



EDUCATION REOPENING PLAN
SEPTEMBER 2020

Revised 9.2.20

4635 UNION ROAD
CHEEKTOWAGA, NEW YORK 14225

ASPIRE OF WESTERN NEW YORK

In preparation for the reopening of Aspire Center for Learning, the Leadership Team of Aspire of WNY is committed to the health, safety and wellness of children, families, and employees. This plan will evolve as guidance requirements and recommendations from the New York State Department of Health (NYSDOH), New York State Education Department (NYSED), the Center for Disease Control (CDC) and the New York Office of Children and Family Services (NYOCFS) are modified.

Remote learning cannot replace students' experiences with their teachers, therapists, administrators, and support employees. We must work together to provide a continuum of services that includes in-person instruction, learning opportunities and therapy in a safe environment for students and employees.

REOPENING MODEL

Aspire of WNY will be implementing a hybrid model when we reopen in the Fall for classroom located at the Center for Learning. The overarching goal is to reduce the number of students to half of those assigned to each classroom. Students will be broken into two groups and will attend school according to a schedule. The A group will attend on Monday and Tuesday and the B group will attend on Thursday and Friday. Wednesdays will be reserved for a thorough classroom/therapy area cleaning and disinfecting, as well as preparing materials for instruction and therapy. Remote learning will be maintained for those students not in attendance at school, Monday through Friday. While teachers will conduct actual instruction, classroom teacher assistants and aides will support in-person and remote learning opportunities much like they normally did.

Communication with school districts, parents, teachers, therapists and support classroom employees will be essential in the creation and implementation of the hybrid model.

1. A letter will be sent to parents prior to the beginning of the school year seeking information about how we can better assist parents when working with students remotely and what their technology needs are to be more successful. Aspire has given laptops to students that have internet access but there are students that don't have access to the internet, which needs to be resolved going forward. Parents will also be able to address their concerns and ask questions about sending their to school for in-person instruction and therapy.
2. Discussions with school districts will be on-going as we work together on shaping the plan especially in the areas of transportation and technology needs for families.

3. Therapists, teachers and classroom employees will be involved in planning as we develop groupings that work well together and modify therapy areas and classroom environments to meet CDC requirements. (See Instructional Practices Section).

HYBRID SCHEDULE

<i>Time</i>	<i>Monday</i>	<i>Tuesday</i>	<i>Wednesday</i>	<i>Thursday</i>	<i>Friday</i>
School day is: 8:30 AM – 2:30 PM	A Group 6 students In-person B Group Remote learning/ tele-therapy	A Group 6 students In-person B Group Remote learning/ tele-therapy	Material preparation Remote learning/ tele-therapy Cleaning and disinfecting of classrooms and therapy areas;	B Group 6 students In-person A Group Remote learning/ tele-therapy	B Group 6 students In-person A Group Remote learning/ tele-therapy

Approved ratios in preschool and school age classrooms are 12:1:4. Therefore there will be approximately 6 students (or less based on enrollment) in each classroom.

Preschool classrooms located in local childcare facilities may follow a hybrid model if capacity does not allow for full-time programming.

NYSED approved programs:

Program	Location	Number of Classrooms	Approved Ratio
School Age Special Class	Aspire Center for Learning 4635 Union Road Cheektowaga, NY 14225	10	12:1:4
Preschool Special Class	Aspire’s Children Discovery Corner 4635 Union Road Cheektowaga, NY 14225	1	12:1:4
Preschool Special Class in an Integrated Setting	Aspire’s Children Discovery Corner 4635 Union Road Cheektowaga, NY 14225	2	12:1:4
Preschool Special Class in an Integrated Setting	East Aurora Community Nursery 606 Girard Avenue East Aurora, NY 14052	1	12:1:4

Preschool Special Class in an Integrated Setting	Edu-Kids, Inc. 1767 Como Park Blvd. Depew, NY 14086	1	12:1:4
Preschool Special Class in an Integrated Setting	Jewish Community Center 787 Delaware Ave. Buffalo, NY 14209	1	12:1:4
Preschool Special Class in an Integrated Setting	Jewish Community Center 2640 N. Forest Rd. Getzville, NY 14068	1	12:1:4
Preschool Special Class in an Integrated Setting	Lakeview Children's World 2095 Lakeview Road Lakeview, NY 14085	1	12:1:4
Preschool Special Class in an Integrated Setting	Watch Me Grow 2550 Union Road Cheektowaga, NY 14227	1	12:1:4

The square footage of the school building is 72,000 square feet which provides space to spread out. The overall number of employees in the building may remain the same but employees will be deployed to other areas in the building to support the learning process while practicing social distancing. Assignments will be determined by the number of classroom employees that are needed in the classroom to support students.

School Hours: Aspire's normal school hours will continue to be from 8:30 AM to 2:30 PM, but students' arrival and dismissal times may be affected by how individual school districts set up transportation. It may be necessary for districts to have buses provide multiple runs each day in order to adhere to safety requirements while transporting students to a number of agency providers. Aspire will work to maintain a flexible schedule for educational instruction and therapy services to best meet the needs of students.

ALTERNATE PLANS

Possible School Closure: Aspire will be prepared to move from the hybrid model to providing all remote learning and tele-therapy in the event that incidents of COVID-19 and high absenteeism force Aspire to close school or Executive Orders dictate the regional closing of schools because of COVID-19 spikes. Aspire will close school if 2% of the overall population of students and employees attending or working in school test positive for COVID-19 over a 7 day average. The total population may vary depending on parents' choice to send their children back to school. Enrollment will be carefully monitored through attendance documents. Employees that call off will be required to provide the screening questionnaire by a follow up phone call. The Local Health Department will be immediately notified for further guidance.

In the event of a school closure, initial notification will be made through Aspire's automated phone system. Further information will be provided through e-mail and US mail for those that do not have e-mail access.

The reopening plan after a school closure will be amended for the return to in-person

instruction when allowed and in accordance with governing agencies such as the Local Department of Health, NYSDOH, and NYSED.

COMMUNICATION

The COVID-19 pandemic has created intense stress and trauma for all school stakeholders. Stakeholders include, but are not limited to, parents, guardians, students, school districts, counties, agency administrators and employees. Reopening plans will only be successful if trust and credibility is maintained through frequent and transparent two-way communications. Research on communication shows that people are less able to comprehend information when under stress so it is important that communication be clear and consistent. It is also important to use different modes of communication that may work better for a variety of people. The overall goal is to provide reliable communication between stakeholders as we all safely transition back to school.

1. Communication Plan

- a. Designated COVID-19 Point of Contact: The Vice President of Educational Services will be the designated contact responsible for responding to COVID-19 concerns. The name and contact information will be communicated to all stakeholders.
- b. Communication to stakeholders will be sent out via automated phone system, text messaging, e-mail, US mail, social media accounts, websites, telephone and in-person.
- c. Prior to reopening school, parent/guardian, employees, school districts and counties will be provided with information on the scope of the reopening plan and what measures will be taken to ensure safety. Input will be requested to enhance the quality of the plan.
- d. Additional information will be provided to parents about the possibility of future school closings and the return to remote learning and tele-therapy only and how that will be communicated.
- e. Communication to stakeholders will be provided in the language(s) spoken at home among families and throughout the school community. Written plans must be accessible to those with visual and/or hearing impairments.
- f. Opportunities will be provided to stakeholders to share feedback, concerns and questions through surveys, virtual meetings, e-mail and telephone calls once plan is implemented.
- g. Sharing Information
 - i. Posting signage in highly visible locations (e.g., school entrances, restrooms, hallways, and employee breakrooms) that communicates rules and protocols that stop the spread of infectious

