



# COVID-19 Public Health Emergency School Reopening Plan

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**Introduction**

The Child Study Center of New York has submitted this School Reopening Plan in compliance with the guidance from NYS Department of Health and NY State Education Department.

As with any consideration toward resumption of in-person instruction, the health and safety of students and staff are paramount. The reopening plan is conditioned on this primary consideration. No school will reopen without clear assurance that the measures described herein have been implemented and can be maintained. Until we announce that our schools are reopened, consider that distance learning will continue.

As of the date of this posting, we await a decision from the Governor's office on New York State's readiness to reopen its schools. It has already been stated that certain metrics relating to the state's monitoring of the COVID-19 pandemic will influence not only the decision to reopen, but to remain open. It is possible that a resurgence of the pandemic in New York State or an exposure incident in the school could result in a closure of an individual class or the entire school for a period of time, necessitating a return to full-time distance learning for students.

For purposes of the reopening plan, the school Director is the COVID-19 safety coordinator.

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**Communication/Family and Community Engagement**

In developing this plan, The Child Study Center of New York solicited input from multiple stakeholders through a series of online surveys. The surveyed groups included parents/guardians and school staff. Through affiliation with the InterAgency Council of Developmental Disabilities Agencies, Inc. input was gathered through weekly meetings with other New York State providers of special education preschool services to develop a full understanding of the challenges and potential solutions. A large portion of plan is predicated on guidance from the New York State Department of Health and New York State Education Department guidance documents.

The Child Study Center of New York has utilized online survey methodologies to gather feedback. These are provided in multiple languages and accessible forms according to the needs of our families.

Communication will include:

- Clear and concise instructions, policies and procedures and signage in preferred languages and available on multiple electronic platforms and printed.
- Ongoing health and safety training for parents and staff.
- Staff and students will be trained in proper hygiene practices including, but not limited to, proper handwashing, sneeze/cough etiquette (respiratory hygiene), social distancing measures, proper use of masks/face coverings
- School signage will support these practices as well as any other recommendations issued by the Centers for Disease Control and Prevention and Department of Health.

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## Health and Safety

The health and safety of the children and adults in our schools is paramount. Health and safety considerations must always come first in every decision made and every action taken by our schools. Prevention is best provided by following the recommendations of health authorities in the following areas:

- Health Checks
- Healthy hygiene practices
- Social Distancing
- PPE and cloth face coverings
- Cleaning and disinfection

### Health checks

Health checks will be performed during different phases of the day to ensure the continued safety of students and staff.

#### a) Training

Staff and families will be trained to observe and recognize the symptoms of COVID-19. The Centers for Disease Control and Prevention (CDC) maintains the most [up-to-date list of symptoms of Coronavirus](#). While the list may not be all inclusive, and some people may exhibit other symptoms, as of 7/29/2020, the following are listed as the most common symptoms:

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

Staff will be trained to recognize symptoms of Multisystem Inflammatory Syndrome in Children (MIS-C) associated with COVID-19 which is a serious condition associated with COVID-19 in children and youth. Schools should notify the parent/guardian if their child show any of the following symptoms and recommend the child be referred for immediate follow up with a healthcare provider:

- Fever

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- Abdominal pain
- Vomiting
- Diarrhea
- Neck pain
- Rash
- Bloodshot eyes
- Feeling extra tired

Staff will be trained to call for emergency transport (911) for any of these emergency warning signs of MIS-C or other concerning signs:

- Trouble breathing
- Pain or pressure in the chest that does not go away
- New confusion
- Inability to wake or stay awake
- Bluish lips or face
- Severe abdominal pain

Staff and families will be further educated to observe students and 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; and
- Frequent use of the bathroom

Students and staff exhibiting these signs with no other explanation will be referred to sent home. Parents/guardians will be contacted to come pick up their ill child.

b) Screening Questionnaire

Prior to reopening the building, all staff and students will be subject to a screening questionnaire, which will be completed periodically thereafter.

The questionnaire determines whether the individual has:

- knowingly been in close or proximate contact in the past 14 days with anyone who has tested positive through a diagnostic test for COVID-19 or who has had symptoms of COVID-19
- tested positive through a diagnostic test for COVID-19 in the past 14 days.
- Has experienced any symptoms of COVID-19, including a temperature of greater than 100.0° F in the past 14 days: and/or
- Has traveled internationally or from a state with widespread community transmission of COVID-19 per the [New York State Travel Advisory](#) in the past 14 days.

