



Updated: 8-11-2022

Katy ISD Fall 2022-2023 COVID -19 Guidelines.

Masks / Facial Coverings

Katy ISD students, staff, and community are allowed to voluntarily wear a mask if they choose to do so. Per Executive Order GA-38, Katy ISD cannot require personnel to wear a mask.

Students Who Have Symptoms or have tested positive for COVID-19

- Katy ISD enrolled students who are actively sick with COVID-19, who are suspected of being actively sick with COVID-19, or who have received a positive test result for COVID-19 may not attend school.
- Students must not come to school should they be suspect of having symptoms or are test- confirmed with COVID-19, until the conditions for re-entry are met.
- Students or parents of students with COVID-19 should report their absence to the campus nurse and campus attendance clerk.
- Per UIL, general notification sent via Rank One, Charms, etc. to impacted student program.

Conditions for return to school for students who have had COVID-19

- Students who had COVID-19 may return to school:
 - If symptomatic, at least 5 days have passed since symptom onset, and fever free*, and other symptoms have improved.
 - For those with no symptoms, at least 5 days after the day they tested positive.

***Fever free for 24 hours without the use of fever suppressing medications. Fever is a temperature of 100° Fahrenheit (37.8° Celsius) or higher.**

NOTE: Date of symptom onset (symptomatic) or positive test (asymptomatic) is day zero for quarantine timeline determination.

Questions regarding student protocols regarding COVID-19 may be emailed to covid19response@katyisd.org.



Updated: 8-11-2022

Staff Who Have Symptoms or have tested positive for COVID-19

- Katy ISD will exclude staff from attending work in person who are actively sick with COVID-19, who are suspected of being actively sick with COVID-19, or who have received a positive test result for COVID-19. Staff experiencing COVID-19 symptoms must immediately notify their supervisor.
- Staff must not come to work should they be suspect of having symptoms or are test-confirmed with COVID-19, until the conditions for re-entry are met.
- Staff who have tested positive for the COVID-19 virus should report a COVID-19 positive to the district using the COVID-19 app available in the MyKaty Cloud.



Conditions for return to work for staff who have had COVID-19

- Staff who had COVID-19 may return to work when:
 - If symptomatic, at least 5 days have passed since symptom onset, and fever free*, and other symptoms have improved.
 - For those with no symptoms, at least 5 days after the day they tested positive.

***Fever free for 24 hours without the use of fever suppressing medications. Fever is a temperature of 100° Fahrenheit (37.8° Celsius) or higher.**

NOTE: Date of symptom onset (symptomatic) or positive test (asymptomatic) is day zero for quarantine timeline determination.

Human Resources

- Questions or concerns regarding COVID-19 absences and leave may be directed to a Leave Specialist in Human Resources.
Phone: 281-396-2139
Email: FMLA@katyisd.org



EMERGENCY OPERATIONS PLAN
INFECTIOUS / COMMUNICABLE DISEASE
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**KATY INDEPENDENT SCHOOL DISTRICT
EMERGENCY OPERATIONS PLAN
UPDATED: AUGUST 1, 2021**

**INFECTIOUS / COMMUNICABLE
DISEASE ANNEX
UPDATED: FEBRUARY 1, 2022**



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APPROVAL AND IMPLEMENTATION

This Annex and Emergency Operation Plan supersedes all prior emergency operations plans associated with infectious disease response.

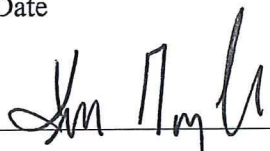
The Katy ISD *Emergency Operations Plan* delegates the responsibility for development and maintenance of emergency operations plans and associated annexes, from the Superintendent to specific individuals with a review of major changes when enacted and at least bi-annually.

Those authorized to develop and maintain this annex are:

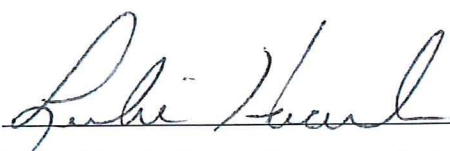
1. The Deputy Superintendent
2. The Director, Health Services
3. The Emergency Management Coordinator

01 February, 2022

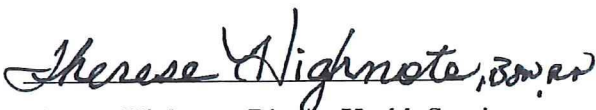
Date



Dr. Ken Gregorski, Superintendent



Leslie Haack, Deputy Superintendent



Therese Highnote, District Health Services



Ruben Martinez, Emergency Management Coordinator



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I. Purpose and Scope

A. Purpose

The purpose of this annex is to establish a standardized guidance to be used in response to the onset and potential spread of an infectious / communicable disease identified by local disease control representatives within the boundaries of Katy Independent School District (Katy ISD) and/or the surrounding area. This guide shall provide an overview of Katy ISD's approved planning, training, and response procedures identified to be used prior, during and post infectious / communicable disease response. This is not an all-inclusive guide but provides a general outline for developing and implementing response plans within the district. Furthermore, appendices may be added to this annex in order to communicate unique measures taken for a specific disease. This annex is meant to augment the overarching Katy ISD Emergency Operations Plan (EOP). All emergency protocols and procedures as outlined by the Katy ISD EOP are to be implemented, referenced and abided to during any emergency response unless directly modified by this Annex or directed otherwise during the crisis by the Incident Command.

This annex is to promote the safety and well-being of Katy ISD students, faculty, staff, and visitors by:

1. Preventing the spread of disease
2. Protecting school district workers who will need to keep the operations and educational programs functional
3. Providing support for the essential services that must be maintained

There are several aspects of an infectious/communicable disease emergency that differentiate it from other emergencies and that require variation in widespread planning, response, and recovery. The intention of this document is to provide guidance throughout an outbreak situation, but nothing in this document precludes the primary parties (Katy ISD stakeholders) from modifying their actions to meet the unique conditions presented. These unique actions and responses may be based on one or more of the following:

- The current threat of disease in the world, region, state, and local area
- The unique nature of the disease including the incidence, morbidity, and mortality of the disease



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- The novel nature of the disease pathogen, particularly whether it mutates rapidly, has high virulence, and spreads easily from person-to-person
- Mandates and/or orders by federal, state, or local public health or public safety authorities

B. Scope

This annex incorporates, by reference, a similar emergency planning and response structure of the Katy ISD Core Emergency Operations Plan (EOP). However, the special circumstances of an infectious/communicable disease outbreak may require some variance from the EOP.

This Infectious/Communicable Disease Annex applies to all Katy ISD campuses. While the general concepts and considerations remain constant for all district campuses, each campus will assign critical tasks and responsibilities differently based on their respective structure and governance. Detailed actions and/or guidelines for campus / facilities will be provided by the district Health Services Department through established guidelines in line with established legal health authorities.