- germs and bacteria (e.g., frequent hand washing, wearing masks and social distancing).
- ii. Broadcast regular [announcements](#) on the PA system during the school day on how to reduce the spread of COVID-19.
 - iii. Provide education and resources to parents and employees that can assist them during the COVID-19 crisis, using such platforms as the school website, emails, and school [social media accounts](#).
- h. All students, employees, and visitors will be constantly reminded through verbal and written communication (signage) to adhere to NYSDOH and CDC guidance regarding the use of PPE, specifically acceptable face coverings, when in the school building. Masks will be required throughout the day in addition to the practice of social distancing.
- i. Notify Health Officials and Close Contacts
- i. In accordance with state and local laws and regulations, school administrators will notify the [Local](#) Health Department immediately of any case of positive COVID-19 while maintaining confidentiality in accordance with the [Americans with Disabilities Act \(ADA\)](#).
 - ii. Any guidance provided by the Local Health Department will immediately be followed by the Agency.
 - iii. Agency Contact Tracing personnel will be immediately notified. The school personnel will comply and assist with Contact Tracing procedures which includes notification of the Local Health Department. (See: Contact Tracing Documents).
 - iv. While maintaining confidentiality in accordance with HIPAA and FERPA, parents/guardians and employees will be notified immediately regarding any confirmed positive case of COVID-19 in the school. They will be provided with information pertaining to the containment of the affected areas and what safety protocols will be utilized.
 - v. Aspire will maintain a list of community resources for employees and families as to who is responsible for referring, sourcing, and administering COVID-19 testing.
- j. Students will be trained on how to follow the COVID-19 protocols safely and correctly, including but not limited to hand hygiene, the proper wearing of face coverings, social distancing, and respiratory hygiene (See Training).

2. Sick Leave and Excused Absence Policies

- a. All changes will be communicated to employees about sick leave practices due to COVID-19 and other infectious diseases that enable employee to stay home when they are sick or have been exposed to COVID-19.

- b. Employees will be encouraged to contact the Human Resource Department for any questions or concerns they may have.

BUILDING/FACILITY OPERATIONS

1. Outside visitors have limited access to the building unless there are extenuating circumstances that requires prior approval of the VP of Educational Services. This includes parents, vendors, agency visitors, school districts and/or others. (See CFL Entering and Exiting the Building P & P.)
2. Aspire will maintain compliance with Fire Code regulations and inspections.
3. Emergency safety procedures have been modified to support social distancing practices. This will involve amendment of emergency evacuation procedures that include changes to the primary and secondary evacuation exits and gathering locations once outside. This will include:
 - a. Changing primary evacuation routes to classroom external exit doors and secondary routes being changed to hallway evacuation.
 - b. Changing the gathering location to 3 separate locations on school grounds. These include:
 - i. Preschool/day care gathering at the location near the front parking lot.
 - ii. Young school age students gathering at the bleachers.
 - iii. Older school age students gathering at the furthest point on the other side of the circle by the flag pole.
 - iv. All areas will be marked so that they are easy to find and will accommodate wheelchair access.
 - v. Walkie talkies will be used to ensure that everyone has been accounted for and has access to additional directions.
 - c. Notification will be made to U-Crest Fire Department in regards to changes to evacuation locations.
4. The use of physical barriers will be in accordance with regulation and will not impede building traffic or the ability to safely exit the building. They will also be in compliance with Fire Code regulations. Barriers may include dividers between therapy treatment areas and Plexiglas (polycarbonate) sneeze guards affixed to desks and tables.
5. Ventilation system will be assessed and monitored monthly or per regulated inspections by the maintenance department personnel and/or vendor to ensure that it is operating properly, is allowing increased circulation of outdoor air into

the building and the air is being appropriately filtered. All inspections will be documented.

6. Drinking Water Facilities

- a. Drinking fountains, with the exception of the bottle filling stations, will be placed out of order.
- b. Water stations that meet regulation will replace current drinking fountains in accordance with the requirement of one per every 100 occupants.
- c. Students and employees can use provided paper cups or bring in their own bottles to be refilled.

7. Student Lunches: Preschool and school age students bring lunches from home to school each day. Many students that attend Aspire of WNY have feeding and swallowing issues, dietary problems and severe food allergies that make a building wide food program difficult to implement. While school age students normally have the opportunity to eat lunch in the cafetorium, lunches will now be eaten in classrooms. Preschool students will continue to eat lunch in their classrooms. Lunches will be stored in refrigerators located in each wing throughout the building.

8. Aspire of WNY's school building has remained open and operational for essential employees and services that include day care and in-person therapy for the summer.

9. Extra-curricular activities are not part of the school program and the school does not provide before and aftercare.

10. As a private school, transportation is provided by school districts or counties.

11. The Vice President of Educational Services (COVID designee) will review NYDOH, CDC and NYSED guidance to ensure compliance with local, state and federal guidelines on a weekly basis.

HEALTH AND SAFETY

Containing the Spread of COVID-19

1. Health Checks: Parents/guardians will be educated through written communication on the importance of staying home when experiencing illness. Prior to the beginning of the school year, parents will receive information through a memo on how to determine if their children should stay home from school.

They will also receive information on Agency policy on health checks, and what will be expected if their child becomes ill in school. Employees will receive in-person training before the new school year starts.

- a. Parents/guardians and employees will be educated on the careful observation of symptoms of COVID-19. These include:
 - i. Fever 100 degrees or greater
 - ii. Cough
 - iii. Shortness of breath or difficulty breathing
 - iv. New loss of taste or smell
 - v. Fatigue
 - vi. Muscle or body aches
 - vii. Headache
 - viii. Sore throat
 - ix. Congestion or runny nose
 - x. Nausea or vomiting
 - xi. Diarrhea
- b. Parents/guardians and employees will be required to complete a screening questionnaire each morning prior to students and employees arriving at school. The questionnaire will determine whether the student (parent) or employee has:
 - i. Experienced any symptoms of COVID-19, including a temperature of 100 degrees or greater in the past 14 days;
 - ii. 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 has had symptoms of COVID-19;
 - iii. Tested positive for COVID-19 in the past 14 days;
 - iv. 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.
- c. Temperatures of employees and students will be taken upon arrival at school by trained screening personnel which will include school nurses. Process for screening will include.
 - i. Waiting behind social distancing markers
 - ii. Employees supervising students while awaiting turn
 - iii. Screeners standing behind see through barriers or using face shields.
 - iv. Use of face masks
 - v. Use of single pair of gloves during screening
 - vi. Use of touchless thermometer
 - vii. Cleaning of thermometer in between each use with an alcohol wipe
- d. Anyone that has a temperature of 100 degrees or greater or answers yes to any of the above questions will not be allowed to enter the building and

will be advised to contact their health care provider and/or COVID testing prior to returning to building (Unless symptoms are from a known medical condition).

- e. Records will be maintained that confirm individuals (employees, students, visitors) have been screened and the results of screening (yes/no). Schools are prohibited from keeping actual health data.
 - f. Weekly reminders will be sent through automatic messaging to parents and employees about screening requirements.
2. Students and Employees becoming ill with Symptoms of COVID-19: In accordance with Education Law, students or staff that show symptoms of any communicable or infectious disease, including COVID-19, must be excluded from the school and sent home immediately.
- a. Students who show signs of illness will be sent to the nursing clinic so that one of the school nurses can assess the student in one of two isolation rooms that are clearly labeled. A classroom employee will supervise the student while in the nursing clinic. In addition to masks, nurses and employees will be given additional PPE such as gowns, face shields and gloves. Each room contains a comfortable exam table covered in vinyl and a sink with soap for hand washing. The restroom is next door to the two rooms. There is a third room that will be used for any other student related medical issues such as student injury or medical procedure that may need to be done. Nurses typically bring medication directly to students in their classrooms. Once the nurse has determined that the student must go home, the parent will be called to pick up the student. **Parents will be required to immediately pick up their child from school when ill.** Student will remain in the isolation room under the supervision of the classroom employee until parent comes to pick up their child. Parent will be instructed to call their health care provider or go to urgent care.
 - b. Employees will be sent home and instructed to call their health care provider or go to urgent care.
 - c. Students and employees that have not been diagnosed with COVID-19 by a health care provider can return to school:
 - i. Once there is no fever, without the use of fever reducing medicine and they feel well for 24 hours.
 - ii. If they have been diagnosed with another condition and has a health care provider written note stating they are clear to return to school.
 - d. If a student or employee has been diagnosed with COVID-19 by a health care provider based on a test or their symptoms or does not get a COVID-19 test but has had symptoms, they should not be at school and should stay home until:

