



School Re-Opening Plan

Agency Name: Arc Wayne County Chapter Inc.–Roosevelt Children's Center

BEDS Code: 650101990003

Administrative Address: 150 Van Buren Street, Newark, NY 14513

Program Site Address: 848 Peirson Ave, Newark, NY 14513

Program(s) provided at this site:

- 4410 Pre-school Special Education
- Special Class
- Special Class in an Integrated Setting
- Multi-Disciplinary Evaluations

Other: Early Intervention Toddler Developmental Classes

Contact Person: Lynne Ward, Program Director

Contact Phone Number: 315 331-2086 ext. 3110

Contact Email Address: lynne.ward@arcwayne.org

Website where this plan and any plan updates will be posted:

<https://www.arcwayne.org/roosevelt.html>

INTRODUCTION

This plan was developed to conform to the guidance provided by the New York State Education Department (NYSED) in their July, 2020, document entitled: *Recovering, Rebuilding, and Renewing: The Spirit of New York's Schools – Reopening Guidance*. Additional information was taken from NY State Department of Health Interim Guidance for In-Person Instruction at Pre-K to Grade 12 Schools during the Covid-19 Public Health Emergency and any applicable Office of Children and Family Services guidance. This plan will be revised and updated as needed to adjust to changing public health conditions caused by the COVID-19 virus and all of the new requirements and regulations which may emerge over time. Roosevelt Children's Center (RCC) solicited input and involvement from the families we serve and our staff during the original drafting of our re-opening plan. We will rely on continued input from all stakeholders as we move forward implementing this plan and as we contemplate any additions or modifications.

Roosevelt Children's Center's administration and staff know our program must be as flexible and as responsive as possible to the needs of our students, families, staff members. We will closely monitor the conditions of our community as the COVID 19 pandemic continues and the effectiveness and appropriateness of our plan in order to maintain the safest possible environment for our students and staff.

Be assured that nothing has changed our sincere commitment to our students and families and our determination to provide the highest possible quality of educational programming and related services even during these difficult times.

The goal of the plan is to guide the delivery of high-quality educational services as safely as possible whether that service delivery is in-person, through a remote learning platform or a hybrid combination of remote and in-person services. By diligently working together and remaining focused on the outcomes we desire, we can find solutions to the many challenges ahead.

Our reopening plan prioritizes in-person services to the greatest extent possible for students with special needs. Roosevelt Children's Center's non-integrated classes have a special education ratio of 8:1:2 – 8 students, 1 special education teacher and 2 paraprofessionals. Integrated classes have a special education ratio of 8:1:1 and an overall ratio of 16:1:2. That means 8 students with special needs, with the possibility of over enrolling to 10 and up to 8 typically developing students. Based on the current guidelines the number of children in any group would be limited to 15 students. The square footage of our integrated classrooms could accommodate from 25-35 children and adults.

We feel that our low number of students and the physical size of our classrooms will allow us to have all of our students back in the building at the same time for in person learning while still being able to maintain a safe environment for students and staff.

Our plan includes all the required elements identified by NYSED that are applicable to preschool 4410 special education programs and follows the structure of the guidance by addressing the following areas as they apply to our students with disabilities and their families:

1. Communication/Family and Community Engagement
2. Health and Safety
3. Facilities
4. Nutrition
5. Transportation
6. Social Emotional Well-Being
7. School Schedules
8. Budget and Fiscal
9. Attendance and Chronic Absenteeism
10. Technology and Connectivity
11. Teaching and Learning
12. Career and Technical Education

13. Athletics and Extra Curricular Activities
14. Special Education
15. Staffing
16. Teacher and Principal Evaluation System
17. Student Teaching

Any suggestions, concerns and/or questions about our plan should be directed to the Roosevelt Children's Center COVID-19 safety coordinator Lynne Ward at lynne.ward@arcwayne.org or 315 331-2086.

Kimberly Hansen, Arc Wayne Nursing Administrator and Sarah Osmen, RCC School Nurse have been designated as the COVID-19 resource persons to assist our school and the community. They will be the main contact upon the identification of positive COVID-19 cases and be responsible for subsequent communications with the Wayne County Department of Health.

Kimberly can be reached at Kimberly.hansen@arcwayne.org or 315 331-7741.

Sarah can be reached at sarah.osmen@arcwayne.org or 315 331-2086

A. COMMUNICATION/FAMILY AND COMMUNITY ENGAGEMENT

The following participants were involved in the Reopening Plan's creation and may be involved in any possible future revisions

- Lynne Ward – Program Director
- Victoria Sackett – Assistant Director
- Kim Hansen – Head Nurse, Arc Wayne
- Louise Jones – Senior School Psychologist
- Janice Gibala-Broxholm – Speech/Language Department Coordinator
- Deborah Schallmo – Occupational Therapy Department Coordinator
- Ellen DeSandis – Physical Therapy Department Coordinator
- Sara VanDeMortel – Early Intervention Assistant

Parents were asked for their input regarding what they would like to see our program do in order to keep their children safe while still providing developmentally appropriate preschool learning experiences. County Early Intervention and Program for Children with Special Needs departments were also asked for their input.

Moving forward the following are our plans to consistently communicate with and provide information to each of the groups.

- Students– Our students are preschoolers with special needs. Communication regarding health and safety protocols will be provided via developmentally appropriate lesson plans, visual prompts (signage), and supportive prompting.

- Parents/Legal Guardians - Prior to the opening of school, parents will be contacted directly (phone call) by classroom teachers to review new safety and illness policies to assure they understand new guidelines and to answer any questions or concerns they may have. A letter from the school nurse summarizing new policies will also be mailed along with revisions to the parent handbook. Moving forward, the following will allow for consistent and readily available information to guide parental decision making:
 - Arc Wayne/Roosevelt Website <https://www.arcwayne.org/roosevelt.html>
 - COVID-19 Updates including latest CDC symptoms
 - COVID-19 Testing Resources
 - Reopening Plan
 - Revised Parent Handbook
 - Private Facebook Classroom
 - Remind App Secure Texting
 - Emails
 - Phone Calls
 - RCC provided communication notebooks that go back and forth from school and home daily

- Staff – Prior to the opening of school, staff will participate in 3 days of training regarding revised school policies/procedures/practices in regards to COVID-19. Staff also have access to the above stated information on the Arc Wayne/Roosevelt Website <https://www.arcwayne.org/roosevelt.html>. Professional staff participate in weekly department meetings with para-professionals meeting weekly with their classroom teams.

- Visitors – Non-essential visitors will be prohibited from entering the building to the extent possible.
 - Previously arranged appointments – Full disclosure of health and safety protocols are provided to visitors prior to their arrival. Screening occurs before they enter the building.
 - Unscheduled visitors are informed of building protocols and screened prior to entering the building.

Roosevelt Children’s Center will ensure that all students are taught or trained how to follow each of the COVID-19 protocols listed below safely and correctly.

- Hand hygiene:
 - Returning students currently receiving summer services are being provided with lesson/videos/social stories as part of their remote learning curriculum. All will continue and be reinforced as part of the curriculum moving forward.
 - New students will be receiving comparable packets for parents to review with their children prior to the start of school. All will continue as part of the curriculum moving forward.

- Signage/visual prompts will be posted in the classroom and in common areas of the building.
- Proper face covering wearing:
 - Returning students currently receiving summer services are being provided with lesson/videos/social stories as part of their remote learning curriculum. All will continue and be reinforced as part of the curriculum moving forward.
 - New students will be receiving comparable packets for parents to review with their children prior to the start of school. All will continue as part of the curriculum moving forward.
 - Signage/visual prompts will be posted in the classroom and in common areas of the building.
- Social distancing:
 - Returning students currently receiving summer services are being provided with lesson/videos/social stories as part of their remote learning curriculum. All will continue and be reinforced as part of the curriculum moving forward.
 - New students will be receiving comparable packets for parents to review with their children prior to the start of school. All will continue as part of the curriculum moving forward.
 - Signage/visual prompts will be posted in the classroom and in common areas of the building.
- Respiratory Hygiene:
 - Returning students currently receiving summer services are being provided with lesson/videos/social stories as part of their remote learning curriculum. All will continue and be reinforced as part of the curriculum moving forward.
 - New students will be receiving comparable packets for parents to review with their children prior to the start of school. All will continue as part of the curriculum moving forward.
 - Signage/visual prompts will be posted in the classroom and in common areas of the building.

RCC will use verbal and written communication to encourage students, staff and visitors to adhere to Center for Disease Control (CDC) and Department of Health (DOH) regarding the proper use of face coverings when social distancing is not possible

- Students – While we cannot force students to wear masks, in addition to the above curriculum regarding face coverings, RCC staff will model and gently prompt students to wear face coverings to the greatest extent possible, individualizing based upon each students' developmental levels.

- Staff and Visitors – Staff have and will continue to be provided with training and guidance on the required use of face masks in school. There are signs at the entrance to the building indicating that visitors must wear a mask or face covering in order to gain access to the building and while in the building.

If any of the communication platforms already being utilized for students/families are not sufficient, as an Arc Wayne program, Roosevelt Childrens' Center is able to access resources to provide appropriate means of communication to those with visual and/or hearing impairments

B. HEALTH AND SAFETY

Students and staff will return to in-person instruction only when governmental authorities permit in-person education. Additionally any return to in-person instruction will necessitate that the Roosevelt Children's Center leadership also determines the number of students and staff allowed to return in person based on: the ability to maintain social distancing; the availability of PPE, including the availability of cloth face coverings and face masks; in collaboration with counties/school districts//bus companies the availability of safe transportation; local hospital capacity according to the local Department of Health

Training for Staff

Roosevelt Children's Center staff will receive training and resources to educate them regarding the careful observation of symptoms of COVID-19 and health screening that must be conducted each morning before coming to school for themselves and the daily temperature checks that will be done at school for students. That training will occur before returning to in person or a hybrid model of education for the 2020-2021 school year.