This annex provides a general framework for prevention, preparedness planning, response, and recovery for a large-scale outbreak of an infectious/communicable disease. It outlines the roles and responsibilities of School District personnel and units and the functions that public partners can be expected to provide to the School District.

II. General Information on Pandemic Communicable Disease Events

A pandemic is a “geographically widespread outbreak” of communicable disease. An emergency can result when there is enough morbidity and mortality to disrupt the essential operations of a community and when the communicable disease:

- a. is highly virulent (harmful),
- b. is readily transmissible from person-to-person, and
- c. has high clinical severity (causing sudden, serious, illness and death in a large number of people).

The communicable diseases with the highest risk for a pandemic event are those that are new to the population, either a mutated strain of a known pathogen or a newly emerging pathogen to which the general population has little or no immunity (resistance). Therefore, it spreads easily and is sufficiently virulent enough to cause social disruption. In the remainder of this document, “novel pathogen” will be used to refer to the latter agents. Animal viruses infecting humans are considered novel pathogens, thus the avian influenza concern in 2006 and the H1N1 influenza (aka “swine” influenza) in 2009 both had the pandemic potential to significantly interrupt usual operations.



The pandemic flu will be used as a primary example for the Infectious/Communicable Disease Annex because this communicable disease provides the information and structure for almost any outbreak. Other infectious disease outbreaks that the Katy ISD recognizes as most likely to occur on campuses include norovirus, measles, mumps, and meningitis.

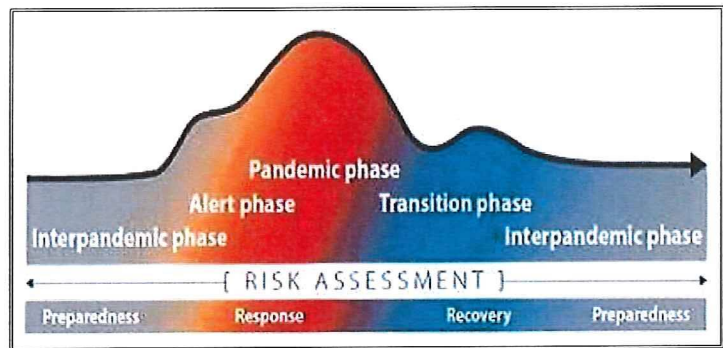
A. Phased Pandemic Framework

To assist communities in planning for a potential pandemic, the World Health Organization (WHO) developed a phased pandemic alert system framework:

1. Inter-Pandemic Phase (the period between pandemics)
 - i. A new virus appears in animals but there is no or low risk of human cases

2. Pandemic Alert Phase
 (influenza caused by a new subtype has been identified in humans)

- i. New virus in animals with higher risk of human cases
- ii. Increased Human to Human (H2H) transmission
- iii. Significant H2H transmission
- iv. Efficient and sustained H2H transmission



3. Pandemic Phase

- i. Global spread of communicable disease caused by new subtype

4. Transition Phase

- i. Reduction in global risk
- ii. Reduction in response activities
- iii. Progression towards recovery actions

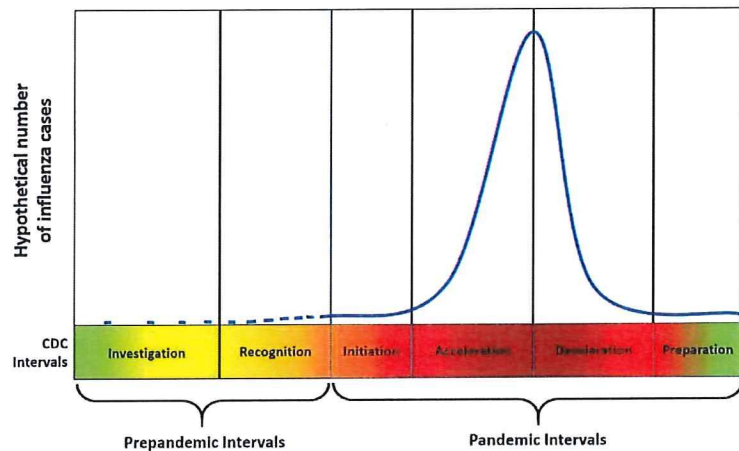
Further, the Center for Disease Control and Prevention (CDC) has developed an interval system framework which can be applied to federal, state, or local indicators:



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1. Investigation (of a novel pathogen in humans or animals)
2. Recognition (of increased potential for ongoing transmission of the novel pathogen)
3. Initiation (of a pandemic wave)
4. Acceleration (of a pandemic wave)
5. Deceleration (of a pandemic wave)
6. Preparation (for future pandemic waves)



The WHO and CDC frameworks complement one another, giving governments, institutions, and individuals information and timeframes to plan their response to a communicable disease outbreak. Relying on both frameworks, this Communicable Disease Outbreak Management Plan has developed a five-level action plan to follow throughout the course of a communicable disease outbreak:

1. **Plan**
2. **Prepare**
3. **Mobilize**
4. **Sustain**
5. **Recovery**

Additionally, the CDC has released the Influenza Risk Assessment Tool (IRAT) which evaluates potential pandemic risk based on emergence and public health impact and the Pandemic Severity Assessment Framework (PSAF) which predicts the severity of a pandemic by considering clinical severity and transmissibility during an initial assessment and then again during the refined assessment provided that more information becomes available. Clinical severity asks about the strength of the illnesses' association with the infection and transmissibility considers the ability of the pandemic virus to spread person-to-person.

Federal, state, and local public health agencies such as the Centers for Disease Control and Prevention (CDC), the Texas Department of State Health Services (TDSHS), and the local health department also provide communicable disease planning and response guidance and support. The school district planning and response levels described in this document are informed by the WHO pandemic alert system and are consistent with the TDSHS planning levels wherever appropriate. Katy ISD district and campus actions may deviate from WHO and/or CDC recommendations when necessary, in order to follow guidance or directives from local public health authorities that more closely reflect the current situation in the surrounding communities in Texas.



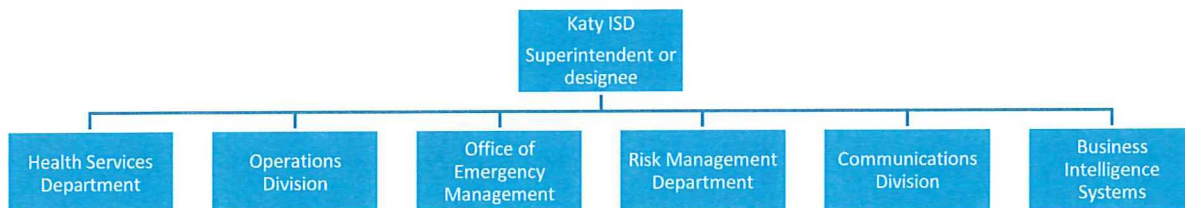
III. Concept of Operations

This section contains general information about the tasks that will most likely need to be completed to ensure an effective **Infectious/Communicable Disease** response. The following tasks represent a logical flow of response from the time an impending or actual Infectious/Communicable Disease Incident is perceived through recovery.