- i. It has been at least ten days since the individual first had symptoms;
 - ii. It has been at least three days since the individual has had a fever without using fever reducing medicine; and
 - iii. It has been at least three days since the individual's symptoms improved, including cough and shortness of breath.
3. Students and Employees that have been exposed to COVID-19 virus are required to be quarantined for 14 days and must be symptom free before returning to in-person services or work. Student will be provided remote learning during quarantine. Employees will be able to provide remote services when possible.
4. Healthy Hygiene Practices will be taught and retaught in school to students and employees to ensure compliance (See Training Section).
 - a. Signage will be posted to remind students and employees to:
 - i. Stay home when ill
 - ii. Cover nose and mouth with acceptable face covering throughout the school day
 - iii. Practice social distancing
 - iv. Report symptoms of or exposure to COVID-19
 - v. Follow hand hygiene practices
 - vi. Follow respiratory hygiene and cough etiquette
 - vii. Follow cleaning and disinfecting guidelines
 - b. Signage will be posted in highly visible locations throughout the building.
5. Hand Hygiene: Students and Employees must practice good hand hygiene to help reduce the spread of COVID-19. Hand hygiene includes:
 - a. Traditional hand washing with soap and water. This is considered the most effective method. There must be:
 - i. Hand washing stations throughout the building. These can be found in classrooms and therapy areas that have sinks and in classroom and hallway restrooms.
 - ii. Posted directions for how to appropriately wash hands at every sink.
 - iii. Signage providing direction on when to wash hands such as upon entering the building, after using shared objects or surfaces, before and after eating, after using the restroom, after sneezing or coughing into hand, blowing nose, anytime hands are soiled, and before and after donning/doffing (taking on/off) PPE.
 - b. Alcohol based hand sanitizers (70% alcohol content) will be used when soap and water is not available. Hand sanitizer will be located throughout

the building in wall mounted dispensers. Directions will be posted for appropriate use.

6. Respiratory Hygiene: Students and employees will be trained on good respiratory hygiene when sneezing or coughing. Practice must include:
 - a. Using a tissue to cover mouth and nose when sneezing or coughing. If tissue is not available, sneezing or coughing into the inside of elbow.
 - b. A no touch-foot pedal trash can will be located in each room to dispose of used tissues.
 - c. Hand washing after sneezing and coughing episodes.

7. Social Distancing involves the creation of at least six feet of space between one person and another. Students and employees will be trained on the practice of social distancing throughout the school day. The practice will include:
 - a. Creating student groupings/cohorts that are as static as possible. When using a hybrid model that involves dividing classroom enrollment into an A group and B group, those groupings would stay the same for the duration of the hybrid approach.
 - b. Creating additional entrances for students and employees to enter and dismiss from the building.
 - i. Main entrance will be used for education employees, day care children and students being dropped off/picked up by parents.
 - ii. Entrance at the end of the day care wing will be used for preschool students.
 - iii. Side entrance will be used for therapists, nurses and for school age students in rooms 118 through 125.
 - iv. Entrance by the circle will be used for school age students in rooms 129 through 134.
 - c. Controlling the traffic pattern in the building by dividing each hallway in half with vinyl tape and safety cones. Directional arrows will be affixed to the floor surface. Social distancing signage and tape will be used to mark hallway floor into six foot sections.
 - d. Reducing in-school movement by having students participate in gym, art class (art on a cart) and eat lunch in the classroom.
 - e. Providing physical and occupational therapy in therapy rooms that are partitioned between treatment areas (side walls only). Speech therapy is provided in individual treatment rooms.
 - f. Turning desks in direction of instruction and using Plexiglas (polycarbonate) sneeze guards to minimize exposure and teach boundaries.
 - g. Placing student equipment, desks and tables six feet apart from one another.

- h. Using additional vinyl tape and signage on classroom floors to assist with concept of social distancing.
 - i. Keeping personal belongings separate in student lockers that are grouped by classrooms where access is controlled.
 - j. Providing student specific supplies to minimize sharing of materials.
 - k. Creating a “one at a time” in restroom rule. Review rule often.
 - l. Creating a schedule for each group to use the playground.
 - m. Providing an area for employee lunches and breaks that enforces social distancing.
 - n. Closing communal spaces unless staggered use can ensure social distancing and proper cleaning.
8. Social Distancing Challenges: All attempts will be made to maintain social distancing, however, given that the core function of our school is to provide special education services, it will present challenges. Our students’ educational, behavioral, personal care, nursing and therapy needs will most likely require varying degrees of physical intervention. These challenges include, but are not limited to:
- a. Behavioral Intervention.
 - b. Therapeutic feeding.
 - c. Hands on physical, occupational, and speech therapy.
 - d. Hands on instruction.
 - e. Personal care such as toileting, changing/assisting with clothing, assisting with hand washing.
 - f. Putting on adapted equipment such as AFOs, body jackets and hand splints that help maintain health and wellness.
 - g. Utilizing adapted equipment such as adapted seating, wheelchairs, walkers, prone and supine lyers that support the students’ health and mobility.
 - h. Nursing procedures.
9. Medically Vulnerable/High-Risk Groups: Students and employees that fall in this group may need special attention or modification to how they receive or provide services.
- a. Students that have severe disabilities and high medical needs may need to receive services differently than other students without such challenges. Communication between the parent and education/therapy team is essential when deciding how to best provide education and therapy services. The development of a plan will occur before the start of the school year. It will include parent supports in addition to possible modification of the classroom environment, modification to service delivery model, additional PPE, and/or additional staffing. Some parents may not

be ready to send their child back to school in the Fall and may request in-person therapy and remote learning educational services. This was a successful model that was offered over the summer to parents whose school districts requested such services.

- b. Employees that are in a high risk group need to work with Aspire's Chief Human Resource Officer and the Vice President of Educational Services to develop a plan for reasonable accommodations.

10. Specific Nursing Procedures

- a. Aerosol Generating Procedures: Respiratory treatments administered by nurses generally result in aerosolization of respiratory secretions. These aerosol generating procedures (AGPs) potentially put healthcare personnel and others at an increased risk for pathogen exposure and infection. The CDC recommends PPE use when administering AGPs. PPE consists of:
 - i. Gloves;
 - ii. KN95 or surgical mask;
 - iii. Face shield or goggles to protect the eyes; and
 - iv. Gown if necessary
- b. PPE should also be worn:
 - i. Suctioning;
 - ii. Administering nebulizer treatments; or
 - iii. Using peak flow meters with students who have respiratory conditions.
- c. Nebulizer Treatments
 - i. Treatments should be conducted in a room separate from others
 - ii. Cleaning of the room should occur between uses and cleaning of the equipment should be done following manufacturer's instructions after each use.

11. Personal Protective Equipment (PPE): Employees and students will have access to the necessary PPE. Training on the use of PPE will occur to ensure that it is used appropriately and fits properly. (See: Training Section) PPE includes:

- a. Face coverings include cloth (homemade or purchased), surgical or KN95. Face covering/masks are required to be worn throughout the day unless eating during a break or lunch. Mask breaks are also appropriate as long as they are away from others in an unoccupied room. Students that have developmental disabilities, medical or mental health issues may have difficulty wearing a face covering/mask and understanding the concept surrounding them. Every attempt will be made to encourage all students to wear face coverings/masks and education on use will be ongoing. Face coverings/masks will not be placed on:

- i. Children younger than 2 years old.
 - ii. Anyone who has trouble breathing or unconscious.
 - iii. Anyone who is incapacitated or otherwise unable to remove the face covering without assistance.
- b. Face Shields are used to protect eyes and face from splashes of body fluids. These could be used when a student has mucus secretions due to his or her disability and the employee needs to have close physical contact such as for therapeutic feeding, putting on equipment, providing medical procedures, etc. Face shields are not a substitute for face coverings and must be worn with a mask.
- c. Gloves are to be worn when there is a chance of coming in contact with bodily fluids. Also, during food preparation, nursing procedures, therapeutic feeding and during personal care activities which include changing diapers.
- d. Gowns are worn to protect against splashes or sprays of bodily fluid on clothing.
- e. Arm guards are worn during behavioral incidents to protect arms from bites, gouges, scratches and pinches that may otherwise break the skin.
- f. A chart has been established that list the maximum number of PPE needed and the minimum number that would trigger reordering from Aspire's stock of supplies available to agency divisions.