Families will be reminded weekly of these screening requirements through electronic and paper communications.

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c) Temperature Screening

It is expected that families will take precautions to check their child's temperature prior to sending them to school.

As an added precaution, School staff will be assigned to check staff and student's temperatures upon arrival at school, but before admittance to their classroom. This check will be performed as each staff arrives or as each bus arrives and the students disembark.

- Students will be supervised while maintaining social distancing indoors while they wait their turn.
- A visual inspection of the staff/student for signs of illness which could include flushed cheeks, rapid breathing or difficulty breathing (without recent physical activity), fatigue or extreme fussiness.
- Temperatures will be taken using contactless infrared thermometers.

These screenings are of a pass/fail nature and actual temperature results will not be recorded. Anyone not passing this check will be referred to return to home or to be picked up their parent/guardian.

**Healthy Hygiene Practices**

- a) Healthy hygiene practices will be emphasized at the school throughout the day for both students and staff. These will include:
- Stay home if they feel sick
  - covering the mouth and nose with an acceptable face covering when unable to maintain social distance from others
  - proper storage and disposal of Personal Protective Equipment (PPE)
  - Adhere to social distancing instructions
  - Reporting symptoms of, or exposure to, COVID-19
  - Follow hand hygiene, and cleaning and disinfection guidelines
  - Follow respiratory hygiene and cough etiquette.
- b) Signage promoting healthy hygiene will be posted at entrances and in the classrooms, restrooms and administrative offices.
- c) All staff will participate in video training that teaches healthy hygiene practices.

**Hand Hygiene**

- d) Sinks will be available in all classrooms to support hand hygiene through the use of soap and warm water, which is a preferred alternative to alcohol-based sanitizers. Alcohol-based sanitizer will be available to use when soap and water is not readily available and hands are not visibly soiled.
- e) Minimally, staff and students should wash their hands as follows:
- Upon entering the classroom
  - After using shared objects or surfaces
  - Before and after snack or lunch
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**Respiratory Hygiene**

- f) Staff and students will be instructed on proper respiratory hygiene practices. Since COVID-19 is spread from person to person in droplets produced by coughs and sneezing.

Students and staff be instructed to cover their mouths or noses with a tissue when coughing or sneezing . If a tissue is not available, students and staff will be instructed to cover the mouth or nose with the inside of their elbow or shirtsleeve rather than using their hands.

Students and staff will dispose of used tissues in non-contact trash receptacles

Hand hygiene is to be performed after sneezing, coughing or handling dirty tissues or other soiled material.

The school will provide a supply of tissues and no-touch trash receptacles.

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**Social Distancing**

- g) One of the key safety practices is to maintain a distance of 6 feet from others. This practice has a significant effect in our considerations for reopening.
- Desk spacing in classrooms will be limited such that students sit 6 feet apart from one another. This requirement has informed our decision to limit the capacity of any one classroom to no more than half its normal class size.
  - To minimize the exposure of students and staff to a minimal number of persons, cohorts will be created so that the same students will be grouped together with the same staff. Therapists will have specific classroom assignments.
  - Arrival and departure times will be staggered, and multiple entrances exits will be used as safe and practical to support social distancing and avoid funneling students through the same space.
  - Volunteers and visitors will not be permitted to enter the building. Parent meetings will be held through electronic means. If a parent must meet in person, the meeting will be held on a scheduled basis and in-person attendance will be limited to one staff person. Other staff who may need to be involved will join the meeting through electronic means.
  - Access to rest rooms, while generally available, will be staggered and capacity will be limited to observe social distancing guidelines.
  - Where practical, students will be supplied with individual materials to avoid sharing. These materials will be stored in segregated containers and cleaned regularly.
  - Weather permitting, outdoor activity is encouraged so long as social distancing can be maintained. Cohorts will not intermingle in outdoor settings.
  - Signage in the schools will clearly illustrate both traffic flow and proper spacing to support social distancing.
  - Schools do not have cafeterias; therefore, lunch and snacks will continue to be served in the classroom by classroom staff using proper hygiene protocols.
  - During activities involving singing or aerobic activity will require spacing between individuals to be increased to 12 feet.
- h) We recognize that certain groups are at increased risk for complications from COVID-19 and may need added or alternative provisions for social distancing. Students who have family members who are in high risk groups may also need to attend school remotely.
- Persons in these groups should consult with their healthcare provider regarding prevention:
    - i) Individuals age 65 or older;
    - ii) Pregnant individuals;
    - iii) Individuals with underlying health conditions including, but not limited to:
      - (1) Chronic lung disease or moderate to severe asthma
      - (2) Serious heart conditions
      - (3) Immunocompromised
      - (4) Severe obesity (body mass index (BM) of 30 or higher
      - (5) Diabetes
      - (6) Chronic kidney disease undergoing dialysis
      - (7) Liver disease
      - (8) Sickle cell anemia