The Infectious/Communicable Disease Annex is not an all-inclusive guide but provides a general outline for developing and implementing response plans within the district. This annex is meant to augment the overarching Katy ISD Emergency Operations Plan (EOP). All emergency protocols and procedures as outlined by the Katy ISD EOP are to be implemented, referenced and abided to during any emergency response unless directly modified by this Annex or directed otherwise during the crisis by the Incident Command. This annex is based upon the concept that the incident management functions that must be performed by the school district and its partners generally parallel some of their routine day-to-day functions. To the extent possible, the same personnel and material resources used for day-to-day activities will be employed during incidents. Because personnel and equipment resources are limited, some routine functions that do not contribute directly to the incident may be suspended. The personnel, equipment, and supplies that would typically be required for those routine functions will be redirected to accomplish assigned incident management tasks.

A. General

- Katy ISD District Emergency Operations Management (EOM) team will act according to their Standard Operating Procedures when alerted to an Infectious/Communicable Disease Incident affecting Katy ISD.
- The district superintendent will rely on the district deputy superintendent to establish an Emergency Operations Management team with the district's health services department, district office of emergency management, risk management department, communications division, operations division and Business intelligence Systems department included at a minimum. The district EOM team will advise campus/facility administration, in coordination with their campus nurse, to manage and track operational duties on campus(s) / facilities related to a possible infectious/communicable disease exposure.



Sample EOM Organization Chart for a Public Health Incident on Katy ISD



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- The district EOM team will:
 1. coordinate with district maintenance & operations for any decontamination services needed in the school district.
 2. coordinate with the school district operations department, health services department and the district office of emergency management for any classroom closure or area quarantine needed on school district property.
 3. coordinate with the local county health department as the primary entity for coordinating the incident with the school district and liaising with TDSHS.
 4. coordinate with district Risk management office for district liability and protection of staff
 5. coordinate with district Business Intelligence Systems Department for development of technological solutions for Notification and Reporting requirements
 6. coordinate with the campus Assistant Superintendents for any classroom closure or area quarantine required.
 7. coordinate with district Communications Division to arrange incident narrative and messaging as required
- The Infectious/Communicable Disease Annex assumes mutual aid agreements, memorandum of understandings, and inter-governmental agreements between school district authorities, local/state/federal public health agencies, hospital/healthcare facilities, and other public health stakeholder agencies.

B. District Health Incident Operations

If a student, staff member, volunteer or visitor is identified in a Katy ISD facility, while the district is operational, the following actions will be taken.

INFECTIOUS & COMMUNICABLE DISEASE (ICD) CONDITION STAGES - The district and campus condition stage is determined through district leadership review of positive cases of an infectious & communicable disease (ICD) reported and determination of potential virus spread. The following graphics define the condition stages.

The following is a template/example and may be modified and edited as required for the EOM team's determined response strategy.



Stage 5: PREVENTION



No confirmed cases of an ICD among staff or students who were on campus during their infectious period.

Prevention Protocols include:

- Self-Monitoring for ICD symptoms
- Frequent hand washing
- Practice social distancing of 3 feet or more where possible
- PPE inventory made available upon request (i.e., facial coverings, hand sanitizer, wipes, desk dividers)



Stage 4: MONITORING

One or more confirmed case(s) of ICD occurs at a campus.

Students Who Have an ICD

- As provided in this Department of State Health Services (DSHS) Rule, school systems must exclude students from attending school in person who are ICD positive or who are suspected of having an ICD.
- Parents must ensure they do not send a child to school on campus if the child has ICD symptoms, is awaiting an ICD test result or is test-confirmed with ICD, until the conditions for re-entry are met. Reference local county, state, or national guidelines.

Katy ISD will notify all teachers, staff, and families of all students in a classroom or extracurricular or after-school program cohort if a test-confirmed ICD case is identified among students or staff who participated in those classrooms or cohorts.

1. Students and staff associated with classes or programs in which an individual reported a ICD positive will be notified of potential close contact via a general notification.
2. Students and staff who believe that they have been in proximity to someone who has tested positive for an ICD or are having any symptoms of an ICD are advised to monitor their health, review local county, state, or national guidance, and contact their personal physician.



Stage 3: MODIFIED OPERATIONS

If the increased rate of an ICD transmission continues following the Stage 4, the following protocols are required:

1. All staff and students (EE-12) are highly recommended to wear face coverings when indoors and on buses to the extent it is developmentally appropriate.
2. All staff, students and guests are highly recommended to wear face coverings when attending an indoor after-school event.



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3. Large group indoor events may not be held during the instructional day. Events may be rescheduled and held once the campus returns to a Level 4 or 5 stage.
4. Lunchroom visitors are not permitted
5. During the temporary Stage 3 Modified Operations, the District encourages visitors to schedule their appointments via on-line or by phone. Visitors that prefer an in-person appointment shall schedule through the principal's office.
6. During the temporary Stage 3 Modified Operations, volunteers may choose to volunteer in-person and follow the instructional day safety protocols which include the wearing of a facial covering and a temperature check; or resume volunteering when the campus has returned to the least restrictive Stage 4 or Stage 5 operations.

The Emergency Operations Management (EOM) team will continue to monitor the transmission rate of ICD data. If necessary, the district may extend Stage 3 protocols to further mitigate a continued spread of the virus.



Stage 2: FACILITY CLOSURE

If an increased rate of an ICD transmission continues following Stage 3, the following protocols are required:

1. In-person learning, and student program participation is temporarily closed.
2. Students provided online learning by their classroom teacher(s).
3. During the campus closure, staff will continue following Stage 3 protocols at their worksite.
4. During the campus closure, staff will socially distance of six feet or more or work in isolation at their worksite.
5. When in-person learning resumes, all staff and students will temporarily follow Stage 3 protocols, to ensure further decline and mitigation of an ICD.

The Emergency Operations Management (EOM) team will continue to monitor the transmission rate of an ICD data. If necessary, the district may extend Stage 2 protocols to further mitigate a continued spread of the virus.



Stage 1: DISTRICT CLOSURE

If the increased rate of an ICD transmission continues and dependent upon the data, it may be necessary to offer remote learning for all students for a specified amount of time to mitigate the spread of the ICD.