12. Cleaning and Disinfecting: CDC recommendations for cleaning and disinfecting will be adhered to throughout the school day and in the event of COVID-19 exposure.

- a. Surfaces that are used daily and in between student use will be cleaned with soap and water or a cleaning product that is also a disinfectant approved by EPA. Areas being cleaned can be wiped dry or left slightly damp. Areas may or may not appear soiled but should be cleaned if student activity has been present.
- b. When using a disinfectant after cleaning, written directions on the container must be followed. Spray disinfected on surface area and let stand for the noted amount of time. Disinfecting product must be EPA approved against COVID-19.
- c. Frequently touched surfaces will be cleaned and disinfected frequently throughout the day such as door handles, cabinet handles, refrigerator door handles, computer keyboards, phones, toilets, faucets and sinks, table tops, light switches, counter tops, etc.
- d. Toys and materials that are used by a single student but is a shared item, will be put in a "dirty bin" for cleaning and disinfecting at a later time.
- e. Cleaning and disinfecting products should not be used near students.

- f. Cleaning and disinfecting should be done while wearing gloves and with good ventilation.
 - g. Cleaning and disinfecting products will be stored in closed cabinets and shelving that are not accessible to students.
 - h. The use of frequently used surfaces should be minimized by keeping some doors open if possible, light switches on automatic, utilizing foot pedal controlled garbage cans, etc.
 - i. Cleaning logs will be kept for each area and room of the building that include the following information:
 - i. Date;
 - ii. Time;
 - iii. Scope of cleaning and disinfection.
 - j. In the event of a confirmed exposure to COVID-19, the building area(s) involved will be closed. After a 24 hour period of time, a thorough cleaning and disinfecting will be completed in accordance with CDC and NYSDOH requirements. Once cleaning and disinfecting has occurred in accordance to CDC regulation, the area(s) will remain closed for another 48 hour period before being reopen. The Local Health Department will be notified for further guidance.**
13. The monitoring of health and safety will be monitored by the school leadership team. In addition, each classroom and therapy department will have a designated employee that will provide weekly feedback on what is working or not working in those specific settings. Additional training and modifications will be implemented based on feedback.

TRAINING

1. Administrative Team
 - a. Provides training to employees prior to students starting school.
 - b. Determines training model for employees.
 - i. Employees will be trained in the classroom, therapy or office areas they are assigned.
 - ii. Instructors will train one subject area and will move to the next classroom or building area as scheduled.
 - iii. Any training that requires contact within an area of less than 6 feet will require additional Personal Protective Equipment (PPE).
 - c. Determines training model for student with employee input.
 - d. Determines content areas to be trained for employees and student.
 - e. Determines criteria based on Executive Orders, NYSDOH, NYSED, CDC, OCFS and County Emergency Management guidance and Agency policies and procedures.

- f. Revises Code of Conduct based on conditions for reopening.
2. Employees: Will be trained and attest to receiving training on the following protocols, policies and procedures:
- a. Health Screening Process
 - b. Entering and Exiting Procedures
 - c. Employee and Student Illness
 - d. Positive COVID-19 Process
 - e. Contact Tracing
 - f. Hand Washing
 - g. Use of Hand Sanitizer
 - h. Use of Gloves
 - i. Mask Usage and Replacement Protocol
 - j. Use of Personal Protective Equipment in all Situations
 - k. Cough and Sneeze Etiquette
 - l. Cleaning and Disinfecting/Logs
 - m. Cleaning and Disinfecting by Housekeeping and Logs
 - n. Individual Student Supplies, Materials and Equipment
 - o. Social Distancing
 - p. Emergency Evacuation
 - q. Lockdown/Lockout/Shelter in Place
 - r. Standard Precautions
3. Employees will be educated to observe students or other employees for signs of any type of illness such as:
- a. Flushed cheeks;
 - b. Rapid or difficulty breathing (without physical activity);
 - c. Fatigue, and/or irritability; and
 - d. Frequent use of the bathroom.
4. Employees will be educated on the symptoms of Multisystem Inflammatory Syndrome in Children (MIS-C) associated with COVID-19.
- a. Notification of the parent/guardian will be made with recommendation to see a healthcare provider if a student shows any of the following symptoms:
 - i. Fever
 - ii. Abdominal pain
 - iii. Vomiting
 - iv. Diarrhea
 - v. Neck pain
 - vi. Rash
 - vii. Bloodshot eyes

- viii. Feeling extra tired
 - b. Call for emergency transport will be made when a student shows any of these emergency warning signs of MIS-C or other concerning signs:
 - i. Trouble breathing
 - ii. Pain or pressure in the chest that does not go away
 - iii. New confusion
 - iv. Inability to wake or stay awake
 - v. Bluish lips or face
 - vi. Severe abdominal pain
5. Students will be trained to the best of their ability on the following protocols, policies and procedures in an effort to provide them with an understanding about the pandemic and how they can help protect themselves. Protocols, policies and procedures will be modified and trained in a manner that is understandable for each student, including the use of social stories. Training will take place in classrooms.
- a. Health Screening for Building Entry
 - b. Student Illness
 - c. Hand Washing
 - d. Use of Hand Sanitizer
 - e. Mask Usage
 - f. Cough and Sneeze Etiquette
 - g. Individual Student Supplies, Materials and Equipment
 - h. Social Distancing
 - i. Emergency Evacuation
 - j. Lockdown/Lockout/Shelter in Place
 - k. Code of Conduct

TECHNOLOGY AND CONNECTIVITY

The need for technology supports and solutions have never been more apparent. The Education team will put multiple resources in place to support technology usage in the home and classroom. It is imperative to work toward closing the digital divide by providing computing devices to students if needed. Students and families will be supported with direct communications, as well as pre-recorded video resources to ensure student engagement and academic achievement. Resources defined here will be flexible based on parent/guardian and student need.

1. Access to Technology: To help close the digital divide, students and staff will be provided multiple layers of technological support as resources allow.

2. Families will be surveyed concerning access to devices and internet connectivity. If it is determined that the student is in need of a dedicated device or connectivity for virtual learning:
 1. The contact information will be sent to the education supervisor with an indication of what the family needs.
 - a. If and when a laptop becomes readily available for student use, a member of the education team will initiate contact with the family to arrange pick up or delivery
 - b. For families in need of internet connectivity within their residence, a member of the education team will make contact with the family and link them to local services within the area. Aspire of WNY will work collaboratively with local providers, and/or with the student's home school district to support student needs.
 - c. Laptops will be given to families as resources are available. If the demand outweighs the supply of technology available, the education team members can reach out to the student's home school districts to seek further support.
 - d. When the student is no longer enrolled in the program, or no longer in need of the device provided, the laptop may be collected, disinfected, and reset for another student to use.
 2. In the event that parents/guardians decline the use of technological equipment, teachers, therapists and other education team members would create low-tech or no-tech solutions for delivering course instruction and curricular materials such as mailed packets, until further technological needs can be met as resources allow.
 3. Technology solutions are available in the classrooms and include but are not limited to:
 - a. Interactive white boards
 - b. Laptops
 - c. Desktops
 - d. iPads
 4. Education staff members guide and facilitate technology usage within each classroom.
 5. As appropriate, staff will utilize available technology within the classroom to allow students receiving in-person instruction the able to communicate with their peers that are participating in activities remotely from their homes.