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- (9) Children who are medically complex, who have neurologic, genetic, metabolic conditions, or who have congenital heart disease are at higher risk for severe illness from COVID-19 than other children.
- i) The school will endeavor to provide reasonable accommodations to students and staff who are at high risk or live with a person who is at high risk, in accordance with Americans with Disabilities Act requirement.
  - j) Students with special needs or students who are medically fragile may not be able to maintain social distancing, hand or respiratory hygiene, or wear a face covering or mask. We encourage families to work with their healthcare providers so that an informed decision can be made on how best to meet the child's needs at school while protecting their health and safety. With the input from healthcare providers and school personnel, we will explore the feasibility of certain accommodations as may be necessary. Remote instruction will always be an option in lieu of sending the student to school for in-person instruction.

**Personal Protective Equipment and Face Coverings**

- k) Child Study Center of New York requires that all staff wear a face covering while on the school property.
- l) Students should likewise wear a face covering, particularly in those instances when social distancing cannot be achieved or maintained. Families are encouraged to practice mask-wearing at home in preparation for in-person instruction.
- m) Students and staff are encouraged to provide their own face covering from home.
- n) The school schedule will be arranged to permit "mask breaks" for students and staff, offering periods where masks can safely be removed for short periods so long as social distancing is maintained.
- o) The school will provide masks for staff and students who may have forgotten to bring their personal mask.
- p) The school will train staff and students how to adequately put on, take off and discard PPE
- q) The school does not employ any health professionals and no staff will be engaging in aerosol generating procedures.
- r) Staff who will be engaged in high-intensity contact with students will be issued additional protective equipment including, but not limited to, disposable gowns, eye protection, face shields and nitrile gloves.

**Management of Ill Persons**

- s) Per Education Law § 906, "whenever...a student in the public school shows symptoms of any communicable or infectious disease reportable under the public health law that imposes a significant risk of infection of others in the school, he or she shall be excluded from the school and sent home immediately, in a safe and proper conveyance. The director of the school shall immediately notify a local public health agency of any disease reportable<sup>3</sup> under the public health law."
- t) School staff must immediately report any illness of students or staff to the school director. Such reports should be made in compliance with FERPA and Education Law 2-d.
- u) The schools will isolate and dismiss any student or staff member who has a fever or other symptoms of COVID-19 that are not explained by a chronic health condition for follow up

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with a health care provider. Students being isolated will be supervised by an adult wearing appropriate PPE until a family member/guardian picks them up.

- Students being sent home will be escorted to their parent/guardian.
- The parent/guardian will be instructed to call their health care provider, local urgent care or clinic.
- Symptomatic students or staff members follow CDC's Stay Home When Your Are Sick guidance unless otherwise directed by a healthcare provider or the local department of health. If the student or staff has emergency warning signs such as trouble breathing, persistent pain or pressure in the chest, new confusion, inability to arouse, bluish lips or face, call 911 and notify the operator that the person may have COVID-19.
- 
- v) Per CDC and NYSDOH recommendations, the school will:
  - Close off areas used by a sick person and not use these areas until after they have been professionally cleaned and disinfected.
  - open outside doors and windows to increase circulation in the area.
  - Wait as long as possible, preferably 24 hours, prior to cleaning and disinfecting.
  - Clean all areas used by the person suspected or confirmed to have COVID-19 such as offices, classrooms, bathrooms, lockers and common areas.
    - i) Once the area has been appropriately cleaned and disinfected it can be reopened for use.
    - ii) Individuals without close or proximate contact with the person suspected or confirmed to have COVID-19 can return to the area and resume school activities immediately after cleaning and disinfection.