The Emergency Operations team will continue to monitor the transmission rate of an ICD. A return to in-person learning and student program participation will resume when data confirms the rate of transmission of the ICD is declining and the spread is mitigated.



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When in-person learning resumes, all staff and students will follow Stage 3 protocols for a (5) day increment to confirm the mitigation of the ICD spread

CAMPUS RESPONSE STEPS - When a potential Infectious/Communicable Disease Incident in Katy ISD is identified or suspected of an individual(s) on a campus, the campus administration receiving the initial report will immediately notify the district's superintendent's office in the following manner:

1. If a concern of an infectious / communicable disease arises as per TAC 97.7, the campus nurse will notify the campus principal and the Director for Katy ISD Health Services Department.
2. If a concern of an infectious / communicable disease arises, campus principal will notify their respective Assistant Superintendent for [Grade Level] Leadership & Support.
3. **IF the Katy ISD Director for Health Services does NOT validate the campus nurse's assessment**, the campus nurse will continue monitoring the student/staff member and updating their Campus Principal and the Director of Health Services.
4. **IF the Katy ISD Director for Health Services validates** the campus nurse's assessment, the respective local county health department will be contacted by the campus nurse. The campus nurse will keep the campus principal and district Director of Health Services abreast of the respective local county health department's recommended actions.
5. **IF campus assessment is validated by the responding Health Department**, the campus will take the following actions:
 - a. **Campus Principal:**
 - 1) Campus principal will notify their respective campus Assistant Superintendent.
 - 2) Campus Assistant Superintendent will notify the Superintendent and/or Deputy Superintendent.
 - 3) Campus principal will designate a secondary clinic site (library, LGI, other available room)
 - 4) Coordinate with campus nurse to isolate the infected individual.
 - 5) District leadership will notify & deploy a campus support team to the campus that includes:
 - (a) Campus' Assistant Superintendent for Leadership and Support
 - (b) District Health Services Department **(281-396-2629)**
 - (c) Katy ISD Police Officer **(Dispatch (281)237-4000)**
 - (d) Office of Emergency Management (OEM) **(281)237-4049)**



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- 6) District Communications office will issue a notification to be reviewed by the Campus Principal, Campus Assistant Superintendent and Deputy Superintendent w/Superintendent approval prior to release to internal and external stakeholders.
- 7) Campus principal will implement the campus HOLD protocol if necessary
- 8) Will ensure NO entry to the isolated area or to campus other than campus principal and district support team.
- 9) Will ensure parents of student or emergency contact for employee are notified.
- 10) Will NOT dismiss remaining students or execute reunification plan until directed by District Support Team

b. Campus Nurse:

- 1) Local Health Department may designate as the on-site primary contact.
 - 2) Will implement immediate isolation measures within the clinic.
 - 3) Will ensure no entry to the isolated clinic.
 - 4) Will coordinate with the responding local county health department ensuring all directives are followed and assist EMS for student/staff transport if required.
 - 5) Coordinate with campus administration to provide medical PPE as required.
6. The district EOM will coordinate all follow-on actions (including dismissal or reunification plan) in accordance with local county health department guidance and relay for direction via the campus principal and/or the on-site campus administrators in order to limit the number of individuals from being exposed to a communicable disease.

NON-CAMPUS RESPONSE STEPS - When a potential Infectious/Communicable Disease Incident in Katy ISD is identified or suspected on a Katy ISD non-campus facility, the person receiving the initial report will immediately notify the districts superintendent's office in the following manner:

1. If a concern of an infectious/communicable disease arises, the Supervisor & Executive Director will notify the Director for Katy ISD Health Services Department.
2. If the Katy ISD Director for Health Services Department does **NOT** validate the concern, the district Health Services Department will continue monitoring the employee and will continue updating the district leadership.
3. If the Katy ISD Director for Health Services validates the concern, the respective local county health department will be contacted by the Director for Health Services and will communicate the county health department's recommended actions to the district leadership.



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4. If employee assessment is validated by the district health services director, the department executive director will notify the district Operations Division to coordinate for disinfecting of the non-campus facility.
 5. District Leadership will notify and deploy a campus support team that includes:
 - a. Operations Division
 - b. District Health Services Department
 - c. Katy ISD Police Officer
 - d. Office of Emergency Management
 6. District Communications Office will issue a notification to be reviewed by the Executive Director of the affected department, and the Deputy Superintendent (to be reviewed by the Superintendent prior to release to internal and external stakeholders).
 7. The Executive Director of the affected department will implement the department HOLD protocol at the target location.
 8. The Executive Director of the affected department will designate a secondary location for personnel with medical concerns at the target location.
 9. The District Leadership will coordinate all follow-on steps in accordance with local county health department guidance and relay direction via the on-site facility supervisor and/or the district campus support team in order to limit the number of individuals from being exposed to a communicable disease.
- The respective county health department will be the primary entity for coordinating the incident within the school district and liaising with TDSHS. Due to the expanse of Katy ISD, in cases where a local, county, or health district jurisdiction is in question, the TDSHS will work directly with the school district.
 - The Infectious/Communicable Disease Annex relies on established mutual aid agreements, memorandum of understandings, and inter-governmental agreements between Katy ISD, Harris County, Fort Bend County, Waller County, the City of Katy, the City of Fulshear and the City of Houston.
 - The Incident Command System (ICS) will be used to manage all incidents and major planned events on the Katy ISD in response to a public health incident.

ESSENTIAL PERSONNEL - When a potential Infectious/Communicable Disease Incident in Katy ISD is identified or suspected, Katy ISD leadership will apply a sequential identification of “essential personnel” as the situation dictates and may be adjusted as the situation matures or decreases.

- Initial identification of essential personnel will rely on the district Continuity of Operations Plan (COOP) and associated essential personnel list coordinated by the



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district Safety & Security Task Force and validated by district Incident Command Team during annual training. This list is inclusive of personnel identified as required for a campus or facility to continue with limited function.

- **IF** further limitations are implemented by surrounding jurisdictions in response to an infectious/communicable disease incident, Katy ISD leadership will further restrict the “Essential Personnel” categorization to the following personnel:
 - a. Katy ISD leadership
 - i. Cabinet
 - ii. Select HR employees
 - iii. Select Payroll employees
 - iv. District Health Services Department (Nurses as required by Director)
 - v. Education support employees as required (i.e. set up online instruction, etc.)
 - b. Katy ISD Police Department
 - i. All Police Officers
 - ii. All Security Guards
 - iii. Office of Emergency Management
 - iv. Dispatchers and Safety & Security Analysts
 - v. Supporting employees as required
 - c. Maintenance & Operations
 - i. Utilities Operators
 - ii. Mechanical support
 - iii. Custodians
 - iv. Limited Grounds Keepers to ensure natural pests, do not exasperate the situation.
 - d. Risk Management
 - e. Information Technology
 - i. Limited employees to ensure technical capability for on-line instruction and employees working from home
 - f. Transportation
 - i. Mechanic support for white fleet and buses if necessary.
 - ii. Drivers as required.
 - g. As required, a schedule will be set up by district leadership to allow all other employees to have controlled access to their workspace in order to collect items necessary to work from home and conduct limited chores needed to secure workspaces (i.e. turn off devices, clean out fridge, pick up animals.).