ATTENDANCE AND CHRONIC ABSENTEEISM

Student participation and attendance will be tracked regardless of the education setting. The move to a virtual/remote learning environment, or, a hybrid model requires a multi-faceted approach to successfully monitor attendance and student engagement. In the event of a move to a virtual/remote learning environment, or, a hybrid model, students and their families will be supported with access to virtual instructional content at any time. Attendance, engagement, and communication will be tracked and reported to School Districts and Counties as applicable to each program. The data collected will also ensure that students are provided with ample opportunity to continue to make progress toward their academic, therapeutic and clinical goals. All attendance entries can be provided to School Districts and Counties on a monthly basis as applicable to the program. 180 days of instruction each school year must be provided to all students. Instructional days shall be counted for programs that are delivered in-person, remotely, or through a hybrid model.

1. Attendance Considerations and Flexibility:
 - a. Virtual/remote attendance and participation options will eliminate the typical constraints of the school day to better accommodate the needs of families.
 - b. Opportunities for student engagement will be accessible at any time through Google Classroom, other online learning tools, and printed materials mailed to the home where applicable. This allows flexibility for parents and students to complete their work as their schedules allow.

2. Attendance Tracking:
 - a. Aspire of WNY will track and monitor student attendance and engagement in remote learning.
 - b. Therapists will enter session notes/attendance into preschool portal or Frontline for school age students.

3. Distance/Remote Learning Details:
 - a. Type of correspondence
 - b. Time and duration of interaction
 - c. Narrative details regarding the goals being addressed
 - d. Student progress details

4. Chronic Absenteeism: In the event of virtual/remote programming, and/or a hybrid model, the teacher or designated staff member will be responsible for contacting students on a daily basis via phone call, text message, email or other means of communication.

- a. If student is absent or does not engage in remote learning activities after 5 consecutive days and parent contact cannot be made, education supervisor is notified and attendance protocol is instituted.

SPECIAL EDUCATION

Aspire of WNY operates special education programs; as such, we will work with the local DOH and partner school districts to provide special education services to students enrolled in our programs. As outlined in this plan, it is critical that there be meaningful parental engagement to ensure the understanding of how our programs will be provided to their child. Collaboration and communication between each school district's Committee on Preschool Special Education/Committee on Special Education (CPSE/CSE) and Aspire of WNY will be critical in the year ahead to ensure the needs of each student are being met and that free appropriate public education (FAPE) is met.

SOCIAL AND EMOTIONAL WELLBEING

As school personnel adapt to environments that result in substantially less time spent interacting in-person, ensuring intentional and meaningful inclusion of social emotional learning (SEL) across all aspects of operating strategies is critical to support the well-being and success of students, employees, and families. Along with physical health and well-being, schools must also prioritize social emotional well-being – not at the expense of academics, but in order to create the mental, social, and emotional space for academic learning to occur.

1. Comprehensive Developmental School Counseling Program and Plan
 - a. The counseling plan, developed under the direction of certified school counselor(s), will be reviewed, and updated to meet current needs.
 - b. The advisory council for the comprehensive developmental school counseling program will inform ongoing plans.
2. Professional Development and Supports for Students and Staff
 - a. The agency will refocus supports (Ex: SEL Classroom libraries, etc...) to address mental health, behavioral, and emotional support services.
 - b. Professional development opportunities for employees on how to talk with and support students during and after the ongoing COVID-19 public health emergency will be provided. Supports for developing coping and resilience skills for students and employees will be the focus.

- c. Supports for identifying resources and deepening coping and resilience skills for employees will be provided through an Employee Assistance Program with resources posted.
 - d. Each classroom will allocate time each school day in order to conduct SEL activities including, but not limited to Restorative Circles, Mindfulness Activities, Character Education lessons, etc...
 - e. Developmentally appropriate SEL curriculum will be utilized by teachers to meet the social emotional needs of students.
 - f. Students will be screened by SST members (Counselors) and referred to appropriate service agencies as needed.
3. Child Specific Treatment Teams
- a. Monthly Team Meetings will be conducted to review current progress, identify areas of need, share resource and develop action plans. Parents are a vital member of this team.
 - b. Student Study Team will meet weekly to assist classroom teachers in implementing action plans. The SST will assist teachers in making referrals, developing interventions and data tracking.
 - c. Student Behavior Support Plans and pro-active strategies will be reviewed with classroom teams and revised as needed by Behavior Specialist using reinforcement inventories.
4. Classroom Teams
- a. Maintaining Connections
 - i. Embedded routines, such as morning circles, lunch conversations, and daily walks, will be used to share interests and experiences, address fears, and build positive relationships.
 - ii. Create a schedule or build opportunities to allow children 1:1 time with employees.

TEACHING AND LEARNING

A combination of in-person, remote, and hybrid instructional models will be developed to support student learning, skill attainment, and goal achievement. Students will be provided with instruction through remote opportunities and in-person instruction by a qualified teacher or teaching assistant. Virtual Classrooms will be utilized for remote instruction. Students will be provided with daily teacher contact through activities, prerecorded lessons and/or live instruction which align to the NYS Next Generation Learning Standards and the student's individual IEP goals. Materials will be sent home for students to support and supplement virtual instruction. Additionally, instructional

activities will be differentiated based on student needs and interest. Students will have access to necessary accommodations, modifications, supplementary aids, and technology.

1. Cohort Groups

- a. Classroom cohorts will be created to limit potential exposure.
- b. Classroom will not intermingle with other cohorts.
- c. Teachers, assistants and aides will remain static in classrooms.
- d. Lunches will be served in classrooms.

2. Units of Study

- a. Teachers design and implement instruction following the NYS Learning Standards and individual student IEP goals. School age students take the New York State Alternative Assessment.

3. Community Based Training

- a. In classroom activities and virtual learning opportunities will be provided until further notice.

4. Grading/Assessment

- a. Formative assessments will be used to monitor student growth and progress.
- b. IEP goals will be used as the measure to monitor student growth and progress.
- c. Data collection will ideally occur during in person program.

5. Preschool Considerations. Preschool classrooms located at The Center for Learning must adhere to and implement mandated policies from OCFS, DOH and SED. When guidance/mandates conflict, the strictest mandate will be implemented.

- a. Items from home.
 - i. Students will be allowed to bring in blanket/sheet and one small comfort toy for rest period
 - ii. Staff belongings must be kept in cabinet or car.
 - iii. Student belongings will be stored in individual cubbies.
- b. Teachers will design and implement activities that limit physical contact.
- c. Teachers will conduct lessons/activities outside when appropriate.
- d. No group sensory activities (sensory table). Individual sensory activities are permitted.
- e. Physical barriers will be used with tables to create individual areas. No more than three students per table.
- f. In person instructional time will be maximized.

- i. Screen time will be limited during in-person instruction.
 - ii. Rest period will not begin prior to 12:45 and will end by 2:00
- g. All soft toys will be removed from play area. Toys used for instructional purposes may be used by single student then cleaned before use by another student.

6. Modified Layouts

- a. Space seating/desks at least 6 feet apart when feasible.
- b. Turn desks to face in the same direction (rather than facing each other), or have student sit at each end of a long table.
- c. If necessary, utilize other school spaces for instructional activities (e.g. cafeterium, library, life skills room, small conference room, computer room).
- d. Use outside spaces (Playground area/Courtyard) for instruction.
- e. Individual student belongings will be kept/stored separate from others.
 - a. Shared supplies/equipment will be limited to one group of students.
- f. Each student will have their own bags of materials that can travel with them to therapies and can be used for art.
- g. Visual aids (painters tape, stickers, posters, cones, etc.) to illustrate traffic flow and appropriate spacing to support social distancing will be added to classrooms, hallways and therapy rooms.
- h. Ensure that a distance of twelve feet in all directions is maintained between individuals while participating in activities requiring projecting of the voice (singing) or aerobic activity.
- i. Special area teachers will go to the individual classrooms versus rotating all students through a shared space that is not able to be cleaned with each new use.

7. Instructional Practices

- a. Instructional activities will be differentiated using multiple strategies to meet individual needs.
- b. During in-person instruction, students will be able to use available devices to complete work while navigating remote learning platforms with teacher assistance. Teachers will be able to answer questions and assist students in real time.
- c. Classroom staff will model proper technology use in the classroom.