School staff will be instructed that any student or staff member with a fever of 100°F or greater and/or symptoms of possible COVID-19 virus should not be present in school.

Staff will also be educated to observe students or other staff members for signs of any type of illness such as:

- Flushed cheeks
- Rapid or difficulty breathing (without recent physical activity)
- Fatigue, and/or irritability
- Frequent use of the bathroom.

Students and staff exhibiting these signs with no other explanation for them should be assessed by the school nurse.

Staff will receive training on proper hand cleaning/sanitizing as well as respiratory hygiene prior to students attending. Signage will be placed in entry areas and in all common areas.

RCC's protocol on proper hand hygiene is to wash hands (using non-antimicrobial soap/water for 20 seconds - two 'birthday' songs) as soon as entering the building (unless unavailable in which case use sanitizing gel and wash at the earliest opportunity) and to wash hands frequently throughout the day. The respiratory protocol is to 1) wear masks whenever within or potentially within 6 ft. of another (e.g. all classrooms and common areas) and 2) cover mouth/nose with a tissue when coughing/sneezing or to use elbow if a tissue is unavailable. Dispose of the tissue and wash hands/wipe elbow/clothing immediately using handwashing protocol.

Information for Parents

Parents will receive written resources regarding the symptoms of COVID-19 and the health screening that must be conducted each morning before their child comes to school. They will also be given information regarding Covid-19 symptoms and instructions to keep their child home whenever they exhibit any of these symptoms.

In addition to those written resources teachers and RCC administrative staff will verbally review instructions with parents/guardians in screening students at home for signs of illness and the symptoms of COVID-19.

Parents will receive information regarding proper hand cleaning/sanitizing as well as respiratory hygiene prior to their child attending school including written protocols for adults, social stories/videos for students

Training for Students

- Developmentally appropriate signage will be placed in classrooms and throughout common areas used to instruct staff and students in correct hand and respiratory hygiene.
- Teachers will provide developmentally appropriate lessons/social stories in regards to health and safety protocols such as mask wearing, social distancing, hand washing, and respiratory hygiene.

Accommodations

RCC is mindful of the need to provide accommodations to both staff and students who are at high risk or live with a person at high risk.

Students – Students who are considered high risk or who live with a person at high risk will be identified by their parent/guardian in response to communication prior to program. "High-risk" students will be encouraged to remain at a 6 ft. distance from others at all times, provided PPE to their ability to tolerate such equipment, and will be provided their own work space/materials. Should districts agree, RCC will be able to provide remote-learning to those students as outlined in the remote-learning/hybrid model section of this document.

Staff – Staff who are considered high risk or who live with a person at high risk will be asked to identify themselves as such to Human Resources. Work accommodations include provision of PPE including mask, face shields, gowns, and gloves to their preference, work re-assignments including providing remote-learning to students or FMLA as they chose in discussion with HR.

Screening and Building Entry Process

RCC will implement mandatory health screenings, including temperature checks, of students, staff, and, where applicable, contractors, vendors, and visitors to identify any individuals who may have COVID-19 or who may have been exposed to the COVID-19 virus. Specifically, all individuals must have their temperature checked each day.

Health screenings including daily temperature checks and completion of a screening questionnaire are required for staff, contractors, vendors, and visitors. Students are required to have a daily temperature check and completion of a daily screening questionnaire. (Per OCFS guidance)

Employees

- All RCC employees are required to screen for Covid-19 symptoms, including taking their temperature, before starting work every day. These self-screenings are reviewed daily.
- If the employee is experiencing any symptoms of COVID-19, including a temperature above 100.0 degrees, has traveled outside NY State, to a state on the NYS COVID Travel Advisory List in the past 14 days or has been in close contact with a confirmed or suspected COVID-19 case in the past 14 days they must not report to work or must immediately contact Arc Wayne nursing supervisor/designee for instructions or go home and contact their health care provider for assessment and testing.
- Staff must stay home if they are sick

Students who ride the bus

Because of the difficulty of obtaining temperature and screening results from parents on a daily basis RCC will take the temperatures of all students who arrive at school via bus.

- 1-2 buses will be unloaded at a time.
- Screeners will be located at the door to each bus.
- Student's temperatures will be taken as they get off the bus.
- Students who pass the temperature screening will be escorted by classroom staff to the building.

- Students and staff will enter the front door closest to their classroom.
- Children who have a temperature of 100.0 degrees or higher will be immediately brought to the RCC isolation room by a screener in full PPE and assessed by the school nurse.
- The parents/guardians/emergency contact will be called to pick up the student

When conducting temperature screenings RCC will have

- Trained staff members to perform temperature screenings
- Sufficient supplies for taking temperatures
- PPE or barriers for staff members conducting the screening.

Depending on the availability of trained staff and supplies, the following methods are recommended by the CDC for conducting temperature screenings

Use of Barriers/Partition Controls for conducting temperature screenings

- Stand behind a physical barrier, such as a glass or plastic window or partition that can serve to protect the staff member's face and mucous membranes from respiratory droplets that may be produced if the child being screened sneezes, coughs, or talk
- Perform hand hygiene. Wash your hands with soap and water for 20 seconds. If soap and water are not available, use a hand sanitizer with at least 60% alcohol
- Put on disposable gloves
- Check the child's temperature, reaching around the partition or through the window
- Make sure your face stays behind the barrier at all times during the screening
- If disposable or non-contact (temporal or infrared) thermometers are used and there was no physical contact with the child, you do not need to change gloves before the next check
- If non-contact thermometers are used, clean them with an alcohol wipe (or isopropyl alcohol on a cotton swab) between each student. You can reuse the same wipe if it remains wet.

Use of Personal Protective Equipment when Barriers/Partition Controls are not available

- If social distancing or barrier/partition controls cannot be implemented during screening, personal protective equipment (PPE) can be used when within 6 feet of a child. However, reliance on PPE alone is a less effective control and more difficult to implement, given PPE shortages and training requirements.
- Upon arrival, wash your hands and put on a facemask, eye protection (goggles or disposable face shield that fully covers the front and sides of the face), and a

single pair of disposable gloves. A gown could be considered if extensive contact with a child is occurring.

- Take the child's temperature.
- If disposable or non-contact (temporal or infrared) thermometers are used and there was no physical contact with an individual, you do not need to change gloves before the next check.
- If you use non-contact thermometers, clean them with an alcohol wipe (or isopropyl alcohol on a cotton swab) between each client. You can reuse the same wipe if it remains wet.
- After screening, remove and discard gloves.
- Use an alcohol-based hand sanitizer that contains at least 60% alcohol or wash hands with soap and water for at least 20 seconds.

Children transported to school by parents/guardians

Drop off before 7:45

- Parents must have signed the OCFS Health Screening Attestation.
- When parents ring the doorbell staff **MUST** ask for parent's name (unless they are positive who the person is).
- Staff **MUST** make sure parent is on list of people who have signed the attestation.
- Before parents are allowed in the building they **MUST** be asked the following questions.
 - Did you complete the COVID-19 health screening for you and your child?
 - Did you take your child's and your temperature?
 - Did you answer no to all questions?
- If parent did not take their or the child's temperature, then staff must meet the parent at the door and take temperature(s).
- If staff cannot see that the parent has a mask on they **MUST** ask if they have a mask and tell them they must wear it to be admitted.
- If parent does not have or refuses to wear a mask then staff must go to the door and get the child.
- They may be admitted to the building and go directly to the day care classroom
- Day care staff **MUST** check that screening has occurred for both parent and child on sign in/out sheets

Drop off between 7:45 and 8:15

If parents must drop off their students between 7:45 and 8:15 they will be directed to drive around to the back door. During that high congestion time of the day we must limit entrance to the building by parents/guardians.

- Parents must have signed the OCFS Health Screening Attestation.

- Parents will be asked to call their student's classroom when they arrive so that a staff member can come pick up the student.
- An additional staff person will be at the door to greet the parents and students.
- Staff **MUST** make sure parent is on list of people who have signed the attestation.
- Before the student is allowed in the building the parent **MUST** be asked the following questions.
 - Did you complete the COVID-19 health screening for your child?
 - Did you take your child's temperature?
 - Did you answer no to all COVID exposure questions?
- If the parent did not take the student's temperature then the staff person must take their temperature.
- Parent will sign their child in.
- The classroom staff person will walk the student to their classroom.

Drop off after 8:15

- Parents must have signed the OCFS Health Screening Attestation.
- When parents ring the doorbell staff **MUST** ask for parent's name (unless they are positive who the person is).
- Staff **MUST** make sure parent is on list of people who have signed the attestation.
- The classroom is called to have a staff person meet the student at the door and bring the sign in sheet.
- Before the student is allowed in the building the parent **MUST** be asked the following questions.
 - Did you complete the COVID health screening for your child?
 - Did you take your child's temperature?
 - Did you answer no to all COVID exposure questions?
- Parent will sign their child in
- The classroom staff person will walk the student to their classroom.

If a parent has not signed the OCFS Health Screening Attestation staff must take the student's temperature and parent's temperature and ask the COVID-19 exposure questions before the student and parent are allowed access to the building.

Visitors/ guests and contractors

Non-essential visitors will be prohibited from entering the building to the extent possible. If a visitor/guest/contractor must enter, the following procedures will be followed.

- Previously arranged appointments – Full disclosure of health and safety protocols are provided to visitors prior to their arrival. Screening occurs before they enter the building.