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- h. Access to District facilities (i.e. facility rentals, gyms, outdoor playgrounds, etc.) will be regulated to coincide with federal, state and local jurisdiction directives and strategies.

C. Public Health Incident Operations

Confirming a Public Health Incident

Determining if there is an outbreak hinges on if the number of cases is unusually high for the given population for that time of year. Factors included in determining if an outbreak exists are:

- Etiologic agent
- Size and composition of the population
- Previous occurrence of the specific disease in the community
- Season

If a disease is common, such as seasonal influenza, the number of cases before an outbreak is declared likely need to be incredibly high; however, if the disease is rare, like smallpox, a single case may be considered an outbreak.

Disease tracking in the school district is based on incidental reporting from the student population. The local health department may identify one case of a rare or uncommon disease or notice an increase in cases of a common disease during a given period. When this occurs, the local health department shall commence with notification procedures to the school district.

Should the Katy ISD be made aware of a potential outbreak (or a confirmed case of a rare disease) by the local county health department, the TDSHS, or any other health agency, the district leadership shall alert the Principal(s) of the affected campus(s), and subsequently, the district board of trustees. Following actions and notifications should be at the direction of the local, county, health district, and/or TDSHS.

General Procedures

Procedures for responding to an infectious/communicable disease follow the same general pattern including monitoring, detection, implementation of pharmaceutical and non-pharmaceutical interventions, and coordinating with local and state health authorities. Specific application of interventions depends on the specific disease.

This plan may be activated for situations including but not limited to:

- Unusual cluster of disease in the School District population
- Disease with unusual geographic or seasonal distribution



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- Single case of an unusual disease
- Endemic disease with unexplained increase in incidence
- Significant media inquiries or public calls concerning a health-related issue
- Local public health emergency in one or more of the surrounding jurisdictions
- Statewide disease outbreak

D. Infectious/Communicable Disease Response Protocol

When faced with an actual outbreak, local authorities may be required to use absolute limits to determine when to institute isolation, quarantine, vaccination, and other methods of infection control to protect the public health and safety. A balance must be struck between the implementation of such limits with an awareness of the public's rights to liberty.

This protocol recommends employing the most conservative authoritative medical and epidemiological evidence when faced with a range of possible actions. This statement is based upon the principle that lack of scientific certainty or consensus must not be used to postpone preventive action in the face of a threat to public health or safety. Preventative actions may include vaccination, medical prophylaxis, or social distancing.

The protocols outlined below shall serve as a guide in the event of an infectious disease outbreak in Katy ISD. Depending on the disease and the spread of the disease, some or all of these steps may be expanded, modified, or eliminated. The district superintendent, or their delegated representative, will work directly with the local county health department, Texas Education Agency (TEA), and TDSHS to implement appropriate actions based on the public health hazard.

Personal Preventative Steps

Stopping transmission of the virus through everyday practices greatly contribute to keeping yourself and the community healthy. Taking steps to help stop or slow the spread of infectious / communicable diseases, we must all take responsibility by:

- Staying home if you are sick.
- Conduct a medical self-screen before arriving at school. Do not attend if you have a temperature of 100 F or greater, new or worsening symptoms
- Stay home and monitor health if in close contact with a person who is sick or you suspect you have contracted a contagious illness
- Notify the nurse immediately if you become ill
- Cover your cough and/or sneeze.



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- Avoid touching your face, eyes and nose area.
- Cleaning frequently touched surfaces.
- Washing your hands often, for at least 20 seconds with soap and water.
- If no soap and water is available, use hand sanitizer with at least 60% alcohol content.

Student Remote Conferencing

Remote Conferencing or “Intermittent School to Home” academic support is a mechanism by which online instruction can be provided to in-person students if:

Two requirements are met:

- The student is unable to attend school and is confined because of a temporary medical condition.
- The total amount of remote conferencing “Intermittent School to Home” instruction does not exceed more than 20 instructional days over the entirety of the school year.

In addition, one of the following requirements must be met:

- The student’s temporary medical condition is documented by a physician licensed to practice in the United States. The documentation must include a statement from the physician that the student is to remain confined to their home or to a hospital.
- The student has a positive test result for a communicable disease.
- The student has been identified as having been in exposed to a communicable disease.

District Sponsored School Trips

Before a student goes on a planned school trip during a period of potential an infectious / communicable disease situation, they and their parents should ensure they are aware of the Personal Preventive Steps listed above. Parents should check their child’s temperature the morning of their departure to ensure they do not have a fever. If you—a parent elects for their child to not participate in an upcoming school trip, it is recommended for them to notify their teacher and/or campus administration. If a parent elects for their child to not participate in a planned school trip, the non-refundable costs associated with the student trip are the responsibility of the parent.

If during the trip, a student child becomes ill, the student’s Katy ISD chaperone will contact the parent immediately.



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Facility Visitors

Campuses and facilities may limit non-essential visitors and volunteers.

- Lunchtime visitation may be restricted or suspended temporarily.
- Visitors may be asked to schedule appointments prior to arriving at a facility.
- Visitors should conduct a medical self-screen prior to visiting a campus or facility.

The district EOM team will provide specific guidance as it relates to specific situations in response to an infectious/communicable disease concern.

Social Distancing

Social distancing measures that reduce opportunities for person-to-person virus transmission can help delay the spread and slow the exponential growth of a pandemic. Social distancing measures can reduce virus transmission by decreasing the frequency and duration of social contact among persons of all ages. These measures are common-sense approaches to limiting face-to-face contact, which reduces H2H transmission.

During outbreaks of highly infectious diseases or rare viral strains with high rates of mortality, the following social distancing procedures should be considered in the Katy ISD:

- Postponement or cancelation of classes during an infectious outbreak (at least until pharmaceutical preventative measures can be enacted). This will reduce exposure of person-to-person contact for students, faculty, and staff.
- Postponement or cancelation of mass gatherings: Group events such as concerts, festivals, and sporting events bring people into close contact for extended periods. Even when a circulating virus has a relatively low basic reproductive rate, intensely crowded settings might lead to high secondary attack rates.