If more than seven days have passed since the person who is suspected or confirmed to have COVID-19 visited or used the facility, additional cleaning and disinfection is not required, but routine cleaning and disinfection will continue.

#### **Return to School after Illness**

- w) A person not diagnosed by a healthcare provider (physician, nurse practitioner, or physician assistant) with COVID-19 they can return to school:
  - Once there is no fever, without the use of fever reducing medicines, and they have felt well for 24 hours;
  - If they have been diagnosed with another condition and has a healthcare provider written note stating, they are clear to return to school.
- x) If a person is diagnosed with COVID-19 by a healthcare provider based on a test or their symptoms or does not get a COVID-19 test but has had symptoms, they should not at school and should stay at home until:
  - It has been at least ten days since the individual first had symptoms;
  - It has been at least three days since the individual has had a fever (without using fever reducing medicines); and
  - It has been at least three days since the individual's symptoms improved, including cough and shortness of breath.

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**Contact Tracing**

- y) The school will cooperate with state and local health department contact tracing.  
(Confidentiality will be maintained as required by federal and state laws and regulations)
- Keep accurate attendance records of students and staff
  - Ensure student schedules are up to date
  - Assist local health departments in tracing all contacts if the individual at school in accordance with the New York State Contact Tracing Program.
  - School staff will not determine who is to be excluded from school based on contact without specific guidance and direction from the NYC Department of Health.

**School Closures**

- z) The school will close as directed by local health department authorities in response to pre-determined parameters, conditions or metrics that will serve as an early warning sign that positive COVID-19 cases may be increasing beyond an acceptable level.
- aa)

**Cleaning and Disinfection**

- bb) School buildings will be subject to thorough cleaning and disinfection of all surfaces prior to reopening, using a professional cleaning and disinfection service.
- cc) Frequent cleaning of high touch surfaces will be performed by staff:
- Tables
  - Doorknobs
  - Light Switches
  - Countertops
  - Handles
  - Desks
  - Phones
  - Keyboards and tablets
  - Toilets and restrooms
  - Faucets and sinks.
- dd) Use of disinfectants will be done in the absence of students and students will not participate in cleaning or disinfection activities
- ee) Nightly cleaning and disinfection of the building and surfaces will be performed by a professional cleaning and disinfection service.

**Safety Drills**

All required safety drills will be scheduled and conducted to comply with the frequency required by regulation and in consideration of a hybrid schedule such that all students will be participating in the required number of drills. However, drills will be staggered so as not to intermingle cohorts of students and staff.

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### **Facilities**

Currently, The Child Study Center of New York has no plans to add, alter or repurpose any spaces in the buildings.

All classrooms will be reconfigured to allow for 6 feet of distance between students for social distancing. Desk locations will be marked on the floor so that the configuration can be restored after cleaning or other activities that might require the moving of furniture.

Clear instructional signage will be added to the facilities to aid in enforcement of mask wearing, social distancing and hygiene practices. Hallways will have clear signage to enforce direction of travel.

Hand sanitizer stations will be placed at entrances/exits to the building and in each classroom.

### **Plumbing Facilities and Fixtures**

To maintain the integrity of classroom cohorts, sinks will be available in each classroom for handwashing. Bathroom use will be staggered, and occupancy will be limited by social distancing standards.

### **Child Nutrition and Food Service**

Per DOH guidelines, The Child Study Center of New York will continue to utilize meal delivery services through the Department of Education. Breakfast and lunch will continue to be provided and served in the classrooms at the students' desks. Protocols will be established to ensure cleaning of eating surfaces and hand washing before and after meals and snacks.

As necessitated, families will be referred to apply for free or reduced-price meals through public programs.

### **Transportation**

Transportation to and from school will be provided by the Office of Pupil Transportation.

- When students embark and disembark the bus, they should follow social distancing protocols. This will increase the time required to load and unload buses at schools in the morning and afternoon.
- Schools should consider staggered arrival and departure times to ensure social distancing.
- Schools should reconfigure the loading and unloading locations for students who are transported by bus, car or are pedestrians.
- Since hand sanitizer is not permitted on school buses, schools should

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**Social Emotional Well-Being**

The Child Study Center will employ CASEL's five core social and emotional competencies within our classroom, school, and the surrounding community as a template for assessment and intervention. These five areas are: self-awareness, self-management, social awareness, relationship skills, and responsible decision making.