8. Health and Hygiene:

- a. Teachers and classroom staff will model good health practices.
- b. Face masks

- i. Masks will be provided for those students who wish to wear/will tolerate a mask as well as for students whose education team is beginning to address mask wearing as a goal.
 - ii. Students who will not wear masks/cannot tolerate wearing a mask for an extended period of time, will work with their education team to address mask wearing as a goal while at school.
 - iii. Students who will wear a mask will be provided regular mask breaks at individualized intervals decided upon by the educational team. During a 'mask break', staff facilitating MUST be wearing a mask, must initiate the break in a socially distant and safe environment and assist the student in removing his/her mask in a safe manner and replacing it once finished.
 - iv. If a student has a medical condition or diagnosis that prohibits them from wearing a mask, student will not be mandated to wear one.
- c. Handwashing
 - i. To ensure students follow the steps to thoroughly wash their hands throughout the day, individualized teaching procedures will be developed in collaboration with the clinical team.
 - ii. These procedures will be taught utilizing prompt fading specific to the student and may include video modeling, task analysis, visual charts, etc.
- d. Social Distancing:
 - i. Students will be taught why we social distance.
 - ii. Students will be shown when and how to social distance.
 - 1. Stay at least 6 feet apart from others whenever possible
 - 2. Not gather in groups
 - 3. Engage in non-contact methods of greetings that avoid handshakes
 - 4. Stagger breaks and meal times during the day
 - 5. Same cohort students will be placed with the same teacher each day
 - 6. Stagger the use of restrooms
 - 7. Students will eat in their classroom while maintaining social distancing.
 - 8. Playground use will be staggered and used by only one classroom at a time. Children and staff will wash their hands before and after using the playground and will maintain 6 feet social distancing whenever possible.

RELATED SERVICES AND SPECIAL AREA CLASSES

1. OCCUPATIONAL THERAPY

- a. Transitions
 - i. Each therapist will check hallway before leaving therapy room.
 - ii. If someone is in the hallway with or without a student, they will wait in their room until the other therapist/student is at least 6 ft away.
 - iii. If therapist/student is coming up the hallway and someone is going to enter the OT Clinic, the therapist/student outside of the wing, will wait until other therapist/student has exited the OT Clinic
 - iv. Student needs to use the bathroom prior to leaving the classroom.
 - v. Therapist/student entering will first go to the front sink to wash their hands and then go directly to the therapist's designated work area
- b. Cleaning/PPE:
 - i. Therapists will wear a mask at all times when interacting with student.
 - ii. Each student should have individually labeled bag of crayons/markers/scissors for their own use.
 - iii. After therapy session, therapist will spray table and chair with cleaning spray.
 - iv. Larger pieces of equipment (balls, bolsters, swings) must be sprayed down after each student's use.
 - v. Ball pool is to remain closed for student use, but other equipment in area may be used.
 - vi. Toys will be used for one student and then put into a dirty bin.
 - vii. If the toy needs to be used again during that day, Mary needs to be notified so she can clean the toy.
 - viii. Face shields and masks with plastic window will be washed down at the end of every day by the therapist and left in therapy room, on hooks, to dry during the night.
 1. Face shields and masks will be washed with Dawn dish soap and hot water.
 - ix. Each therapist to have PPE gown, hanging in individual work area, in case of behaviors.
 - x. Gloves can be worn during therapy session, but gloves are not to be worn while outside of the therapy room or in the hallway.
 - xi. Hand sanitizer will be available at all work areas.
- c. Individual Work Areas:
 - i. All rugs, foam mats and toys/items that cannot be wiped down need to be removed from OT clinic.

- ii. Dividers in office area between work stations.
- iii. All toys, materials and books need to be stored behind closed cabinets.
- iv. There should be no decorations in work areas.
- v. No food to be kept in equipment cabinets. Lunches must be kept in the fridge in the OT office until lunch time.
- vi. Lunch time, if you are eating in the office, you need to clean the desk area prior to eating and after. If you are eating with co-workers, social distancing must be maintained as you will not be wearing masks.
- d. Electronics: (no bleach solutions to be used)
 - i. iPads must be stored in the OT supervisor's cabinet every night. Before the iPad is placed in the cabinet, it must be sprayed and wiped down with glass cleaner.
 - ii. Lap tops, must be wiped down with glass cleaner prior to leaving at the end of the day
- e. Sensory Room: Available for specific child needs. Ball pit closed until further notice.

2. PHYSICAL THERAPY

- a. Use of Space in PT
 - i. Entrance into and exit out of the Department will occur through the main door.
 - ii. Except where noted, employees and outside providers e.g. orthotists, DME providers, etc. will wear masks; additional PPE will be worn per established guidelines. If tolerated, student will wear a mask through treatment sessions.
 - iii. All equipment used with student must be covered with material that can be wiped clean and disinfected. Equipment used with a student during sessions will not be used with another student until it has been cleaned / disinfected.
 - iv. By the end of the day on Thursdays, PTs will reserve designated treatments areas for the next week. Any space not used will be reserved for make-up sessions. Attendance will be checked each morning and the schedule will be adjusted accordingly. This process will be coordinated by the PT Clinic Aide.
 1. Clinic Room: Maximum of 2 individuals (PT and student.)
 2. Evaluation Room: Maximum of 2 individuals (PT and student.)
 3. Gross Motor Room: Maximum of 4 individuals (2 PTs and 2 students). The room will be divided in half by rolling walls. One PT /student pair will be on each side of the room. The

room will be entered through the door located on the designated treatment side. If a floor mat is used, it will be cleaned, disinfected, and hung back up at the end of the session. There will be no traffic through the room to/from the track.

4. Mat Table Room: 6 (3 PTs and 3 students) All mat table areas will be divided by rolling walls. Every other mat table will be available for use. One PT / student pair will work in one mat table area. The floor mat area will be available for an additional PT / student pair. 1 PT / 1 student pair may move to the floor mat or FES ergometer during the session. The floor mat will be dedicated to working on upright activities that do not require the student to lie or sit down on the mat surface. This space will be dedicated to working on upright activities that do not require the student to lie or sit down on the mat surface.
5. Fitness Room: Maximum of 4 individuals (2 PTs and 2 students.) Rolling walls will be used to divide the room in half lengthwise by rolling walls. One PT / student pair will be on each side of the room.
6. Track: Will be used by PT only when 6 foot social distancing can be maintained.
7. Office: No student will be allowed in this space. Hands will be thoroughly washed upon entering and prior to exiting. Masks may be removed if 6 foot distancing is observed; if not, masks will be worn. No social grouping will occur during time in the office. Except for work related matters, employees will not leave the area. Employees will clean and disinfect phones and desk top computers following each use. Hand sanitizer will be used following contact with multi-user surfaces e.g. refrigerator, drawer pulls, microwave, etc. Employees will keep individual work areas/equipment decluttered, clean, and disinfected.
8. Copy Room / Clinic Equipment Room: Only 1 employee may be in the room at a time. No student will be allowed in this space. Employees will clean/disinfect all contacted surfaces following use. Hand sanitizer will be used before and following contact with multi-user surfaces.
9. Bathroom: The bathroom door will be locked all times. The key to open the door will be kept on a hook attached to the door frame. Students using the bathroom will be accompanied by classroom or therapy employees; the

student may use the bathroom in privacy but afterward, employees will check the room. Employees will clean and disinfect any soiled surfaces. All toilet surfaces are soiled regardless of how they look. The toilet seat needs to be cleaned and disinfected following each use.

10. Storage Room (Track): Only 1 employee may be in the room at a time. No student will be allowed in this space. Equipment removed from the room for use with student will be cleaned and disinfected prior to use with the student. When returning equipment to the room, the equipment will be cleaned and disinfected.

11. Storage Room (Maintenance): Only 1 employee may be in the room at a time. No student will be allowed in this space. Equipment removed from the room for use with student will be cleaned and disinfected prior to use with the student. When returning equipment to the room, the equipment will be cleaned and disinfected.