- Unscheduled visitors are informed of building protocols and screened prior to entering the building.
- All RCC exterior doors are locked. Access is only allowed via a buzzer system at one front door.
- Staff **MUST** ask for their name (unless they are positive who the person is).
- Staff **MUST** tell the visitor they **MUST** wear a mask.
- Before visitors or parents who have not signed attestation are allowed in the building they **MUST** be screened.
- Office staff or day care staff (if before 7:45 or after 4:00) **MUST** meet the visitor/parent at the door and.
 - Take their temperature.
 - Ask the questions on the Visitor COVID-19 Health Screening Assessment/Log.
 - Enter information on log following the directions on log.
 - If visitor/parent answers no to all questions and temperature is less than 100 then they may be admitted to the building.
 - Visitors **MUST** be given visitor sticker and wait in foyer while office staff informs the employee that the visitor is here.
- Contractors will be allowed access to the building through the back maintenance door. The maintenance staff will screen the contractor by taking their temperature and asking them the COVID-19 symptom questions.

Isolation procedures

Room # 35 has been designated as RCC's isolation room for children who develop symptoms consistent with COVID-19 during the school day. The room will contain:

- A washable resting mat
- Small bin of washable toys
- Blanket
- Gloves
- Disposable masks
- face shields
- Disposable gowns
- Buckets
- Sanitizing products (Wipes, sprays, sanitizer)
- Paper Towels

The nurse's office will be reserved as a space for the nurse to administer medication and/or nursing treatments to students who do not exhibit any symptoms of Covid-19. RCC's school's health office will use disposable equipment and supplies as much as possible.

If a child develops symptoms while at school similar to those of COVID-19 the following will take place:

- The school nurse will be called by a classroom staff member and the child will be brought to RCC's isolation room # 35 (former music therapy office).
- RCC school nurse will examine the child then contact the child's parent/guardian.
- If the parent/guardian cannot be reached then emergency contacts will be contacted.
- The parent/guardian or emergency contact will be required to come get the child within an hour.
- A classroom staff will remain with the child until the parent arrives with full PPE used.
- Once the child is picked up, the isolation room will be thoroughly cleaned and disinfected by maintenance or janitorial staff.
- Parents will be told to call their pediatrician and follow their guidance for COVID-19 testing
- The child MUST have a note from their doctor in order to return to school

Should a staff member or student have a confirmed case of COVID-19, the Wayne County Department of Health will be immediately notified for guidance.

- Staff MUST immediately notify RCC when they have tested positive for COVID-19
- Parents MUST immediately notify RCC when they or their children have tested positive for COVID-19
- Once learning of a COVID-19 case who has been in the school, RCC school nurse must immediately notify local health officials. These officials will help determine a course of action for the program.
 - The individual having a confirmed case of COVID-19 MUST remain in isolation (10-14 days) until cleared by a medical professional. They will participate in remote learning as their health allows.
 - A person identified to being a contact to a positive case should be placed on quarantine for 14 days from the last date of exposure. The virus can show up anywhere from day 2 to day 14 of the quarantine period.
 - If a contact is symptomatic or becomes symptomatic during their 14 day quarantine period, then they should be tested. If the test results are positive then they convert to being a positive case of COVID-19 and would have to isolate for 10 days from the date of symptom onset.
 - Close contact is defined by the CDC as someone who was within 6 feet of an infected person for at least 15 minutes starting from 2 days before illness onset. Please note that this will potentially include all students and staff in the individual's classroom as well as any related service providers who work directly with an infected student. Parents of students affected will be contacted directly and given the latest

- available information regarding isolation procedures and testing options. Districts will be kept apprised of their students' status.
 - Contacts of contacts will NOT need to self-isolate but should closely monitor for symptoms and inform RCC immediately should any present themselves.
- Following the guidance of DOH, it is likely students and nonessential staff will be dismissed for 2-5 days to allow time for the local health officials to gain a better understanding of the COVID-19 situation impacting the school. This allows the local health officials to help determine appropriate next steps, including whether an extended dismissal duration is needed to stop or slow further spread of COVID-19
- This temporary closure will also allow janitorial staff to clean and disinfect the affected facilities.
- CDC guidelines suggest staff/students not in direct contact with the infected person can return immediately following cleaning/disinfecting of the facility.
- During this initial short-term dismissal RCC administration will coordinate with local health officials to communicate dismissal decisions and the possible Covid-19 exposure to staff and parents
- Schools are not expected to make decisions about dismissal or canceling events on their own. Child care and school administrators will work in close collaboration and coordination with local health officials to make cancellation decisions.
- Every family will be contacted about closing via Remind (texting app). This will indicate to them that there has been a positive case and that school is closing for the designated period of time
- RCC administrators will seek guidance from local health officials to determine when students and staff should return to school and what additional steps are needed for the school community. In addition, students and staff who are well but taking care or share a home with someone with a case of COVID-19 should follow instructions from local health officials to determine when to return to school.
- It is critical to maintain confidentiality of the student or staff member as required by the American with Disabilities Act and the Family Education Rights and Privacy Act.

Should RCC have a confirmed case of COVID-19, the following cleaning/disinfecting protocol will be followed:

- Close off areas used by the person who is sick
- To the greatest extent possible, windows and doors will be opened, particularly in the area where the infected individual had been located during isolation.
- To the greatest extent possible, cleaning will not begin until 24 hours have passed.
- Janitorial staff will wear full PPE while disinfecting.

- All walls, doors, floors, furniture, materials (toys, etc.), and equipment (electronics, appliances) will be wiped using OCFS approved solutions.
- Cleaning staff must clean and disinfect ALL areas, offices, bathrooms, common areas used by the person.
- Soft surfaces (rugs/furniture) will be vacuumed using a HEPA filter. The room should not be vacuumed while people are in it. Wait until the room or space is empty to vacuum, such as at night, for common spaces or during the day for private rooms.
- An EM360 electrostatic backpack sanitizing sprayer has been purchased by our agency for disinfection of classrooms and therapy spaces throughout the school.
- Once the area has been appropriately disinfected, it can be opened for use.
- Staff without close contact with the person who is sick can return to work immediately after disinfection
- If more than seven days have passed since the person who is sick visited or used the facility additional cleaning and disinfection is not necessary

Social Distancing

In order to promote as much social distancing as possible classrooms should look at ways to

- Include more small group activities. Utilize all tables in room.
- Structure play time to limit numbers of students in an area as much as possible.
- Space students out at tables as much as possible.
- Depending on numbers and space, large groups and greeting time may need to be a "center activity" in a small group.
- Assign students a spot for book time/ puzzle time to promote social distancing.
- Look at areas in classroom and limit ways in and out to help keep kids in areas when needed.
- Limit 1 adult and 1 child in classroom bathrooms at a time. Classrooms that share a bathroom will need to work out a schedule.
- When using outside space split class between playground and grass areas.

Students will be provided with 'social distancing' social stories prior to returning to school as part of the curriculum as well as gentle encouragement/prompting to give their classmates 'space'. Play materials will be placed throughout the room as visual prompts. Social distancing 'markers' will be placed on the floors in the classroom and in communal areas to visually support students' understanding of social distancing.

Social distancing in the rest of the building

- Reinforce Rocky's rules to walk on the white road and try to keep hands off the walls. Kids and adults find creative ways to keep hands off things like hands on your head.
- Social distancing distance markers in areas where people may congregate – staff waiting to pick up food in the kitchen, exterior entrances, nurses office.

- Limit groups of kids to 3 or 4 at a time in large hallway bathrooms.
- Staff lounge: Limit to 3 people at a lunch table. Can use computer room, outside, or other office space, if staff lounge is full.
- Limit occupancy in small offices to one person (exception made for therapy with one adult and one or two students).
- Limit occupancy in copy/file room to one person at a time.
- Staff meetings should be conducted via video conferencing when at all possible. When video conferencing is not possible meetings should be held in open, well ventilated spaces where the ability to spread chairs apart at a distance of 6 ft. is possible.

Social distancing during safety drills

For fire drills during normal operations, classrooms exit the building at the exit closest to their classroom. They meet in the front of the building and remain in a classroom group. In order to maintain social distancing between classrooms, staff will be instructed to be aware of staying as far as possible from other classrooms when exiting the building. Because classrooms will remain in their static groups, strict social distancing will not need to be maintained within members of that classroom.

During lock down drills classes will likely be within their static groups. If a staff person or staff person with a student is in the hallway and has to enter a classroom other than their own, every effort will be made to keep those people at an appropriate social distance from staff and students in that classroom. If staff/students in the hallways must use a small office in which to shelter every effort should be used to enter an office not already occupied.

PPE and Face Coverings

Employees

RCC employees will be trained on how to adequately put on, take off, clean (as applicable), and discard PPE, including but not limited to, appropriate face coverings. This training will occur before the school reopens for in person classrooms.

Staff will be required to wear face coverings.

- At all times when working with children.
- When walking in the hallways and any common areas.
- Anytime social distancing of 6 ft. or more cannot be maintained.
- Unless they are alone in a room or at their workspace with no one within 6 ft.
- In restrooms.

All individuals in school facilities and on school grounds must be prepared to put on a face covering if another person unexpectedly cannot socially distance.

Students

Students 2 years and up will be **encouraged but not required** to wear a face mask

- When walking in the hallways and any common areas based on developmental appropriateness.
- When in the classroom in situations when it is impossible to remain 6 feet apart.
- Students who are unable to medically tolerate a face covering including students where such covering would impair their physical or mental health are not subject to the use of face coverings.
- Those students who can tolerate wearing a face mask will be given mask breaks periodically during the school day based on the activities occurring. For example, students may be given a break from mask wearing during play in the gym or playground or during large group instruction if they can be at a distance of 6 feet from each other. Mask breaks will be provided during other times that the teacher deems as appropriate.

Roosevelt Children's Center will have a supply of disposable face masks and cloth face masks for use by staff and students who do not have their own or chose to wear a disposable rather than cloth mask. SED guidance states that schools must provide acceptable face covering to employees and students if they forget their own and have an adequate supply in case of need for replacement per Executive Order 202.16.

N95 masks, face shields and disposable gowns will be provided for staff taking care of students who have suspected symptoms of COVID-19 until their parents can pick them up from school.