Isolation Protocols

If isolation/quarantine is recommended for exposed/infected persons, in most cases voluntary isolation is encouraged based on guidance and directed education from the local county health department and TDSHS. In cases of highly infectious diseases or rare viral strains with high rates of mortality, the local county health department has the authority to "...order the individual, or the individual's parent, legal guardian, or managing conservator if the individual is a minor, to implement control measures that are reasonable and necessary to prevent the introduction, transmission, and spread of the disease in this state."¹

¹ HS Sec. 81.083(b). - APPLICATION OF CONTROL MEASURES TO INDIVIDUAL



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1. The local county health department shall recommend isolation, if necessary. A list of isolated students, faculty, and staff shall be prepared and updated daily by each affected campus and sent to the district superintendent's office.
2. The affected patient(s) should remain isolated for the duration of time specified by the local county health department.
3. All efforts will be made to maintain the confidentiality of the infected student, staff or employee.
4. Selected members of the Katy ISD EOM team and select staff overseeing a potential contaminated area, will meet to develop an isolation plan for the impacted facility or facilities. The date that the infected person was last in the facility or facilities; and the date immediately after that custodial staff conducted a thorough cleaning, will be established.
5. Katy ISD EOM team will then work with the facility and facilities' leadership to develop a list of all students, faculty, staff and others who have been in the building/s up to the date of the last thorough cleaning.

Facility Cleaning Protocols

These procedures are for cleaning, disinfecting, and/or sanitizing for communicable diseases in non-healthcare settings. Increased cleaning shall be activated by the Katy ISD and its campus stakeholders upon recommendation from the local county health department.

1. The local county health department shall consult with the district superintendent's office about campus locations that need enhanced sanitation efforts. This information will be shared with the appropriate Katy ISD Maintenance & Operations department.
 - a. These locations may be based on where confirmed ill students and/or employees were on campus.
 - b. Viruses generally survive on surfaces for about 48 hours.
2. If necessary, the local county health department shall supply guidance to the district's Maintenance & Operations department, and any other necessary departments to ensure all those who may be conducting sanitation operations are properly trained and fitted with PPE appropriate for the infectious disease at hand.
3. The Katy ISD Maintenance & Operations staff shall conduct or coordinate for contracted sanitation operations in all designated locations using appropriate cleaners/disinfectants.

Routine Cleaning



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- Maintenance and Operations teams will disinfect high traffic and commonly used spaces daily
- Custodial teams will maintain regular cleaning schedule for all other areas

Air Filtration

- Katy ISD Maintenance & Operations Department will inspect and replace air filters for every air conditioning system throughout each building including portable buildings as a mitigation against infectious / communicable diseases.
- Katy ISD, as a district standard, utilize air filters that meet Environmental Protection Agency and ASHRAE (America Society of Heating, Refrigeration, Air Conditioning Engineers) standards to filter particulates that carry a variety of diseases.
- All of the district's air conditioning systems (portable buildings included) are calibrated to increase the recirculation of fresh air into the room/system in response to notification of an infectious/communicable disease crisis.

Student Programs and Activities

UIL may issue guidance for the continuation or suspension of student programs and/or sporting events. KISD will follow this guidance but may elect more stringent precautionary measures as the district EOM team deems necessary.

- All congregated areas will be regularly and frequently cleaned and disinfected in accordance with District procedures
- Soap and water, hand sanitizer, or similar disinfectant will be available near athletic and large gathering areas
- All equipment should be cleaned and disinfected before and after use.
- Student groups such as marching band, cheerleaders, drill teams, and other groups approved by the school district may attend and perform at games or contest in which they are not competing. Schools should consider limiting the number of participants to those essential to the performance.
- The student groups should remain separate from the game or contest participants at all times. These groups should avoid mixing with fans or non-group members throughout the game or contest.
- Schools should consider limiting the number of student and staff given access to the playing areas and ensure protocols for entering and exiting the playing areas are in place.



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Games, Contests and Event Management

- All student transportation for events will follow District guidelines for transportation
- Busses should be loaded and unloaded in a designated area separate from fans, spectators, and other individuals not essential to the team or group
- Before each game, contest or event, schools should follow the screening protocols deemed necessary by the district EOM team.
- Pregame and post-game gestures of sportsmanship should be conducted between teams and sports and contest officials in ways planned to help reduce the risk of spread.

Spectators, Audiences, Fans, and Media

- Schools may allow spectators to attend games, contests, or events with a set maximum percentage of capacity limitation while ensuring social distancing standards as applicable as per local county health official guidance.
- Before each game, contest or event, spectators, audiences, fans and media should follow the screening protocols deemed necessary by the district EOM.

Concession Stands and Food Services

- Games, contests, and events may allow concession stands or other food services provided preventative measures are adhered to.
- Frequent cleaning and disinfecting of service areas should occur.

Notification Protocols

There are 3 levels of Notification that Katy ISD will utilize during an Infectious or Communicable Disease event.

First Level Notification

1. Employee notifies direct supervisor of a positive test report of themselves, immediate family member or direction from jurisdictional authority to conduct self-isolation. Employee submits a positive test report via the district's infectious and communicable disease self-report application.
2. Employee's supervisor notifies his/her principal / direct supervisor, Department Head or Executive Director.
3. Principal notifies their respective Assistant Superintendent for [Grade Level] Leadership and Support.
4. Department Head / Executive Director notifies the Deputy Superintendent



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5. The District Chief of Operations and respective Assistant Superintendent for [Grade Level] Leadership and Support will notify Deputy Superintendent and coordinate initial meeting of very select district EOM team to maintain infected person's confidentiality.
6. Deputy Superintendent provides guidance for initial meeting and notifies Superintendent.
 - a. Provides initial guidance
 - b. Communicates with Superintendent during the event
 - c. Communicates with other Cabinet members as needed
 - d. Coordinates with Communications Division to begin development of messaging

Second Level Notification

1. The district Deputy Superintendent notifies the following district EOM members, and they take the following actions:
 - a. Director of Health Services Department
 - i. Notification to local county health department
 - ii. Provides recommendation for response protocols to the district EOM team.
Ensure medical privacy of employees is maintained at all times
 - (a) ONLY personnel on a Need-to-Know basis will be provided the name/names of infected/exposed employees
 - iii. Informs infected/exposed person they can call the local county health department for testing information
 - iv. Makes recommendation for deep clean of location of exposure
 - b. Office of Emergency Management
 - i. Coordinates with principal, facility director, department heads and/or executive director to prepare a list of all personnel who entered the building during the time of infection (using access control, security cameras, campus data/information/attendance) and were not in compliance with protocols established by the district EOM team.
 - ii. Once list is complete, it will be sent out to department heads and principals for notifications to be conducted. (See Third Level Notification).
 - iii. Upon verification of Third Level Notification being complete, the list of personnel in the building during the time of infection is provided to the Office of Risk Management
 - c. Office of Risk Management
 - i. Provides information and guidance per TASB and any other governing entities as it relates to the district EOM team response.
 - ii. Completes First Report of Injury as required.
 - iii. Upon receiving the list of potentially infected personnel (after they have been notified) coordinates a TASB report for follow on actions.
 - d. Communications Division
 - i. Prepares messaging for anticipated media inquiry
 - ii. Coordinates to develop district internal messaging, parent notifications and social media messaging with Business Intelligence Systems department
 - e. Other supervisory personnel / campus administrators
 - i. Assist district EOM team with procedural questions and issues at the site of contamination.