- v. Whenever an additional individual enters a treatment area for required assistance, the individual will thoroughly wash hands before and after providing assistance. If there is an urgent situation that does not allow the time to wash hands before entering the area, hand sanitizer should be used.

b. Transition of Child to PT from Another Area

- i. PT / PT Clinic Aide will wear a mask on the way to get student, while transporting student to PT, and during the treatment sessions.
- ii. 6 foot distancing will be observed during all transitions within and outside of the PT Department.
- iii. Child requiring mechanical lift slings / vests for transfers will be transported to PT with their individually assigned transfer equipment.
- iv. Upon entering the designated treatment room, all individuals working with the student will thoroughly wash hands and apply additional PPE as appropriate.
- v. If tolerated, ambulatory student will wash hands with the PT. Rolling walls will be used to define space so that student do not wander away from the area.
- vi. For student requiring an assisted or dependent transfer, the PT will complete the transfer per established guidelines.
- vii. If assistance is needed for transfers, the PT Clinic Aide, will thoroughly wash hands and don required PPE prior to initiating assistance.

- viii. Student will be transferred to the designated treatment surface for the PT session.
 - ix. Following the session, the student will be transferred back to transport equipment per established guidelines.
 - x. Following PT sessions, the PT will remove PPE (except for mask) and wash hands thoroughly.
 - xi. All manipulatives used during the PT session will be placed in the soiled bins.
 - xii. All contacted surfaces (including mechanical lifts) should be cleaned/disinfected per established guidelines.
 - xiii. When it is not possible for the PT to complete the cleaning/disinfecting process, the PT shall place a sign on the equipment indicating that it should not be used; the PT should then inform the PT Clinic Aide that this needs to be done.
 - xiv. The PT Clinic Aide will clean and disinfect manipulatives in the soiled bins throughout the day.
- c. Transition of Student from PT to Another Area
- i. PT / PT Clinic Aide will wear a mask while transporting student from PT to another area.
 - ii. 6 foot distancing will be observed during all transitions within and outside of the PT Department.
 - iii. Students requiring mechanical lift slings / vests for transfers will be transported back with their individually assigned transfer equipment.
 - iv. Upon entering the designated area, the PT / PT Clinic Aide will hand student over to the receiving employee in that area per established guidelines.
 - v. On the way to the next student pick-up, the PT / PT Clinic Aide will apply sanitizer to hands.
 - vi. Equipment Use by Students in Classrooms
 - vii. To the maximum extent possible, students will be assigned equipment for their individual use; should equipment need to be shared, a maximum of 2 students will share the equipment. Equipment used will be covered with material that can be wiped clean and disinfected. The equipment will be cleaned and disinfected following use by each student.
 - viii. Students will be issued transfer slings for their individual use. The slings will be cleaned and disinfected by lightly spraying with a non-bleach disinfectant and hung to dry at the end of each day. Slings will be laundered once per week; should soiling occur, laundering will occur at that time while a backup sling is used.

- d. Airway Clearance System Use by Students: Airway clearance devices can aerosolize the COVID19 virus, spreading it much more widely. To reduce viral spread, this treatment will not be provided in school. Use of home airway clearance may be an option for some students; PT will assist parents to pursue this option where appropriate.

3. ADAPTED PHYSICAL EDUCATION

Initially, all APE will occur in classrooms. As COVID-19 measures relax, APE will occur outside of the classroom.

- a. During transitions to/from APE class, employees will wear masks; additional PPE will be worn per established guidelines. If tolerated, student will wear masks throughout transitions and APE classes.
- b. 6 foot distancing will be observed during all transitions within and outside APE classes; this distancing will be observed during classes to the maximum extent possible.
- c. All equipment used with students must be covered with material that can be wiped clean and disinfected.
- d. Any equipment used with a student during sessions will not be used with another student until it has been cleaned / disinfected; there will be no equipment exchange between student during APE classes e.g. balls
- e. Classes will be held in two separate areas (gym and back half of Track.) The Track will be divided with rolling walls. No more than 6 students will be in each area.
- f. Students will participate in activities between the two areas on an alternating week basis; the schedule will be shared with the classroom teacher so that student will be prepared in advanced.
- g. The APE teacher will assign students to employee; these assignments will be made at the start of the school year and shared with classroom teachers.
- h. Lessons will be planned for each APE area and shared with classroom teachers at the start of each unit.
- i. Assignments, lessons, and employee/student expectations will be reviewed by classroom teachers prior to leaving for APE class. Students should be encourage to drink water prior to APE class. Students / Employees will wash hands and use the bathroom prior to transitioning to APE class.
- j. The APE teacher will wash hands prior to the start of each class; hand sanitizer should be used by employees and students during APE classes.
- k. Classes will be conducted with the APE teacher moving between the two instruction areas. The two instruction areas will be set up so that employees can begin activities upon entering. The APE teacher will provide guidance/assistance as required.

- l. Upon completion of the lesson, prior to dismissal of the class, the APE teacher and employees will clean/disinfect all equipment used in preparation for the next class.
- m. When not conducting classes or tending to other assigned duties, the APE teacher will remain at the assigned work station in the Department Office using assigned desk top computer in the area. The storage room off of the gym will be used for equipment storage only. Entrance into and exit of out the Department will occur through the main door.

4. TRACK

- a. Track time will be reserved on the schedule posted in the hallway. When APE classes are conducted, only one half of the Track will be available for classroom use
- b. When only half of the Track is available, a maximum of 3 students with 1-2 employees may be in the Track area.
- c. When the full Track is available, a maximum of 6 students with 2-3 employees may be in the Track area.
- d. All established safety rules will be followed.
- e. Employee/student expectations will be reviewed by classroom teachers prior to leaving for the Track.
- f. Student / Employee will wash hands prior to transitioning to the Track.
- g. During transitions to/from the Track, employees will wear masks; additional PPE will be worn per established guidelines. If tolerated, student will wear masks throughout transitions and time in the Track area.
- h. 6 foot distancing will be observed during all transitions to the Track; this distancing will be observed during Track time to the maximum extent possible.
- i. Any equipment used by a student during time in the Track will not be used by another student until it has been cleaned / disinfected.
- j. Upon completion of scheduled time in the Track area, all equipment used will be cleaned, disinfected, and put back in designated areas. If necessary, one employee will remain behind to clean and disinfect equipment while another employee escorts the student back to the classroom.
- e. During the transition back to the classroom, employee and student will use hand sanitizer; hands will be washed upon return to the classroom.

5. SPEECH AND LANGUAGE THERAPY

- a. Transitions
 - i. Each therapist will check hallway before leaving therapy room.
 - ii. If someone is in the hallway with or without a student, they will wait in their room until the other therapist/student is at least 6 ft away.

- iii. If therapist/student is coming up the hallway and someone is going to enter the speech wing, the therapist/student outside of the wing, will wait until other therapist/student has exited the speech wing.
 - iv. Therapist/student will go directly to the therapist room, they will not stop at kitchen area for food or use speech bathroom.
 - v. Student needs to use the bathroom prior to leaving the classroom.
 - vi. Student needs to wash hands in the hallway sink prior to entering therapy room.
 - vii. Snack foods can be requested by the student to Laurie and she will bring to the therapy room.
 - viii. There is signage throughout the hallway to remind employee in regards to social distancing and wearing of masks.
- b. Cleaning/PPE:
- i. SLP's will wear face shields and face masks during therapy sessions, instead of having plexi-glass between them and the student.
 - ii. After therapy session, therapist will spray table and chair with cleaning spray.
 - iii. Laurie will wipe down desk and chair in front half and Sara will wipe down desk and chair in second half of wing.
 - iv. Toys will be used for one student and then put into a dirty bin.
 - ix. If the toy needs to be used again during that day, Laurie or Sara need to be notified so they can clean the toy.
 - v. Face shields and masks with plastic window will be washed down at the end of every day by the therapist and left in therapy room, on hooks, to dry during the night.
 - x. Face shields and masks will be washed with Dawn dish soap and hot water.
 - vi. Each therapist or department to have PPE gown, hanging in therapy room, in case of behaviors,
 - vii. Gloves can be worn during therapy session, but gloves are not to be worn while outside of the therapy room or in the hallway.
 - viii. Every therapy room has instructions on how to put on PPE and to remove PPE safely.
- c. Individual Speech Office:
- i. All rugs and foam mats need to be removed from therapy rooms.
 - ii. All toys, materials and books need to be stored behind closed cabinets.
 - iii. For first room, they may use a spring rod and shower curtain to cover bookshelf.
 - iv. Office decorations have been taken down, unless they are laminated, those will be wiped down at the end of the day.