A supply of face shields will be available for those staff who chose to wear them. Face masks must be worn in conjunction with a face shield.

Masks with plastic over the mouth will be available for speech therapists or other staff to use in situations where a student must see the staff person's mouth.

It is recommended that staff wear big shirts over their clothes to protect against secretions from students' nose, mouth, etc.

RCC will ensure we have adequate supplies of PPE for use by school health professionals to assess and care for ill students and staff members.

- Such PPE includes, but is not limited to: face masks (disposable surgical masks), respirators (N95) masks that are fit tested, eye protection or face shields, gloves, and disposable gowns.

Arc Wayne will ensure that the RCC janitorial crew have adequate supplies of PPE if such protection is required by the manufacturer of the cleaning/disinfecting agent being used.

Hygiene, Cleaning and Disinfection

Properly sanitizing surfaces and gathering areas is a major component of reopening Roosevelt Children's Center (RCC) to in person classroom services safely. All staff are encouraged to take cleaning and sanitation very seriously and help in the efforts of keeping surfaces, objects, and spaces clean.

- Routine cleaning of school settings include
 - Cleaning high contact surfaces that are touched by many different people, such as light switches, handrails and doorknobs/handles.
 - Dust and wet-mopping or auto-scrubbing floors.
 - Vacuuming of entryways and high traffic areas.
 - Removing trash.
 - Cleaning restrooms.
 - Wiping heat and air conditioner vents.
 - Spot cleaning walls.
 - Spot cleaning carpets.
 - Dusting horizontal surfaces and light fixtures.
 - Cleaning spills.

- The Arc Wayne/RCC janitorial team has developed cleaning schedules/checklists that follow applicable guidelines and regulations in specified buildings. There will be documentation of cleaning and disinfection completed including what was cleaned and when it was cleaned. The Arc Wayne/RCC janitorial team will sanitize all common areas, classrooms, therapy spaces, offices and bathrooms, excluding technology twice a day.
- Staff need to sanitize their own work space at the end of the day.
- RCC has created daily checklists for use by staff to inspect their work area and ensure that they have sufficient supplies every day (i.e., face covering, tissues, hand hygiene supplies and cleaning supplies, etc.).
- RCC will provide disposable wipes to staff so that commonly used surfaces (e.g., keyboards, desks, remote controls) can be wiped down before and/or after use, followed by hand hygiene.
- For shared work spaces, staff should sanitize the space they used before and after they utilize that area. Common areas and communal objects such as kitchens, coffee makers, copiers, staplers, waiting rooms, conference rooms, etc. will have hand sanitizer near them. Staff must sanitize their hands before using these objects or entering these rooms.
- Staff must sanitize tables or other objects used by outside visitors during meetings after the meeting has ended. Disinfectant will be available to sanitize objects as needed.
- Hand sanitizer stations will be set up around all of the buildings. Please use hand sanitizer when hand washing is not accessible.
- Students will wash their hands upon arrival at school. If soap and water is not immediately available, children over the age of 3 will be given a squirt of hand

sanitizer until they are able to access a sink to wash. Students must be closely supervised when using hand sanitizer.

- Water drinking fountains will be closed. Staff will be encouraged to bring their own water bottles and children will be offered drinks when they request using disposable cups.
- Staff and students are encouraged to wash their hands frequently and after using frequently-touched items. Follow CDC hand-washing recommendations by using warm water and soap for at least 20 seconds.

Classroom Cleaning

Classroom staff will be responsible for cleaning and disinfecting surfaces, toys and materials when soiled and once the children leave for the day. RCC will be using a static classroom model therefore cleaning and disinfection may be performed in between each classroom’s use instead of individual’s use.

- Keeping objects and surfaces in school setting as clean and free of pathogens as possible requires a combination of:
 - Frequent cleaning; and
 - When necessary, an application of a sanitizer or disinfectant.
- Each classroom has a sanitation schedule that regularly documents cleaning of materials used throughout the day as well as needed (e.g. mouthing toys).
- Cleaning, sanitizing and disinfecting products should not be used in close proximity to children, and adequate ventilation should be maintained during any cleaning, sanitizing or disinfecting procedure to prevent children and caregivers/teachers from inhaling potentially toxic fumes.
- If there is visible soil on a diaper changing or table surface, *clean* it with detergent and water before spraying the surface with a sanitizer or disinfectant. Using a sanitizer or disinfectant as this “first step” is not effective because the purpose of the solution is to either *sanitize* or *disinfect*.

Task	Purpose
Clean	To remove dirt and debris by scrubbing and washing with a detergent solution and rinsing with water. The friction of cleaning removes most germs and exposes any remaining germs to the effects of a sanitizer or disinfectant used later.
Sanitize	To reduce germs on inanimate surfaces to levels considered safe by public health codes or regulations.
Disinfect	To destroy or inactivate most germs on any inanimate object, but not bacterial spores.

Note: The term “germs” refers to bacteria, viruses, fungi and molds that may cause infectious disease.

- Toys that cannot be cleaned and sanitized should not be used.

- Toys that children have placed in their mouths or that are otherwise contaminated by body secretions or excretions should be set aside until they are cleaned by hand by a person wearing gloves. Clean with water and detergent, rinse, sanitize with an EPA-registered disinfectant, rinse again, and air-dry.
- Play with plastic or play foods, play dishes and utensils, should be closely supervised to prevent shared mouthing of these toys.
- Machine washable cloth toys should be used by one individual at a time. These toys should be laundered before being used by another child.
- Small toys with hard surfaces can be set aside for cleaning by putting them into a dish pan labeled “soiled toys.” This dish pan can contain soapy water to begin removal of soil, or it can be a dry container used to bring the soiled toys to a toy cleaning area later in the day. Having enough toys to rotate through cleaning makes this method of preferred cleaning possible.
- Children’s books, like other paper-based materials such as mail or envelopes, are not considered a high risk for transmission and do not need additional cleaning or disinfection procedures.
- A cleaning/disinfection checklist will be completed at the designated intervals.

Small office/therapy space cleaning

- All toys are covered - in either bins or cloth/plastic over bookshelves (i.e. shower curtain)
- Toys/materials that cannot be cleaned should not be used (i.e. shared bean/rice boxes, non-washable materials, shared stuffed animals, etc.). In some instances, bean/rice boxes may be used if the child has size-appropriate gloves and is able to wear a mask – both must be used and disposed of after the activity. If this is not possible, child-specific bean/rice boxes must be used.
- Blankets and stuffed animals that are needed to be used by students should be child specific and not shared between children. They should be washed daily when used.
- Toys to be used for the day can be set aside on a desk or shelf (out of the reach of children), while remaining toys are kept covered in bins or behind coverings (towels or sheets over toys on upper shelves is suggested).
- Once toys are used, they are placed in a bin for later cleaning, or cleaned immediately with disinfecting wipes that kills viruses following a session, if used in multiple sessions during a day. Toys should be dry before the next child uses it.
- Tables, chairs, door handles, any other surface touched by a child are wiped down between each session with disinfecting wipes or sprays that kill viruses.
- Touching of materials (i.e. cards/books) is minimized – held by the adult.
- Oral motor materials are either child specific and kept in individual containers, or materials are immediately placed in bin after use to be sanitized later in the day. Child specific oral motor materials should also be routinely sanitized. Recommended product is PureGreen24 Disinfectant to clean Talk Tools materials.

- Gloves are always worn during oral motor activities by the adult and disposed of following the session
- Gloves may be worn by the adult at any time, but need to be disposed of following each session.
- Masks and/or face shields are worn at all times by the adult during any contact with staff or students. If alone in an office, the mask may be removed.
- Hand sanitizer is available in every office and used by the child/adult as needed throughout the session (i.e. sneezing/coughing)
- Bleach cleaning solutions should not be used when a child is present.
- A cleaning/disinfection checklist will be completed at the designated intervals.

OT/PT Clinic cleaning

- Therapist will have student wash hands in the classroom, bathroom or upon entering the clinic.
- A toy cleaning station to be set up in the splint room and/or the tub room. All shared toys will be washed between each use.
- A cleaning/disinfection checklist will be completed at the designated intervals.
- Therapists will sanitize their work area between uses. This includes desk tops, therapy balls, mats, etc. If cleaning and sanitizing is not possible before transitioning a child back to class, then a “This area has not been cleaned yet” sign is to be placed in the area until the therapist has a chance to clean it.

Large bathroom cleaning

Classrooms will often use the large hallway bathrooms in addition to their own classroom bathroom. The following procedures will be followed:

- In order to remain in static classroom groups, only one classroom will use the large boys and girls hallway bathrooms at a time.
- A classroom staff person will wipe down each surface (toilet, sink, etc.) touched by a student or staff after each classroom use to prepare for the next classroom.
- Any individual staff who takes a student into a large bathroom will be responsible for wiping down touched surfaces.
- Any staff member who uses the large bathrooms will be asked to wipe surfaces when finished in order to keep them clean for student use.

Playground cleaning

Playgrounds in schools generally require normal routine cleaning, but do not require disinfection.

- It is not necessary to spray disinfectant on outdoor playgrounds- it is not an efficient use of supplies and is not proven to reduce risk of COVID-19.
- High touch surfaces made of plastic or metal, such as grab bars and railings should be cleaned routinely.

- When a classroom is done using the playground a staff member will wipe all the high touch surfaces, with a sanitizing solution or wipes affective against COVID-19.
- Cleaning and disinfection of wooden surfaces (play structures, benches, tables) or groundcovers (mulch, sand) is not recommended.

Gym cleaning

- Gym equipment must be wiped down with sanitizing solution or wipes affective against COVID-19 after each classroom use.
- A classroom staff member will wipe all the high touch surfaces, with a sanitizing solution or wipes affective against COVID-19.
- Gym schedules will be adjusted to accommodate that cleaning.