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- ii. Assist district EOM team in developing the list of potentially infected personnel.
- iii. Assist district EOM team with contacting employees who were exposed to infection.

Third Level Notification

1. When a principal / department head is notified by District Leadership that they have employees assigned to their campus or department who have been exposed to an infectious or communicable disease, the principal or direct supervisor will take the following actions:
 - a. Principal / department head will develop his/her list of known employees as per district EOM team guidance. Provides the list to the EOM team.
 - b. Principal / department head will email his/her entire staff that the campus / facility is currently off limits and cannot be accessed by staff until the building has been cleaned.
 - c. Principal / department head will contact any employees that the district has added to the final exposed personnel list, by phone.
 - d. Confirm with employee the last date that they were on the campus.
 - e. Communicate that a TASB member of the district workmen's compensation plan will be contacting them.
 - f. Direct them to HR if they have any questions regarding their absence from work during the quarantine or unable to meet expectations of work from home.
2. Principal / department head will provide contact information for:
 - a. Risk Management representative(s) for questions related to claims
 - b. Human Resources representative(s) for questions related to days of work missed and/or sick/leave time used/required
 - c. Health Services representative for follow-up
3. The Katy ISD Director of Health Services will contact the infected employee(s); as a courtesy, inquire on contamination and to address any questions about their health.
4. The Katy ISD Communications Division will develop additional messaging for the Superintendent, Deputy Superintendent and affected campus or facility as required.
5. The following is an example that can be used by the principal and / or department head to use when calling faculty and/or staff to be quarantined due to potential infection.

I am calling to let you know that you were at (name of location) on (date) and as a result you may have been exposed to an employee who has been confirmed positive for (infection/communicable disease). Because the exposure occurred on (date), you will need to quarantine until midnight on (quarantine period identified by Director, District Health Services.). You are eligible to return to work on (date) and will need to ensure you report your absences. If you are campus staff and able to meet your principals' expectation for work while quarantining, you do not have to report your absences during quarantine. If you have any questions regarding your absences during quarantine, please contact the HR Department. Lastly, a TASB representative will be contacting you to review documentation with you on this matter.



IV. Direction, Control, and Coordination

A. Responders Standard Operating Procedures/Guidelines (SOP/SOGs)

Katy ISD's Health Services Department and Maintenance & Operations department policy manuals provide said departments' members with best practice guidelines and procedures to conduct operations during an infectious / communicable disease emergency. The policies provide department members with guidance that is both legal and practical. The departments SOP/SOGs establish consistent procedures and provide members with a common understanding and focus. This common understanding and focus should translate into more effective operations during emergency incidents.

B. Emergency Operations Plan

Katy ISD maintains an Emergency Operations Plan (EOP) to address threats/hazards and incidents. The EOP has been developed to fit into the larger City/County and State EOPs in the case of a large-scale incident. Katy ISD maintains the plan, and conducts regular training and exercises to validate operational efficiency and readiness of the EOP. The EOP and other Katy ISD emergency plans may also make critical school district personnel available beyond their regular job description in an incident or crisis event taking place at a Katy ISD campus or facility.

C. Coordination with Responders

An important component of emergency operations is interagency agreements with various neighboring agencies to aid timely response to, and recovery from, emergencies on campus. Katy ISD will rely on established agreements with these agencies and services (including such local governmental agencies as law enforcement, EMS, and public health) to help coordinate services between the agencies and the Katy ISD.

If Katy ISD or City/County resources are insufficient or inappropriate to respond to the emergency situation, a request may be made for assistance from other jurisdictions, the state, or federal government.

D. Technology Support

The monitoring and conveying of the health condition to multiple entities of the Katy ISD community will be required during an expanded infectious/communicable disease crisis. The Katy ISD technology department will be relied upon for:

- Assisting with positive infection reports management
- Internal Katy ISD community notification support (digital / social media)
- External notification requirements to local county and state authorities



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V. Communications

A. General Communication

In coordination with the local county health department, the Katy ISD shall coordinate and disseminate all communications related to the specific infectious disease. Communications should include:

- General communications to the school district –
 - information about the disease in general
 - information about the disease impacts on the school district
 - what the school district is doing
 - what the school district should/should not do
- Targeted communications to affected or vulnerable populations on the school district, as needed
- Specific information on preventing the spread of the disease
- Any combination of the above to the media and neighboring communities



VI. Disease Descriptions as per Texas DSHS

For an inclusive list of communicable diseases please see [DSHS chart](#)

Name	Vaccine Preventable	Description of Symptoms
Coronavirus	No	<u>Symptom:</u> fever, cough, shortness of breath <u>Transmission:</u> person-to-person via droplets
Measles (Rubeola)	Yes	<u>Symptoms:</u> high fever; cough; runny nose; red/watery eyes; tiny white spots (Koplik spots) in mouth; rash <u>Transmission:</u> coughing and sneezing; virus can live up to two hours in contaminated air or on a surface
Meningitis	Yes	<i>Bacterial</i> <u>Symptoms:</u> fever; headache; stiff neck; nausea; vomiting; sensitivity to light; confusion <u>Transmission:</u> germs spread person-to-person (depends on type of bacteria)
		<i>Viral</i> <u>Symptoms:</u> fever; headache; stiff neck; sensitivity to bright light; sleepiness or trouble waking up from sleep; nausea; irritability; vomiting; lack of appetite; lethargy <u>Transmission:</u> caused by other viruses like mumps, measles, influenza, etc.
Mumps	Yes	<u>Symptoms:</u> fever; headache; muscle aches; tiredness; loss of appetite; swollen/tender salivary glands approximately 16-18 days after infection <u>Transmission:</u> coughing, sneezing, or talking; sharing items; touching contaminated objects
Norovirus	No	<u>Symptoms:</u> diarrhea; vomiting; nausea; stomach pain <u>Transmission:</u> contaminated food or drink; touching contaminated surfaces and then putting fingers in mouth; having direct contact with someone who is infected