- v. Drinks must be a closed up, with the mouth piece covered at all times. Must be kept out of the reach of the student.
- vi. No food to be kept in the office desks or cabinets. Lunches must be kept in the fridge until lunch time.
- d. Lunch time, if you are eating in your office, you need to clean the desk prior to eating and after. If you are eating with co-workers, social distancing must be maintained as you will not be wearing masks, so only one person in a room at a time.
- e. Electronics: (no bleach solutions to be used)
 - i. iPads must be store in the black cabinet every night. Before the iPad is placed in the black cabinet, it must be sprayed and wiped down with glass cleaner.
 - ii. Lap tops, must be wiped down with glass cleaner prior to leaving at the end of the day.
 - iii. Student owned devices need to be cleaned following below instructions:
 1. First Step: Put on protective gloves
 2. Second Step: Clean the device and accessories
 - a. Wipe down the device and accessories with disinfectant wipes (Lysol, Clorox). Follow the disinfectant product manufacturer's instructions for cleaning.
 - b. Take a Q-Tip with cleaner applied and clean inside all cracks and crevices. You may want to use a toothbrush or similar brush.
 - c. Blow the device off with an air hose or wipe it dry.
 - d. IMPORTANT! Make sure all soil is removed from the device and accessories. This is vital before proceeding to disinfecting the equipment,
 3. Third Step: Wipe the touchscreen
 - a. When the device and accessories are dry, wipe down the viewing area (device touchscreen, TouchGuide, keyguard, etc.) with glass cleaner, so the screen doesn't discolor.
 4. Allow the equipment to dry.

6. **SNACK SHACK:** Will be closed for the time that COVID 19 is still active.

7. **TEACHER OF THE VISUALLY IMPAIRED**

- a. Transitions:
 - i. Each Vision teacher will check hallway before leaving vision room.

- ii. If someone is in the hallway with or without a student, they will wait in their room until the other therapist/student is at least 6 ft away.
 - iii. Upon entering the Vision room, student and vision teacher will wash their hands.
 - iv. Cleaning/PPE:
 - v. TVI's will wear face shield during all therapy sessions.
 - vi. After Vision session, Vision teacher will spray table and chair with cleaning spray.
 - vii. Toys will be used for one student and then put into a dirty bin.
 - xi. If the toy needs to be used again during that day, then they need to be washed immediately and set out to dry before next use
- b. Face shields and masks with plastic window will be washed down at the end of every day by the Vision teacher and left in Vision room, on hooks, to dry during the night.
 - i. Face shields and masks will be washed with Dawn dish soap and hot water.
- b. Gloves can be worn during Vision session, but gloves are not to be worn while outside of the Vision room or in the hallway.
- c. Overall Vision Room:
 - i. All toys, materials and books need to be stored behind closed cabinets.
 - ii. Drinks must be a closed up, with the mouth piece covered at all times. Must be kept out of the reach of the child.
- d. Lunch time, if you are eating in your office, you need to clean the desk prior to eating and after. If you are eating with co-workers, social distancing must be maintained as you will not be wearing masks.
 - i. Masks must be worn in the Vision room if you cannot stay more than 6 feet away (especially when at desks).
- e. Student will have their own materials to use during groups to limit sharing of materials.
- f. Electronics: (no bleach solutions to be used)
 - i. iPads must be store in the black cabinet every night. Before the iPad is placed in the black cabinet, it must be sprayed and wiped down with glass cleaner.
 - ii. Lap tops, must be wiped down with glass cleaner prior to leaving at the end of the day.
 - iii. Student owned devices need to be cleaned following below instructions:
 1. First Step: Put on protective gloves
 2. Second Step: Clean the device and accessories
 - a. Wipe down the device and accessories with disinfectant wipes (Lysol, Clorox). Follow the

- disinfectant product manufacturer's instructions for cleaning.
 - b. Take a Q-Tip with cleaner applied and clean inside all cracks and crevices. You may want to use a toothbrush or similar brush.
 - c. Blow the device off with an air hose or wipe it dry.
 - d. IMPORTANT! Make sure all soil is removed from the device and accessories. This is vital before proceeding to disinfecting the equipment,
3. Third Step: Wipe the touchscreen
- a. When the device and accessories are dry, wipe down the viewing area (device touchscreen, TouchGuide, keyguard, etc.) with glass cleaner, so the screen doesn't discolor.
4. Allow the equipment to dry.
- g. Treatment Area:
- i. Dark room must be utilized throughout the day, especially if someone is in the room providing Vision already
 - ii. Desks will be utilized for ambulatory student
 - iii. Groups must maintain social distancing at all times – groups must remain a group of 2 at all times and those students cannot have group with another student (i.e.: Alyssa and Dominic are grouped together, they must remain in a group together for the entire school year).
 - iv. Student will have their own materials to limit sharing of materials.

SPECIALS

1. Music and Art

- a. Music and Art will be provided in classrooms.
 - i. Use of materials, supplies and equipment will not be shared.
 - ii. Discourage sharing of items that are difficult to clean and disinfect.
 - iii. Each student's belongings will be separated from others' and stored in individually labeled containers, cubbies, or areas.
 - iv. Additional supplies and materials will be secured to minimize sharing if possible (e.g., assigning each student their own art supplies, equipment). If supplies and materials need to be shared, each item will be cleaned and disinfected prior to another student using it or before the next group is scheduled to use it.

2. Playground/Common Areas

- a. Playgrounds should be cleaned per CDC guidance:
 - i. Normal routine cleaning;
 - ii. High touch surfaces made of plastic or metal, such as grab bars and railings should be cleaned routinely;
- b. Shared athletic/gym equipment (balls) should be cleaned between use per manufacturer's directions.

3. School Health Office –

- a. School health office cleaning must office after each use:
 - i. Cots;
 - ii. Bathroom;
 - iii. Health office equipment (blood pressure cuffs, stethoscopes, and scales) should be cleaned per manufacturer's directions.
- b. Disposable items should be used as much as possible, including:
 - i. Pillow protectors;
 - ii. Thermometers, or disposable thermometer sheaths or probes.

SCIS in Community Based Programs

Aspire of WNY has entered into partnerships with local childcare centers throughout WNY to provide integration opportunities to students with disabilities with typical peers. Program implementation (hybrid, remote or full in-person) will be impacted by each childcare's enrollment capacity due to group size limits.

Community Partner	Address	Phone Number
Edu-Kids	1767 Como Park Blvd. 14068	716-685-0937
Jewish Community Center- Buffalo	787 Delaware Ave. 14209	716-886-3145
Jewish Community Center- Getzville	2640 North Forest Rd. 14068	716-688-033
Lakeview Children's World	2095 Lakeview Rd. 14085	716-627-5360
Watch Me Grow	2550 Union Rd. 14227	716-656-8050

1. Preschool- Off-site
 - a. Community Day Care Partners must provide a copy of their re-opening Safety or Business Plan to Aspire.
 - b. Community Partners must sign attestation that they will implement DOH mandated practices and meet all OCFS regulations.
 - c. Aspire employee, including related service providers, will be provided PPE as needed.
 - d. Aspire employee will adhere to policies and procedures established by individual daycare/preschool site.
 - e. Aspire employee will participate in all trainings provided by Aspire and mandated by Community Day Care Partners.
 - f. Any questions or concerns related to policies or practices at off-site locations, will be directed to the preschool supervisor at Aspire of WNY.