C. FACILITIES

Doors which do not have automatic closure mechanisms and/or are not fire-rated may be maintained in an open position to increase air flow. Because RCC provides services for students 18 months to 5 years of age it may not be safe to have all doors left open due to increased possibilities of flight risks.

Each RCC classroom has a child size sink in the bathroom. Some classrooms share that bathroom with the class next door. There are sinks in large boys and girls bathrooms in the hallway. Sinks are available in various places throughout the building for adult use.

Hand sanitizers have been installed in several locations throughout the building at a level only accessible by adults. This was done as a safety precaution so that preschool students do not use sanitizer without adult supervision.

We do not have screens on windows so opening them could prove to be a hazard if insects were to come in the classrooms. The current air flow of our system keeps air circulating fairly well. MERV 13 filters will be installed in order to increase the filtration of virus particles.

Plastic separators or dividers are being considered as a way to increase protection while students are sitting at tables for meals and other small group activities.

D. NUTRITION

Food Service

Roosevelt Children's Center will continue to be in compliance with the Child Nutrition Program. Our students do not eat in a cafeteria. Each class eats in their classroom. We will continue to have students eat in their rooms in order to maintain static classroom groups.

- Classroom staff pick up the food from the kitchen.
- The classroom staff person in charge of getting meals ready will wear gloves and mask when they go to the kitchen.
- One person at a time in the kitchen area (along with the cook).
- Observe the 6ft waiting distance if you need to wait your turn.
- The cook will serve up all food even cold items.
- If staff need to get something out of the cupboards or fridge from the kitchen, disinfectant wipes will be available for them to quickly wipe down the handles.
- Students and adults must wash their hands before meals.
- Social distancing at the tables should be maintained as much as feasible. See through dividers will be installed on classroom tables when social distancing cannot be maintained.
- Staff must continue to use gloves when serving students food.
- Individual portions will be served to students, family style service is not allowed due to social distancing requirements and for health and safety requirements.
- At breakfast cereal and toast remain at the counter and no more child serving/pouring. Adults will serve the students food.
- At lunch each student is served their food as they are coming to the table and the containers of food stay up on the counter.
- Sharing of food and beverages will not be allowed.
- Consider use of paper products and disposable utensils.
- If washable plates, cups and utensils are used they must be thoroughly cleaned and sanitized after use using soap, hot water and rinsed in a bleach solution
- Before and after meals clean the tables with soap and water and then spray with disinfecting solution/bleach solution.
- Thoroughly clean and sanitize counters.
- Water bottles will no longer be allowed in school. Staff will hand out water in disposable cups when a student requests a drink. For students unable to drink out of an open cup, specific cups with tops will be assigned to students. The cups and tops will be labeled with the name of the student. The cups will be washed and sanitized after use.
- Clean and wash classroom refrigerators once a week.

Parents are informed about the meal program at RCC during the intake process including those using a language other than English. RCC participates in the Community Eligibility Provision (CEP), which means that meals are free for all of our student. Therefore we will not need to collect money from families for meals.

Parents are required to inform RCC if their child has any food allergies and what those are. The RCC school nurse will ensure all classroom staff are aware of any allergies of their students. RCC staff will ensure students with food allergies are protected from exposure to those foods, for example we designate a room as “peanut free” if one of the students has a peanut allergy – no peanut products are allowed in that room.

If there becomes a need to close area schools, including Roosevelt Children's Center, we will be in contact with school districts regarding opportunities for parents to acquire meals from their school district. Parents will be informed of those opportunities.

E. TRANSPORTATION

Because counties contract with school districts and bus companies to transport children to 4410 programs, Roosevelt Children's Center has very little control of arrival and dismissal times. Arrival and dismissal times can be hectic with the potential for contact with many adults and children. The following will be put into place to maintain social distancing between children and staff during arrival and dismissal.

CDC Guidelines Summary:

- Stagger arrival and drop off times
- Childcare providers go outside to pick up children
- Limit direct contact with parents and staff and adhere to social distancing
- Hand hygiene stations at entrances – if not sinks/soap then 60% hand sanitizer
- Sanitary wipes for pens
- Ideally same parent should drop off/pick up
- Screen kids/staff at the door upon arrival

In order to decrease congestion and maintain social distancing the unloading and loading of buses will take longer than it has in the past. Roosevelt Children's Center has expressed that concern to the school districts and bus companies. We will work with them to resolve any issues with buses having to leave RCC quickly in order to complete other bus runs.

Arrival of buses (7:50, 12:15)

- Each classroom will assign staff to unload their children from the buses.
- One or two buses will be unloaded at a time starting at the front of the line.
- Temperatures of the children will be taken by screeners as they get off the buses.
- Staff and children will enter using the front door closest to their classroom - south door will be unlocked during arrival and locked again by maintenance at 8:15

Dismissal of buses (10:30, 1:30, 2:45)

10:30 dismissal - Two toddler classes and one half day class

- Toddlers and half day class may dismiss at the same time

1:30 dismissal – Nine full day classrooms

- Bus arrival will be announced starting at 1:15
- Buses will be announced in order starting from the front of the bus loop

- Three buses will be announced at a time in order to reduce congestion at the doors and maintain a distance of six feet between students and between staff.
- A classroom staff person will bring the students to the buses based on when they are called.

2:45 dismissal – one half day classroom

- All students dismiss at the same time

Arrival of students transported by parents/guardians

Drop off before 7:45

- Parents may park out front (if no buses are in the loop) or along the north side of the building in designated parent parking spots.
- They will ring the front doorbell to gain access by day care staff then follow the screening procedures in place
- Parent may walk their student directly to the classroom

Drop off between 7:45 and 8:15

- If parents must drop off their students between 7:45 and 8:15 they will be directed to drive around to the back door. During that high congestion time of the day we must limit entrance to the building by parents/guardians.
- Students will be picked up at the door by a classroom staff, following screening procedures in place.

Drop off after 8:15

- Parents may park out front (if no buses are in the loop) or along the north side of the building in designated parent parking spots.
- They will ring the front doorbell which will be answered by office or day care staff
- A classroom staff will meet the parent at the door and walk the student to the classroom following screening procedures in place.

Parent pick – ups

10:30, 1:30 and 2:45

Parents will wait outside at the back of the building for classroom staff to bring their student out

After 2:45

Parents will be allowed to enter the building to pick up their students from day care after ringing the front door bell.

Pick-up during any other times of the day

Parents will ring the front doorbell. Parent will be let in but asked to wait on the bench by the door. A staff person will bring their student out to them.

F. SOCIAL EMOTIONAL WELL-BEING

School Counseling Program Plan:

- The **School Counseling Program** at RCC consists of 3 certified School Psychologists and 1 certified Art Therapist/ Trauma Counselor.
- Members of the RCC School Counseling Program provide the following services:
 - Assessment of all children enrolled within the program and children referred for assessment from sources outside of the program (Committee on Preschool Special Education, Early Intervention Programs, etc.).
 - Social/ emotional screening of children returning to school following the COVID-19 school closure during the first month of school. This screening will be completed with an observational tool using a 5 point scale to measure changes in emotional regulation, attention and levels of engagement in these identified children.
 - Provide referrals and communication with sources within the community for additional assessments and/ or referrals for children and families as needed.
 - Hold regular meetings to collaborate on children referred to the counseling program as a source of professional support and continued supervision and mentoring.
 - Provide on-going training on social emotional development, use of positive behavior interventions to address behavior, development of specific skills to enhance social emotional development, and understanding and addressing and addressing trauma in young children.
 - Attend weekly meetings with classroom staff and parents to monitor for changes in the social emotional and mental health of children.
 - Provide on-going support to classroom staff in implementing positive social and behavioral strategies for all students (Tier 1).
 - Social skills instruction for classrooms provided in collaboration with classroom staff using an established social emotional curriculum for young children. This includes building social skills, techniques for helping students with self-calming, and use of mindfulness and meditation strategies for young children. (Tier 1)
 - Creating and implementing “Rocky Lessons” (EC-PBIS mascot) with classroom staff to teach skills specific to rules established within Roosevelt Children’s Center (1. We take care of ourselves, 2. We take care of each other, 3. We take care of our world). (Tier 1)

- Consultation with classroom, therapy staff and parents to address concerns for behavioral and emotional symptoms observed in specific students (Tier 2 & 3 supports).
 - Provide individual and small group counseling for children who are demonstrating increased need for social emotional support (Tier 2 & 3).
 - Create and oversee implementation and data collection for children who are in need of Behavior Intervention Plans to address creation of positive social interactions and decrease maladaptive behaviors (Tier 3).
- An **Advisory Council** to address social emotional development of the children and staff at RCC exists and currently meets twice monthly. The Council is part of the **Early Childhood Positive Behavioral Intervention System** which has been in existence for the past 5 years at RCC. The council consists of members of the School Counseling Program, as well as administrators, teachers, classroom assistants, related service therapist and a parent member. The council has sought regular input from parents through surveys and information shared with them on a regular basis. The **Advisory Council** has established school-wide rules, expectations and lessons to address the social emotional development of all children within the school.

The **Advisory Council** collaborates with local school districts, outside mental health providers (Catholic Family Charities, Wayne Behavioral Health) and providers of developmental evaluation and services (Levine Autism Center, Strong Center for Developmental Disabilities, Arc preschool programs) to gain continued information on services and supports available to children and families within the community.

- Staff from the **School Counseling Program** at RCC will continue to provide information and **referrals** to a variety of agencies for additional mental health/behavioral and emotional support to families. These include: Office for People with Developmental Disabilities (OPWDD), Children's Health Home of New York (CHUNNY), Family Support Services of Arc Wayne, Wayne Behavioral Health Center, Catholic Family Charities, and the University of Rochester Pediatric Behavioral Health and Wellness. These referrals are made by
 - Identifying the needs of a student which have not been able to be met within the Tier 1, 2 and 3 services provided within the school program.
 - Meeting with the child's parent to clarify the ongoing mental health needs of the student and the needs of the family.
 - Reviewing potential referral sources with the family and making a choice of referral source based on child/ family need.
 - Discussing steps of the referral process and gaining parental written consent for sharing of information with the referral agency.