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Name	Vaccine Preventable	Description of Symptoms
Hepatitis A	Yes	<p><u>Symptoms:</u> Fatigue; Sudden nausea and vomiting; Abdominal pain or discomfort (especially on the upper right side beneath your lower ribs by your liver); Clay-colored bowel movements; Loss of appetite; Low-grade fever; Dark urine; Joint pain</p> <p><u>Transmission:</u> fecal-oral route; that is when an uninfected person ingests food or water that has been contaminated with the feces of an infected person</p>
Influenza	Yes	<p><u>Symptoms:</u> fever; cough; sore throat; runny or stuffy nose; muscle/body aches; headaches; fatigue; sometimes vomiting and diarrhea</p> <p><u>Transmission:</u> person-to-person via droplets</p>
Tuberculosis		<p><u>Symptoms:</u> A bad cough that lasts 3 weeks or longer; Pain in the chest; Coughing up blood or sputum (mucus from deep inside the lungs)</p> <p><u>Transmission:</u> person-to-person via droplets</p>
Varicella (chicken pox)	Yes	<p><u>Symptoms:</u> fever; tiredness; loss of appetite; headache; itchy, fluid-filled blisters</p> <p><u>Transmission:</u> touching or breathing in the virus particles that come from the blisters</p>

For an inclusive list of communicable diseases please see [DSHS chart](#)



VII. Definitions

Case – Describes the disease under investigation. Also describes a person in a population who is identified as having the disease.

Confirmed Case – Typical clinical features of the illness and either a lab test confirming the presence or an epidemiological link to a lab-confirmed case.

Direct Transmission – Infectious disease is transferred from a reservoir to a susceptible host by direct contact or droplet spread (kissing, skin-to-skin contact, sneezing). Droplet spread is the primary mode of transmission for influenza.

Endemic – Constant presence and/or usual prevalence of a disease or infectious agent in a population within a geographic area.

Epidemic – Increase, often sudden, in the number of cases of a disease above what is normally expected in that population in that area for a given period of time and may result from:

- Recent increase in amount of virulence of the agent
- Recent introduction of the agent into a setting where it has not been before
- Enhanced mode of transmission so that more susceptible persons are exposed
- Change in the susceptibility of the host response to the agent
- Factors that increase host exposure or involve introduction through new portals of entry

H2H – Acronym meaning “Human to Human” used by health service organizations and in this document to denote transfer or spread of a disease from one person to another vice a person exposed to a disease by an animal or other environmental organism.

Incubation Period – The time from the moment of exposure to an infectious agent until signs and symptoms appear (varies by each disease). To determine the most likely period of exposure for an outbreak knowing the average incubation period for the disease and the range of incubation periods is important (E. coli average incubation is 3-4 days with a range of 2-10 days).



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Indirect Transmission – Suspended air particles, vectors, or vehicles carry the infectious disease from a reservoir to a susceptible host through airborne transmission (Legionnaires' disease, TB, measles).

Infectious Period – The time during which an infectious agent may be transferred directly or indirectly from an infected person to another person, from an infected animal to people, or from an infected person to animals. Also called “period of communicability.”

Isolation – The physical separation of a person suffering from an infectious or contagious disease from others in a community.

Mode of Transmission – Method by which the disease transfers from the reservoir (originating source) to the host (susceptible person). Classified as direct or indirect.

Outbreak – Increase, often sudden, in the number of cases of a disease above what is normally expected in that population in a limited geographic area for a given period of time (such as a university). Localized epidemic.

Pandemic – The global outbreak of a highly infectious disease in humans in numbers clearly in excess of normal caused by a new pathogen or emergence of an altered old pathogen capable of sustaining widespread disease in a region of the world or worldwide.

Pandemic Flu – A virulent human flu that causes a global outbreak, or pandemic, of serious illness. Because there is little natural immunity, the disease can spread easily from person-to-person.

Quarantine – The physical separation of healthy people who have been exposed to an infectious disease-for a period of time-from those who have not been exposed.

Social Distancing – A disease prevention strategy in which a community imposes limits on social (face-to-face) interaction to reduce exposure to and transmission of a disease. These limitations could include, but are not limited to, school and work closures, cancellation of public gatherings, and closure or limited mass transportation.

Transmissibility – Ability to easily spread from human-to-human.

Travel Advisory – When there is a recommendation against non-essential travel to a geographic area where an outbreak of a disease is occurring.



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Travel Alert – Where an outbreak of a disease is occurring in a geographic area and there is no recommendation against non-essential travel to the area, although recommendations regarding personal health protection in such settings are available.

Virulence – The capacity of a microorganism to cause disease.

VIII. Legal Authority

In order to institute and enforce non-pharmaceutical interventions, the public health agency must have legal authority. Legal authority within Texas is primarily wielded by the local public health agency. The State of Texas also has authority, but typically defers to the local jurisdictions. Additionally, federal agencies have legal authority derived from a variety of statutes, regulations and executive orders.

State

HS § 81 Communicable Diseases.

Sec. 81.002 The state has a duty to protect the public health. Each person shall act responsibly to prevent and control communicable disease.

Sec. 81.083 APPLICATION OF CONTROL MEASURES TO INDIVIDUAL.

(a) Any person, including a physician, who examines or treats an individual who has a communicable disease shall instruct the individual about:

- (1) measures for preventing reinfection and spread of the disease; AND
- (2) the necessity for treatment until the individual is cured or free from the infection.

(b) If the department or a health authority has reasonable cause to believe that an individual is ill with, has been exposed to, or is the carrier of a communicable disease, the department or health authority may order the individual, or the individual's parent, legal guardian, or managing conservator if the individual is a minor, to implement control measures that are reasonable and necessary to prevent the introduction, transmission, and spread of the disease in this state.

Texas Admin Code 97.7 [Diseases Requiring Exclusion From School](#) – provides a listing of foundational exclusion guidance and readmission criteria for infectious and communicable diseases.



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Texas Admin Code 97.8 [General Control Measures for Notifiable Conditions](#) – provides general guidance on how best to proceed with investigation and control of infectious / communicable diseases.

Federal

42 CFR § 71.20 Public health prevention measures to detect communicable disease.

(a) The Director [Director, CDC, Public Health Services, Department of Health and Human Services, or their authorized representative] may conduct public health prevention measures, at U.S. ports of entry or other locations, through non-invasive procedures as defined in section 71.1 to detect the potential presence of communicable diseases.

(b) As part of the public health prevention measures, the Director [Director, CDC, Public Health Services, Department of Health and Human Services, or their authorized representative] may require individuals to provide contact information such as U.S. and foreign addresses, telephone numbers, email addresses, and other contact information, as well as information concerning their intended destination, health status, known or possible exposure history, and travel history.