All parents and family members will be offered the opportunity to attend workshops that focus on the social emotional learning competencies and address the challenges that COVID-19 has presented to their child's social-emotive growth.

Children mandated for counseling services will continue to receive their sessions remotely or in school. It is expected that some children may have regressed emotionally and socially due to the pandemic, civic unrest, and fiscal hardships their families may have experienced. To facilitate healing from this "perfect storm", counseling sessions and support for parents and children will be offered informally. Any child who has regressed significantly will be referred for further evaluation (CPSE) and be provided the appropriate intervention to help readjustment to the classroom. Children and families can also be provided additional support by community-based programs such as: Richmond University Medical Center Behavioral Medicine or the Jewish Board Child Development Center.

All staff members will have the opportunity to attend professional development workshops related to supporting the educational, social, and emotive needs of our students and the impact of COVID-19.

A school climate team will be developed with representatives from every discipline working within the school (administrators, teachers, teacher assistants, psychologists, social workers, speech pathologists, physical and occupational therapists) to assess the ongoing emotional status of our staff and offer the necessary peer support and guidance in meeting the social and emotional needs of our children.

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**School Schedules**

Students attend physically on alternating days or weeks. Students are split into two groups by address, first initial of last name, or other to reduce load on buses and support physical distancing requirements. In addition to in-person instruction, we will also provide remote or virtual learning to ensure students are covering all necessary content, regardless of the number of hours they receive in-person instruction per week.

**Staggered Attendance by week, alternating days- 4 day weeks**

- Students Group 1 attends physically Monday and Wednesday
- Students Group 2 attends physically Tuesday and Thursday
- Fridays could be used for teacher planning and/or to receive professional development, have digital meetings with students, or hold office hours while students attend/work digitally/remotely and buildings are cleaned.

**Physical Distancing**

<b><i>In-Person/ Remote Instruction</i></b>	In-person instruction will be offered for all students, however physical distancing measures and precautions will be implemented. All students will have access to our remote instruction which includes live instruction, video uploads, access to worksheets, teletherapy and gross motor activities.
<b><i>Gathering Limits</i></b>	Max size of 6 students per classroom for in-person instruction.
<b><i>Physical Distancing</i></b>	Maintain six-foot separation between desks, tables and workstations; and between students and staff to the greatest extent possible. This includes: <ul style="list-style-type: none"> <li>-avoiding centers with multiple students to one at a time (water/sand/sensory tables)</li> <li>-providing students with individual sets of materials to avoid sharing of common items.</li> </ul>
<b><i>Health Screening and Temperature Checks</i></b>	Conduct daily health screenings for symptoms and history of exposure for students and staff; this includes daily temperature checks upon arrival for both staff and students.
<b><i>Face Coverings</i></b>	Face coverings will be provided and worn by staff at all times. We will encourage the use of face coverings for students as developmentally appropriate in settings where six feet of physical distancing cannot be maintained.

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<u><i>In-Person</i></u>	<u><i>Remote Learning</i></u>	<u><i>Hybrid</i></u>
<p>Group 1 attends Monday &amp; Wednesday            Group 2 attends Tuesday &amp; Thursday</p> <ol style="list-style-type: none"> <li>1. Young children learn best in supportive face-to-face environments filled with adult-to-child interactions and activities that build skills and develop behaviors.</li> <li>2. Max of 6 students per classroom; social distancing will be enforced; individual sets of materials will be provided for each student.</li> <li>3. Mandated therapy will be provided in-person (Sp, OT, PT, Co)</li> <li>4. Breakfast and Lunch will be provided as per Schoolfood and served as individual meals via classroom.</li> </ol>	<p>ClassDojo and or Google Classroom learning platform and Zoom</p> <ol style="list-style-type: none"> <li>1. Teachers will provide remote learning including live video and pre-recorded circle time, story time, individual sessions, lessons for the week, resources for activities and worksheets including paper packets.</li> <li>2. Tele-therapy will be provided as per the child's mandate.</li> <li>3. Fine and gross motor resources will be provided.</li> <li>4. Social-emotional resources will be provided.</li> </ol>	<p>Provide a mix of both in-person and remote learning for all students</p> <ol style="list-style-type: none"> <li>1. Teachers will provide both in-person and remote learning including live video and pre-recorded circle time, story time, resources for fine and gross motor activities, paper packets will be offered.</li> <li>2. In-person and tele-therapy will be provided as per the child's mandate.</li> <li>3. Fine and gross motor activities will be provided both in-person and remotely.</li> <li>4. Social-emotional resources will be provided.</li> </ol>

**Attendance and Chronic Absenteeism**

We will continue to monitor and record student participation, whether for in-person instruction, distance learning or hybrid models.