- The parent and school personnel who made the referral maintain contact throughout the process to ensure that the referring agency has been contacted and that they are able to meet the needs of the child/ family.
- **Staff development** will be conducted prior to students entering the classroom to address developmentally appropriate ways to talk to students about the ongoing COVID-19 health emergency. This will include an opportunity for staff to share their concerns and questions around educating children while the pandemic still exists and dealing with the challenges of social distancing guidelines, mask wearing and increased cleaning/ sanitizing of objects and surfaces.
 - Restorative practices to address emotions and experiences of staff who have been furloughed as well as staff who found themselves trying to engage in distance learning with young children with disabilities (which wasn't always successful).
 - Staff will review signs of trauma in young children, expectations for regression in social and emotional skill development and how to screen all children for indications of more serious mental health needs when they enter.
 - Staff will review strategies to help all children calm and regulate, teaching of social skills using an early childhood social skills curriculum, use of social stories and role playing for skills specific to individual and small groups of children, and the use of a variety of visual prompts and reminders in the classroom to help children use skills to cope and regulate.
 - Staff will be encouraged to seek support from administrators and school counseling staff to provide a safe place for them to discuss ongoing stress that they may be experiencing working through change and the continued presence of the COVID-19 virus in our communities. Classroom teachers meet with their supervising administrator on a weekly basis to build support. Arc Wayne also offers an Employee Assistance Program which all employees have available to them. A reminder of these services will be included in staff training.

G. SCHOOL SCHEDULES

Roosevelt Children's Center classes are required to operate for a set period of time each day based on the approved length of the school day – 5 hours of instructional time for full day classrooms and 2.5 hours for half day classrooms. Those hours of operation will not change.

Since almost all Roosevelt staff provide direct service to students, they must be present in the building during the hours the students are here. It will not be possible to adjust working hours for most staff. Individual needs or circumstances of staff will be taken into consideration. It is also necessary for most non-direct care staff to be present in the

building although there may be opportunities for some to occasionally work from home for at least part of their normal work day.

In the event that the school schedule must change from a full attendance, five day a week program to either a hybrid model or strictly remote learning, staff and families will be contacted through the secure texting app, Remind. In addition notification will be put on TV, radio, and internet school closing sites. For those who use a language other than English, a phone call by staff who speaks the parent's native language may be necessary.

School districts and counties will be consulted when it appears schedules must be changed from full attendance to hybrid or all remote.

As a special needs program, Inclusion is inherent to our approach to students – instruction is modified based upon students' needs and IEP goals. Our re-opening plan provides parents/guardians a choice as to which modality (in-person or remote learning) fits their family's needs at this time. If access to the preferred model needs support, RCC will work with districts and the family in order to eliminate any barriers. All modes of communication are presented in the family's primary/preferred language.

H. BUDGET AND FISCAL

Roosevelt Children's Center parent agency, Arc Wayne, tracks COVID related expenses and has implemented rolling forecasts to gauge the ongoing impact. Monthly financial reports include an assessment of variances from budget and from prior year results that are directly attributable to the impact of COVID-19.

The agency anticipates pursuing available grants as a resource for the purchase of PPE, facility upgrades and sanitation equipment. Additionally, the agency plans to pursue CARES Act funds and NYS funds to the extent possible based on qualification criteria. This may include such things as the Employee Retention Tax Credit and reimbursement of unemployment insurance costs.

In the event tuition reimbursement is insufficient to meet additional COVID-19 costs incurred, the agency will utilize reserves to the extent possible and practicable. In addition, the agency will review staffing patterns and all other operating costs for any possible savings and cuts. The agency will continue to pursue grants and other alternate sources of funding. Because current tuition reimbursement rates are insufficient to meet even the normal costs of providing services, the agency will need to carefully consider whether or not it has sufficient financial reserves to bear any added costs caused by COVID-19. Such analysis may lead to a reduction in services and/or the closing of programs that are not considered to be fiscally viable.

Roosevelt Children's Center Classroom program enrollment for the 2020-2021 school year is currently full. Parents who have indicated a preference for having their child

attend or not attend in person classrooms have opted for their child to attend in person. Should the governor not allow in person classrooms or should the rates of infection increase thus forcing a shutdown of in person learning RCC will engage parents and stress the importance of participating in any remote learning that we are required to do.

I. ATTENDANCE AND CHRONIC ABSENTEEISM

Student attendance is collected each day by classroom staff and entered into ProviderSoft Web-based software system. In the event of the need to move to remote learning, teachers/therapist are required to keep daily communication logs with parents and students outlining the method/platform utilized, goals addressed, and the response.

RCC utilizes a variety of modalities to communicate to families including:

- Arc Wayne/Roosevelt Website <https://www.arcwayne.org/roosevelt.html>
- Private Facebook Classroom
- Remind App Secure Texting
- Emails
- Phone calls

As preschoolers, attendance/participation in program is not compulsory; however, we do ask parents/guardians let us know if/when/why their child will be out or not participating. If the child is out of in-person instruction two (2) consecutive days without notification, the teacher and/or school nurse will reach out to assess the situation.

Should parents/guardians not respond to the above mentioned modalities, RCC requires teachers and therapists to continue outreach weekly, at a minimum. If we have no response after three weeks' time, staff will attempt a home visit and district CPSE and counties will be informed of the status and asked for guidance moving forward. All written communication will be provided in the family's primary language. Translators will be made available during verbal communication.

Preschool Special Education programs are not compulsory and therefore educational neglect for not participating in distance learning is difficult to substantiate. Staff are reminded, however to continue to be aware of any situations that could be determined to fall under suspicion of child abuse. Staff are required to attend Mandated Reporter training upon hire and refresher training every September.

J. TECHNOLOGY AND CONNECTIVITY

- RCC teachers have already gathered information from their students that will be returning for the 2020-2021 school year regarding the level of access parents/students have to devices and high speed broadband at their places of residence.
- During the intake process for new students, staff will gather device and internet access information from parents.

- That information will be updated periodically in the event we must resort to strictly remote learning or a hybrid model.
- RCC will collaborate with students' home school districts in order to address the need to provide devices and internet access to students who do not currently have access:
- Some parents may not yet have sufficient access to devices or high-speed internet. If it becomes necessary to go to a hybrid or all remote model of instruction teachers will monitor their students' mastery of the Learning Standards and IEP goals through consistent contact with parents either via mail, email, or phone calls,
- RCC will have resources for staff available for professional development in effective practices during remote instruction and learning. Department coordinators will work with staff to resolve issues in the provision of teletherapy and remote learning.
- Arc Wayne IT department will provide information technology (IT) support to staff members who are experiencing IT issues and challenges. Minimal support may be able to be given to families by teachers and therapists.
- Arc Wayne IT department assessed the effectiveness of the digital tools and platforms we are using. RCC has an encrypted email system in order to protect students' information. Microsoft Teams and Skype are currently the only platforms Arc Wayne allows for the provision of virtual services. Teachers have a secure private classroom Facebook page that parents must be invited to join.
- In order to promote equitable access and flexibility for students, staff and families during remote instruction and learning RCC has a limited supply of iPads to loan to families and staff who do not have appropriate devices for teletherapy. Web cams are also being purchased for therapists to conduct teletherapy sessions from their computers at school

K. TEACHING AND LEARNING

Roosevelt children's Center will be prepared to move between full in person instruction to a hybrid model to a fully virtual model of instruction should conditions warrant. If the need to move to a hybrid or fully remote program model occurs, staff will utilize already established means (e.g. Facebook Private Classroom, weekly virtual classroom meetings) to maintain a sense of community and inclusion until the classroom can return to in-person instruction.

In-Person Education Model

Our reopening plan prioritizes in-person services to the greatest extent possible for students with special needs. Preschool students, especially those with special needs, are hands on learners. In order to benefit the most from their special education services students should receive those services in person as much as is possible. As low class numbers are inherent in our special education programs, we anticipate that we will be able to stay at or below room capacity calculations to meet social distancing

expectations. This will allow us to provide a five day a week schedule, while still being able to maintain a safe environment for students and staff.

Using the variety of communication methods outlined in the Communication/Family and Community Engagement section of the current document will allow RCC staff to quickly and fluidly respond to families based upon their individualized needs and requests.

For the coming academic year, RCC is providing the following classroom programs.

- Five (5) full day (5 hour) self-contained 8:1:2 classrooms (Eight(8) identified students, one special education teacher, one teacher assistant, and one teacher's aide).
- Two (2) full day (5 hour) self-contained 8:1:2 classrooms utilizing an Applied Behavioral Analysis Approach (ABA) (same staffing configuration as above).
- Two (2) full day(5 hour) integrated 8:1:1 classrooms (Eight (8) identified students, up to eight (8) 'typical' students), one special education teacher, one Early Childhood Instructor/Teacher Assistant, and one Teacher's Aide)
- Two (2) ½ day (2 ½ hour) integrated 8:1:2 classrooms ((Eight (8) identified students, up to eight (8) 'typical' students), one special education teacher, one Early Childhood Instructor/Teacher Assistant, and one Teacher's Aide).
- Two integrated Toddler Developmental classes (five identified students and up to six "typical" students)

Students are assigned to a 'static' group based upon CPSE approved program and will remain in that group for the academic year regardless of whether an in-person, hybrid, or completely remote learning model is needed given the current circumstances regarding COVID-19 outbreak or family preference.

We understand that some parents may not feel comfortable having their children return to 100% in person learning. If that is the case we will offer them remote classroom learning and teletherapy for approved therapies. Staff will be assigned to provide those services remotely to the student.

