prevention supplies, such as soap, alcohol-based/waterless hand hygiene products (containing at least 60% alcohol), tissues, and receptacles for their disposal. Establish policies and procedures for students and staff sick leave absences unique to a pandemic influenza (e.g., non-punitive, liberal leave).
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Establish sick leave policies for staff and students suspected to be ill or who become ill at school. Staff and students with known or suspected pandemic influenza should not remain at school and should return only after their symptoms resolve and they are physically ready to return to school. Establish policies for transporting ill students.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Assure that the LEA pandemic plan for school-based health facilities conforms to those recommended for health care settings (Refer to www.hhs.gov/pandemicflu/plan).

4. Communications Planning:

Completed	In Progress	Not Started	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Assess readiness to meet communication needs in preparation for an influenza pandemic, including regular review, testing, and updating of communication plans.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Develop a dissemination plan for communication with staff, students, and families, including lead spokespersons and links to other communication networks.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ensure language, culture and reading level appropriateness in communications by including community leaders representing different language and/or ethnic groups on the planning committee, asking for their participation both in document planning and the dissemination of public health messages within their communities.

4. Communications Planning (cont.):

Completed	In Progress	Not Started	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Develop and test platforms (e.g., hotlines, telephone trees, dedicated websites, and local radio or TV stations) for communicating pandemic status and actions to school district staff, students, and families.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Develop and maintain up-to-date communications contacts of key public health and education stakeholders and use the network to provide regular updates as the influenza pandemic unfolds. Assure the provision of redundant communication systems/channels that allow for the expedited transmission and receipt of information.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Advise district staff, students and families where to find up-to-date and reliable pandemic information from federal, state and local public health sources.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Disseminate information about the LEA's pandemic influenza preparedness and response plan (e.g., continuity of instruction, community containment measures).
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Disseminate information from public health sources covering routine infection control (e.g., hand hygiene, cough/sneeze etiquette), pandemic influenza fundamentals (e.g., signs and symptoms of influenza, modes of transmission) as well as personal and family protection and response strategies (e.g., guidance for the at-home care of ill students and family members).
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Anticipate the potential fear and anxiety of staff, students, and families as a result of rumors and misinformation and plan communications accordingly.





All Schools Regardless of Community Spread

- Confirmed person with COVID-19 in building?
- Assess risk
- Short (potentially two to five days) building dismissal to clean, disinfect, and contact trace in consultation with local health officials



No Community Spread

- Prepare
- Teach and reinforce healthy hygiene
- Develop information sharing systems
- Intensify cleaning and disinfection
- Monitor for absenteeism
- Assess group gatherings and events
- Consider postponing noncritical gatherings and events
- Require sick students and staff to stay at home
- Establish procedures for someone becoming sick at school



Minimal to Moderate Community Spread

- Coordinate with local health officials
- Implement multiple social distancing strategies for gatherings, classrooms, and movement through the building
- Consider ways to accommodate needs of children and families at high risk



Substantial Community Spread

- Coordinate with local health officials
- Implement multiple social distancing strategies for gatherings, classrooms, and movement through the building **with extended school dismissals**
- Consider ways to accommodate needs of children and families at high risk

Source: Centers for Disease Control and Prevention, "Considerations for School Closures," March 2020, <https://www.cdc.gov/coronavirus/2019-ncov/downloads/considerations-for-school-closure.pdf>.

Guidelines for Exclusion

SAMPLE LETTER TO SCHOOL COMMUNITY

Dear Parent/Guardian:

DO NOT SEND AN ILL STUDENT TO SCHOOL.

Please call the school office to notify us if your student is ill. The box on the back of this page gives examples of when your student should not be in school.

If your student's symptoms are related to a chronic condition, contact the school and follow school policies for illness.

Please contact your health care provider about serious illness, including any fever of 103°F or higher. If you need help in finding a health care provider, you may contact your local health department.

Notify school staff if your student requires medication during school hours. Follow school protocols for medication at school. Unless otherwise instructed, if your student's illness requires antibiotics, the student must have been on antibiotics for 24 hours before returning to school. Antibiotics are not effective for viral illnesses.

To help protect all students, please notify the school if your child is diagnosed with any of these diseases: chickenpox, COVID-19, diphtheria, E. coli diarrhea, hepatitis, measles, mumps, pertussis, rubella, Salmonella, scabies, shigellosis, tuberculosis, or another disease as requested. The school will protect your private information as required by law. [OAR 333-019-0010]

With consent, the school may consult with your doctor about your student's health in order to keep your student safe, healthy, and ready to learn.

ELC School Board and Administration
Oregon Department of Education
Center of Disease Control

When Should I Keep My Student Home?

NOTE: These are school instructions, not medical advice. Please contact your doctor with health concerns.

Student's Symptoms or Illness	Student May Return to School When*
Fever: temperature by mouth greater than 100.4 degrees	No fever for at least 72 hours without the use of fever-reducing medicine.
Skin rash or open sores	Rash is gone; sores are dry or can be completely covered by a bandage; or with orders from doctor to school nurse.
New Cough illness	In general, when symptom-free for 72 hours. If pertussis (whooping cough) is diagnosed, after taking 5-day course of prescribed antibiotics, or when cleared for return by local public health authority. If COVID-19 is diagnosed, with orders from local public health authority.
Diarrhea: 3 loose or watery stools in one day OR newly not able to control bowel movements	Symptom-free for 48 hours.
Vomiting	Symptom-free for 48 hours.
Headache with stiff neck and fever; OR with recent head injury	Symptom-free or with orders from doctor to school nurse.
Jaundice: (new) yellow color in eyes or skin	After orders from doctor or local public health authority to school nurse.
Red eyes or eye discharge: yellow or brown drainage from eyes	Redness and discharge is gone OR with orders from doctor to school nurse.
Acting different without a reason: unusually sleepy or grumpy OR acting differently after a head injury	After return to normal behavior OR with orders from doctor to school nurse.
Major health event, like surgery OR an illness lasting 2 or more weeks	After orders from doctor to school nurse.
Student's health condition requires more care than school staff can safely provide	After measures are in place for student's safety.