**Technology and Connectivity**

We have surveyed and will continue to survey families and staff to ensure their access to the internet and availability of devices necessary to participate in remote learning.

Students without either/or high-speed internet access or a device will be referred to apply for assistance through the local school district.

In the event that a student does not have high-speed internet access and/or a device, learning materials will continue to be provided in printed form in order to allow the student to continue their learning continuum during remote learning periods.

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**Teaching and Learning**

The use of the Creative Curriculum for preschool along with New York City Department of Education Pre-K Scope and Sequence Guidelines are used. Delivery method will be provided via in-person, remote or hybrid methods by the child's classroom teacher. Online components of remote or hybrid models will be provided in both synchronous methods to give the student the opportunity to participate in real-time instruction and interaction with classmates. Also, asynchronous methods will be available for students to use at times of their choosing.

Regardless of the method of instruction, teachers will maintain bi-weekly contact with students and families. This contact may be conducted via telephone or online conference preferably but may be supplemented by email contact for the convenience of the family. Student families will have access to contact teachers via multiple means to use at their convenience.

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**Glossary**

**(as adopted from NYS Department of Health Interim Guidance for In-Person Instruction at Pre-K to Grade 12 Schools During the COVID-19 Public Health Emergency (July 13, 2020):**

- **Responsible Parties:** Responsible Parties shall be responsible for developing the plan, affirming to having read and adhere to this guidance, and meeting the standards set forth herein. The designated party can be an individual or group of individuals responsible for the operations of the school or schools. Child Study Center of New York's responsible party is the agency administration comprised of the Executive Director/Chief Executive Officer and the respective Directors of our school buildings.
- **Face Coverings:** Responsible Parties must maintain protocols and procedures for students, faculty, staff, and other individuals to ensure appropriate personal protective equipment (PPE) is used to protect against the transmission of the COVID-19 virus when on school grounds and in school facilities. Specifically, appropriate PPE means, at least, an acceptable face covering, which is strongly recommended to be worn by all individuals at all times but is required to be worn any time or place that individuals cannot maintain appropriate social distancing. However, if face coverings are to be worn by all individuals at all times, Responsible Parties should allow students to remove their face covering during meals, instruction, and for short breaks so long as they maintain appropriate social distance. Acceptable face coverings include but are not limited to cloth-based face coverings (e.g., homemade sewn, quick cut, bandana), and surgical masks that cover both the mouth and nose.
- **Social Distancing:** Responsible Parties must maintain protocols and procedures for students, faculty, and staff to ensure appropriate social distancing to protect against the transmission of the COVID-19 virus when on school grounds and in school facilities. Specifically, appropriate social distancing means six feet of space in all directions between individuals or use of appropriate physical barriers between individuals that do not adversely affect air flow, heating, cooling, or ventilation, or otherwise present a health or safety risk. If used, physical barriers must be put in place in accordance with United States Department of Labor's Occupational Safety and Health Administration (OSHA) guidelines, and may include strip curtains, cubicle walls, plexiglass or similar materials, or other impermeable divider or partition.
- **Spaces:** To reduce social density, Responsible Parties should consider and assess additional and/or alternate indoor space(s) that may be repurposed for instruction or other required purposes in support of in-person instruction within the school facility, school grounds, municipal facilities, municipal grounds, or community (e.g., community centers), as well as outdoor space(s) where health and safety conditions (e.g., allergies, asthma) allow for such potential usage.
- **In-Person Instruction:** To ensure equity in education, Responsible Parties should prioritize efforts to return all students to in-person instruction at this time. However, based on the dynamic nature of local community transmission of the COVID-19 virus, a phased-in approach or hybrid model combining in-person instruction and remote/distance learning may be necessary at various times through the 2020-2021 school year. In planning for these approaches and models, school plans should indicate if certain students will be prioritized to return to in-person instruction first or more frequently based on educational or other needs (e.g., early grades, students with disabilities, English language

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learners), given requirements for equity, capacity, social distancing, PPE, feasibility, and learning considerations.