Hybrid Model

As low class numbers are inherent in our special education programs, we anticipate that we will be able to stay at or below room capacity calculations to meet social distancing expectations; therefore, continuing on with a five day a week schedule.

If we are required, either by state mandate or by district condition, to provide a hybrid model, students will be divided by 50% based upon the conditions either set by or required for logistical reasons by districts Classroom groupings would remain the same; however, 50% students would attend 'in-person' 2 days (Monday/Tuesday) with remote

learning activities to complete Thursday/Friday and the other 50% would attend Thursday/Friday with remote learning activities Monday/Tuesday. Wednesday will be reserved for additional support/activity to supplement the learning provided during the in-person learning as needed. The days of attendance will be adjusted if necessary based upon the model used by a majority of the school districts we serve.

Teachers will provide activities similar to those provided in the all remote learning model for the days that the students do not attend in person. Depending on the frequency of approved therapies on a student's IEP services may be provided all in person or a combination of in person and teletherapy.

Remote learning Model

Classroom groupings/configurations would remain the same. Staff will utilize a variety of approaches to engage students 'beyond the screen' including providing information regarding topics to be covered early on to allow families to obtain or receive materials, modeling and prompting completion of activities, utilizing music and movement to engage students in learning/reinforcing concepts, and allowing student interests to guide the topics/activities.

Designed for:

- 1) Instances where Executive Order has closed in person learning either across the state or in our region
 - 2) Instances where a suspected or confirmed COVID-19 case requires isolation of individual students or static classroom groups
 - 3) Instances in which parents/guardians have chosen to continue distance learning for their children who deemed high risk or who live with someone considered high risk.
- Private classroom Facebook groups where teachers post learning activities as well as short video lessons/stories covering the curriculum/activities of the day including ones recorded while in-face sessions are being held.
 - Curriculum related packets sent or dropped off weekly for the coming week.
 - Weekly virtual class meetings – include those at home once a
 - Virtual Tele-therapy for IEP related services including speech/language, occupational, physical, and music therapy as well as counseling and ABA via Skype or Microsoft Teams based upon parent preference.
 - Private and secure texting capability via the Remind system for ease of quick, brief communication to respond to questions.
 - Weekly emails or, if requested, US mail information regarding learning activities children can do at home.
 - During remote learning periods, staff will utilize a variety of approaches in order to engage students 'beyond the screen' including:

- Helping families prepare for the week to come by providing information regarding the topic to be covered and materials needed (or will be provided) early on.
- Modeling and prompting the completion of 'table top' activities and then encouraging families to 'post' completed projects on private Facebook Classroom group.
- Utilizing live or pre-recorded music and movement activities to introduce and reinforce concepts.
- Allowing children's interests guide the topic or activities covered by attending to any items or themes that repeatedly come up during virtual meetings.

In the event state or local conditions warrant moving to/from in-person, blended and/or all remote instruction the following is our continuity of learning plan.

- Before school starts in September teachers will contact each family of returning students to review guidelines and also get an initial assessment of the family's ability to participate in remote learning.
- RCC administrative staff will contact parents new to our program
- Therapists will follow up with parents to discuss what teletherapy would look like and develop a back-up plan with each family in the event that it becomes to switch from all in person to hybrid or all remote learning/therapy.
- This back-up plan will allow for a relatively smooth transition from one modality to another.

Instruction

As a 4410 preschool special education program, instruction aligns with NYS Learning standards modified and supported in relation to goals outlined on individual IEP's.

As a 4410, high levels of support and individualized instruction is inherent in the program. Were we to move to a remote or hybrid model, this support continues in the form of those outlined in the communication section of the current document (and noted below) that occurs not only by special education teachers but also by related service providers resulting in directed skill development support in the area(s) of delay.

Prior to the opening of school, parents will be contacted directly (phone call) by classroom teachers to review new safety and illness policies to assure they understand new guidelines and to answer any questions or concerns they may have. A letter from the school nurse summarizing new policies will also be mailed along with revisions to the handbook. Moving forward, the following will allow for consistent and readily available information to guide parental decision making:

- Arc Wayne/Roosevelt Website <https://www.arcwayne.org/roosevelt.html>
 - a. COVID-19 Updates including latest CDC symptoms
 - b. COVID-19 Testing Resources
 - c. Reopening Plan

d. Revised Parent Handbook

- Private Facebook Classroom
- Remind App Secure Texting
- Emails
- Phone Calls
- RCC provided communication notebooks that go back and forth from school and home daily.

As preschoolers, attendance/participation in program is not compulsory; however, we do ask parents/guardians let us know if/when/why their child will be out or not participating. If the child is out of in-person instruction two (2) consecutive days without notification, the teacher and/or school nurse will reach out to assess the situation. Should parents/guardians not respond to the above mentioned modalities, RCC requires teachers and therapists to continue outreach weekly at a minimum. If we have no response after three weeks' time, staff will attempt a home visit and districts/counties will be informed of the status asking for guidance moving forward.

RCC staff is already reaching out to returning students, providing families with information regarding our re-opening plan and providing lessons/social stories in regards to health and safety protocols (e.g. mask wearing). New students and families will receive similar information prior to the start of school. Staff will be trained to address developmentally appropriate ways to talk to students and monitor their adjustment prior to students' return. With the support of the school counseling staff social/emotion screening will occur within the first month of program. On-going individualized academic assessment and support is inherent in the 4410 program.

As a special needs preschool program, reentry adjustment issues are common for our students and many of our new students have never participated in a structured classroom before. Curriculum and expectations have always provided ample time and support in order to help students understand and follow expectations as well as a high level of care to help them work through any social/emotional needs they present.

RCC utilizes multi-tiered support systems (MTSS) in the form of Early Childhood Positive Behavioral Intervention System (EC-PBIS). Rules and expectations are taught, supported, and modeled throughout the building and throughout the day. For example, signage in classrooms and in common areas highlight 'Rocky's Rules' (We take care of ourselves, We take care of each other, We take care of our world). Lesson plans are developed and utilized not only once, but whenever the need for re-teaching and reinforcing is apparent at the program, classroom, and/or individual level. In addition, when a student is in need, every classroom has a 'calm down' space to be used when a child becomes deregulated or just 'needs a break'.

RCC has always utilized a weekly team meeting approach to sharing issues, concerns, and progress on our students. These meetings include classroom staff, related service providers, and the school psychologist assigned to the classroom. Meetings will continue whether they can be in person or need to be virtual.

As a 4410, all of our identified students have had a multi-disciplinary evaluation to determine five developmental areas (cognitive, adaptive, social/emotional, communication, and physical). These evaluations are used in order to develop IEP goals and objectives which are reviewed, at a minimum 3-4 times a year, in progress reports. Students who attend as daycare students in our integrated classrooms receive on-going assessment of their progress in a less formalized, but still attentive manner by screening their understanding of academic concepts either one on one or by noting their responses during lessons. As mentioned above, social/emotional screenings will occur once in person sessions begin. Students will be assessed within the first month of program by our school psychology and counseling staff.

As mentioned in the food service section of the current document, all RCC students eat in the classroom. Classroom staff use the preparation area with sink to serve individualized portions to students seated at tables with dividers to provide for social distancing. Adults sit with students during meals and will support/redirect the students' ability to maintain social distance.

Classroom and Therapy Considerations

Classrooms

As a 4410, our classroom groupings are 'static' groups who do not intermingle for activities outside of the classroom itself. The same holds true for any remote classroom learning activities whether virtual or in private Facebook Groupings.

- Static classroom groups means that children will remain with the same group of children and staff for the duration of the school day.
- Classroom groups will not mix in common areas of the school – i.e. the gym and playgrounds.
- In-school movement will be reduced where possible by keeping students within a defined area or classroom.
- To the greatest extent possible one ST, OT, and PT will be assigned to each classroom. This will help to reduce the number of adults interacting with each classroom. Therapists going from one room to another will wash/sanitize their hands and therapy space in between seeing each child.
- Stagger the use of the hallway bathrooms, allowing use by only one classroom at a time.
- Bathrooms will be monitored by staff to ensure social distancing, that it is clean, and students are washing hands after use.
- Napping materials should be sanitized daily and, to the extent practicable, assigned to individual students for the school year.
- Center-based and small group learning is a critical component of an instructional program. RCC teachers should:
 - Avoid centers that include multiple students using it at one time.

- Provide center (small group) instruction at a table with social distancing barriers when possible.
- Provide students with individual sets of materials in personalized bins, to avoid sharing of common items.
- Follow proper sanitation guidelines from the Department of Health after children have been at a learning center or in small groups.

Static groups for before or after school care

In addition to the 4410 special education classroom programs, RCC runs a licensed child care center. Those preschool students are integrated into two of our special education classrooms between the hours of 7:45- 1:30. Typically developing toddlers are integrated into our Early Intervention Toddler Developmental classes from 7:45-10:30. Every effort will be made to keep day care student groups static. They will remain in their rooms for naps and will not combine until which time as it becomes necessary due to staffing ratios. RCC's child care program supports social distancing, PPE usage, cleaning and disinfection protocols outlined in this plan, to the greatest extent possible.

Classroom reorganization

- Classrooms will reorganize or change classroom furniture placement to create more spaces for students to play.
- Move tables to allow spacing, making clear play area zones, create additional play areas using tables, shelves etc.
- Consider that limiting the number of kids in one play area.
- May need to consider changing locations of activities- books/puzzles at the table instead of rug.
- Space out spots for children to sit on at large group as far as possible – preferably 6 feet apart.

Access to toys and materials

- Limit access to toys with curtains-made out of a wipe able surface.
- Bins of toys assigned to each child for small groups and art activities.
- Touch Table/sensory will not be able to be used by multiple children. Consider using individual sensory bins, out of shoe box bins, with child's name on the bin.
- Have playdough labeled for every child.
- Individual bins or bags with art supplies for each student.
- Toys will need to be cleaned daily if they are played with or exposed to students
- Bag/bin for books and puzzles to be used all week.
- Consider removing large items (kitchens, tool bench). If not removed they will need to be cleaned daily.
- Create a "to be washed" bin for when students put items in their mouth, are sneezed/coughed on.