- **Cohorts:** Responsible Parties should “cohort” students, to the extent practicable, to limit potential exposure to the COVID-19 virus. Cohorts, particularly for younger students, are self-contained, pre- assigned groups of students with reasonable group size limits set forth by the Responsible Parties in their plans. Responsible Parties should enact measures to prevent intermingling between cohorts, to the extent possible (e.g., separation by appropriate social distancing, particularly if there are multiple cohorts in one area). Responsible Parties should make reasonable efforts to ensure that cohorts are fixed – meaning contain the same students – for the duration of the COVID-19 public health emergency. Faculty may instruct more than one cohort so long as appropriate social distancing is maintained.
- **Screening:** Responsible Parties must implement mandatory health screenings, including temperature checks, of students, faculty, 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. If an individual presents a temperature of greater than 100.0°F, the individual must be denied entry into the facility or sent directly to a dedicated area prior to being picked up or otherwise sent home. Responsible Parties must also use a daily screening questionnaire for faculty and staff reporting to school; and periodically use a questionnaire for students, particularly younger students, who may require the assistance of their parent/legal guardian to answer. Remote health screening (e.g., by electronic survey, digital application, or telephone, which may involve the parent/legal guardian) before any individual reports to school, is strongly advised.
- **Transportation:** Consistent with State-issued public transit guidance, Responsible Parties must develop protocols and procedures, which include that individuals must wear acceptable face coverings at all times on school buses (e.g., entering, exiting, and seated), and that individuals should maintain appropriate social distancing, unless they are members of the same household. Responsible Parties should encourage parents/legal guardians to drop off or walk students to school to reduce density on buses.
- **Food Services:** Responsible Parties must continue to provide school breakfast and/or lunch to students who were previously receiving school meals, both on site and remote. For students on site, Responsible Parties must provide meals while maintaining appropriate social distancing between students. Students do not need to wear face coverings when seated and eating so long as they are appropriately socially distanced. Responsible Parties may serve meals in alternate areas (e.g., classrooms) or staggered meal periods to ensure social distancing and proper cleaning and disinfection between students.
- **Ventilation:** Responsible Parties should increase ventilation with outdoor air to the greatest extent possible (e.g., opening windows and doors) while maintaining health and safety protocols, particularly for younger students.
- **Hygiene, Cleaning, and Disinfection:** Responsible Parties must adhere to and promote hygiene, cleaning, and disinfection guidance set forth by DOH and the Centers for Disease Control and Prevention (CDC). Responsible Parties must train all students, faculty, and staff on proper hand and respiratory

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hygiene. Responsible Parties must maintain logs that include the date, time, and scope of cleaning and disinfection, as well as identify cleaning and disinfection frequency for each facility and area type and assign responsibility to staff.

- **Contact Tracing:** Responsible Parties must notify the state and local health department immediately upon being informed of any positive COVID-19 diagnostic test result by an individual within school facilities or on school grounds, including students, faculty, staff, and visitors. In the case of an individual testing positive, Responsible Parties must develop and maintain plans to support local health departments in tracing all contacts of the individual, in accordance with the protocols, training, and tools provided through the New York State Contact Tracing Program. Confidentiality must be maintained as required by federal and state law and regulations. Responsible Parties must cooperate with all state and local health department contact tracing, isolation, and quarantine efforts.
- **Return to School:** Responsible Parties must establish protocols and procedures, in consultation with the local health department(s), about the requirements for determining when individuals, particularly students, who screened positive for COVID-19 symptoms can return to the in-person learning environment at school. This return to school protocol shall include, at minimum, documentation from a health care provider following evaluation, negative COVID-19 diagnostic test result, and symptom resolution, or if COVID-19 positive, release from isolation. Responsible Parties should refer to DOH's "Interim Guidance for Public and Private Employees Returning to Work Following COVID-19 Infection or Exposure" regarding protocols and policies for faculty and staff seeking to return to work after a suspected or confirmed case of COVID-19 or after the faculty or staff member had close or proximate contact with a person with COVID-19.