- Toys do not need to be washed before someone else can touch them. If one child is playing and then walks away, others can play with the toy. Toys are cleaned and sanitized at the end of every day/class.

Toileting/Hygiene

Each class has a small bathroom attached to its room, some of which are shared with a neighboring classroom. Classrooms will include in their schedule, at a minimum, the following. If sharing a bathroom with an adjoining class, these schedules must be coordinated:

- Hand washing upon entering the classroom – if this is not immediately possible due to the numbers of students needing to use the sink, hand sanitizer will be used until students can arrive at the sink using appropriate social distancing.
- Early morning toileting – each classroom is responsible for completing sanitation protocol when all of their students have toileted.
- Hand washing prior to breakfast.
- Hand washing prior to leaving for individualized related services and upon re-entering the classroom.
- Hand washing prior to leaving the classroom for gym/playground/movement groups.
- Hand washing prior to lunch.
- Late morning/early afternoon toileting – each classroom is responsible for completing sanitation protocol when all of their students have toileted.
- Hand washing prior to leaving on the bus.
- If students need to use the toilet at another time than the classroom schedule, classroom staff is responsible for following sanitation protocol as soon as their student is finished.

Gym Schedules

- The gym will be set up so both the front and back halves have equipment available for classroom use.
- Classrooms will alternate the use of both halves in order to maximize available gym times and be able to sanitize surfaces in between classroom's use. For example a class scheduled to use the gym from 9:00-9:30 will use the back half, then the class scheduled for 9:30-10:00 will use the front half allowing time for the back to be sanitized before the next classroom uses it.

Playground schedules

- In order to maintain static classroom groups only one class at a time will be allowed on each of the playgrounds
- Classrooms may want to have half of their class use the playground while the other half uses the grassy area next to the playgrounds.

Therapy considerations

According to the State Education Department - Until schools return to normal operating conditions, the same flexibility with respect to IEP implementation for delivery of services during school closures due to the COVID-19 outbreak continues to apply to the programs and services whether delivered in-person and/or remotely (e.g., flexibility with respect to the mode and/or manner; group or individual sessions; specific group size for related services, frequency, duration and location of related services, and special class size ratio etc.).

Transitioning Children

- Children and adults are to wash their hands in the classroom or the hallway bathroom on their way to therapy and on the way back to the classroom following the session.
- Transition time will be longer and can be factored into the session – use the transition for additional language/gross and fine motor experiences.
- Additional time will be needed to clean materials and surfaces between sessions with sanitizing wipes/spray that kill viruses. Sprays should not be used if the child is present. If using disinfecting wipes, the child should not touch the wet services.
- The adult last using a small office area is responsible for cleaning it when finished and before it is used by any other adult/child.

Groups

- When a student has group services on their IEP every effort will be made to group that child with another child from the same classroom. If that is not possible then individual sessions will be provided
- Group sessions must consider physical placement of a child in the office, with no more than 2 children in a therapy room. Marking of seating space on the floor, or assigned seating at a table will be needed to maximize physical distancing.
- Outdoor group activities are encouraged during summer program and when weather is appropriate and supervision can be maintained.
- Consideration of larger classroom language groups in place of small office language groups can be considered; with IEP amendments for location changed, as needed.

OT/PT Clinic

- Ball pit, pillows, bean box, will not be used.
- Cloth or carpeted swings will be covered with a washable surface. Ropes of swings to be covered with tubing for easier cleaning.
- Upstairs clinic will be used for large motor exploration.

- Downstairs clinic will be used for fine motor in the following areas: 1-2 children in satellite room, normal fine motor area, splint room, ball pit area, and cranial area.
- Ball pit area will also be used for moving, stretching, etc.
- All gross and fine motor areas to be set up with disinfectant, paper towels, a “This area has not been cleaned yet” sign and gloves.
- Therapist will set up individual baggies with each of their child’s supplies (crayons, scissors, glue sticks, etc.). Each therapist will have a bin/basket with their children’s supplies.
- Masks will be worn by therapists while in the clinic/working with children or in “close” quarters with others.

L. CAREER AND TECHNICAL EDUCATION

CTE does not specifically apply to 4410 programs except for the basic Learning Standards which can be achieved in remote, blended or in-person preschool instructional models.

M. ATHLETICS AND EXTRA CURRICULAR ACTIVITIES

Roosevelt Children’s Center does not offer any extracurricular activities to our students. Our parent agency, Arc Wayne (Community Services Program), does provide activities for children and young adults at times when RCC school programs are not in session (late afternoon, evenings and weekends)

- Community Services staff will alert the janitorial crew regarding areas throughout the school that have been used by their program and need to be thoroughly cleaned and disinfected after use.
- If the janitorial crew are not available to clean areas (late in the evening or at the weekend) the Community Services staff will clean and disinfect all equipment, surfaces and materials.
- A cleaning/disinfection checklist will be completed once the area has been cleaned

N. SPECIAL EDUCATION

As a 4410, our program primarily provides for identified students. Those with an IEP have access to the exact same in-person, remote, and, if needed hybrid, program as the ‘typical’ students in our integrated programs albeit with modifications based upon their needs and IEP goals.

All RCC students/families have access to the following for their communication needs, translated into their preferred language if necessary.

- Private Facebook Classroom
- Remind App Secure Texting
- Emails

- Phone Calls
- RCC provided communication notebooks that go back and forth from school and home daily.

RCC enjoys a very positive and collaborative relationship with the 19 districts for whom we provide programs via CPSE. Regular communication via emails and phone calls exist regarding their needs and the status of their students. This was particularly evident during the shutdown when meetings moved almost seamlessly to virtual in nature. RCC will keep districts apprised of the status of their students' program (e.g. in-person, hybrid, and remote) as circumstances shift.

RCC will continue to provide all aspects of the IEP to students to the greatest extent possible including any necessary accommodations, modifications, supplemental aids and services/technology outlined on the IEP.

Staff are required to maintain regular communication with families regarding the provision of program regardless of the mode (in-person, hybrid, remote) by utilizing such communication options as the private Facebook Classroom, Remind app secure texting, email, notebooks, and phone calls which provides a variety of options for communicating to families based upon their preference.

District CPSEs will be apprised of parent preference in regards to in-person or remote learning and asked for guidance as to their wishes. They will also be informed should there be a need for one of their students to isolate and receive remote learning. If either the local DOH or an executive order calls for an intermittent or extended school closure, RCC will contact districts to indicate how that will directly impact their students.

RCC regularly assesses the effect of program on students' development. Curriculum and individualized learning opportunities are adjusted accordingly. At a minimum, progress updates are provided 3-4 times a year to families and districts.

RCC does not anticipate the need to adjust any current data collection practices at this time. Staff maintain anecdotal notes daily that include ratings of the student's responsiveness to program from an academic, adaptive, and social perspective. These same rating systems can be used in relation to remote and hybrid models.

There are important considerations and approaches to related service provision over the various models of instruction (in-person, remote, hybrid/blended): Those considerations will be adjusted based on the model used.

- In-person: Students will receive their full IEP services if attending 5 days per week/maximum groups of 2 children/push-in services into the classroom as appropriate
- Hybrid: Students will receive as many of their services as possible within staff schedules while in the building/attending class. Sessions not able to be completed while in the building will be offered as virtual to parents who wish to

participate (i.e. child with 3x/30 individual may receive 2 sessions in school and one session virtual). Distance learning activities will continue in coordination with the classroom.

- Remote: Parents will be offered as many sessions up to what is on the IEP that they would like to occur virtually (i.e. parent with a child who gets ST 3x/30 individually may request one, two, or three sessions, based on their preference). Distance learning activities will continue in coordination with the classroom.

Related service providers' caseloads will, to the extent possible, be assigned to a limited number of cohorts/pods (classrooms) as would any required group sessions. Should students need to intermittently move from one model to another (in-person, remote, hybrid), therapists will maintain a consistent caseload to allow for continuity of service and relationship

O. STAFFING

All Roosevelt Children's Center teaching and therapy staff hold a valid certification/license appropriate to their service assignment. Certifications and licenses have been verified by the school administration using the internet-based tools made available by NYSED?

Roosevelt Children's Center does not anticipate any staffing changes in order to meet instructional and operational demands during the COVID emergency period. If we must provide classroom programs in a hybrid model with only half the number of students attending each day it may not be necessary to employ all staff during that period.

Our school will undertake robust recruitment efforts to identify and process qualified substitutes. In the 2020/2021 school year, as permitted by NYSED, if qualified substitute teachers cannot be engaged, individuals with a high school diploma or equivalent, even those not working toward certification can first be engaged for up to ninety (90) days and then beyond the first ninety (90) day period through the end of June, 2021, as long as the RCC administration documents and attests that recruitment efforts did not identify a fully qualified substitute teacher. The RCC administration must attest to the shortage of qualified recruits initially and then at the end of the first ninety (90) day period. Recruitment efforts will be extensively documented.

Staff members who are requesting an accommodation from reporting for in-person work due to concerns about their own health must notify the Human Resources department and then comply with submitting requested information before the agency can determine if a reasonable accommodation can be made based on applicable law, regulation and the agency's needs and resources.

P. TEACHER AND PRINCIPAL EVALUATION SYSTEM

This required section of the reopening plan is not applicable since 4410 programs are not subject to the specific laws and regulations regarding professional evaluation cited in the NYSED guidance.

Q. STUDENT TEACHING

Roosevelt Children's Center does not typically have many student teachers. We do, however accept PT and OT interns from local colleges. We will continue to offer those placements to the best of our ability.