



Elmcrest Early Education Center SPICE Program

# COVID-19 Re-opening Plan

ELMCREST EARLY EDUCATION CENTER  
960 SALT SPRINGS ROAD  
SYRACUSE, NY 13224  
(315)446-3220

MOST RECENT REVISION: AUGUST 27, 2020

## **COVID-19 Section 4410 School Re-opening Plan for Preschool Special Class in an Integrated Setting and Preschool Special Class**

**August 5, 2020**

### **Introduction**

The following school re-opening plan has been developed using; New York State Department of Health “Interim Guidance for In-Person Instruction at Pre-K To Grade 12 Schools During The COVID-19 Public Health Emergency,” “Reopening New York – Guidelines for In-Person Instruction at Pre-K to Grade 12 Schools,” New York State Education Department “Recovering, Rebuilding, and Renewing: The Spirit of New York’s Schools,” and “2020-21 School Reopening Plans – 853, 4201, and State-Operated Schools – Mandatory Assurances.”

This plan was developed by an Administrative Team of Elmcrest Early Childhood Services in consultation with Agency Departments, Teachers, Therapists, Parents, County Health Department and a CPSE Chairperson.

### **I. Communication /Family and Community Engagement**

1. A team of stakeholders and community members were consulted in the development of this plan including, Parents, School Administrators, Agency Administrators, Agency Finance, Agency Purchasing, Food Service, Onondaga County Health Department, CPSE Chair, Agency Quality and Assurance, Therapists, Teachers and Staff.
2. A communication plan will provide parents and staff consistently with information.
  - A. The Agency website Early Ed page will be updated with information related to school reopening as new information is produced. The Re-opening Plan will also be published to the Agency website and edited as needed.
  - B. The Small Wonders Facebook Page will be updated as information changes.
  - C. Parents of enrolled students will be communicated to with any updates or changes to our reopening status via printed Memos sent home, Remind App Messages, phone calls and group emails.
3. Students will be taught new COVID-19 protocols as detailed in the sections that follow.

4. Parents, Staff and Visitors will receive ongoing communication regarding CDC and DOH guidance.
  - A. Each week Messaging will be provided to Staff via Memos and ongoing Training regarding protocols and reminders of CDC and DOH Guidance.
  - B. Each week Messaging will be sent home to parents with reminders of CDC and DOH Guidance.
  - C. The Reopening Plan and further communication regarding our COVID-19 response will be communicated to all parents in their preferred method of communication and in their home language.

## **II. Health and Safety**

### **1. In-Person Determination.**

- A. Student density within classrooms will be reduced to provide adequate room for social distancing. Early Education Rooms are currently approved for 14 students at 35 sq. feet per student. As a result of therapies and absences, 12 or less students are typically present in a room at any given time.
- B. Sufficient daily supplies of PPE will be on hand in the building with backup supplies kept in our Agency storeroom with continual replenishments. These PPE supplies include: n-95 masks, cloth washable face coverings, disposable surgical masks, face shields, gloves and gowns.
- C. Transportation will be provided by County Department of Health contracted vendors who will be responsible for providing safe transportation.
- D. Local Hospital Occupancy – currently is below the threshold for hospital capacity with over 30% of hospital beds available.

### **2. Stakeholders Involvement**

A team of stakeholders and community members were consulted in the development of this plan including, Parents, School Administrators, Agency Administrators, Agency Finance, Agency

Purchasing, Food Service, Onondaga County Health Department, Agency Quality and Assurance, Therapists, Teachers and Staff.

### **3. Communication**

A. The school team will develop a plan prior to the start of school (through training and/or group discussion) on how to teach students the new skills needed for COVID-19 protocols, such as handwashing, wearing masks, social distancing, new classroom routines, and respiratory hygiene. Students will be taught the new expectations/routines on entry to school and on an on-going basis through a variety of teaching methods that include visuals, direct instruction, and modeling. Visual supports will be posted as appropriate in the classroom and in the hallways of the school. Examples include markers and lines for social distancing in the classroom and walking in the hallway, step-by-step handwashing instructions, etc. Instruction will be provided in small groups and on a 1:1 basis to support practicing the new skills. Parents/guardians will be encouraged to practice the same skills at home.

### **4. Observing Signs of Illness**

- A. As a result of our licensing with OCFS, our Center has Exclusion Criteria that we follow that dictates when a child is considered too sick to enter into care or when a parent must come to pick up a sick child. We have added the following COVID-19 related criteria that details when a child would not be able to be in care.
- B. If any combination of these symptoms is observed: persistent cough, shortness of breath or difficulty breathing, fever of 100.0°F or higher, chills, congestion, runny nose, muscle pain, sore throat and/or new loss of taste or smell, nausea, vomiting and diarrhea, a child must be isolated and the parent called.
- C. Daily Health Checks will be completed on children as soon as they arrive in the classroom.
  - i. Staff members shall wear gloves while conducting the checks.
  - ii. Gloves will be changed between children.

- iii. Special attention will be paid during the check for COVID symptoms as well as other illnesses. This includes special attention to rashes or lesions.

## 5. Temperature Screening and Questionnaire

*Every person arriving at the Early Education Center will be screened. This includes Staff Members, Children, Parents and any Visitors to the building.*

- A. Before entering the building, (in the entry way) everyone will be screened using 4 questions plus a Temperature Check:
  - i. **Are you (or your child) experiencing any of the following symptoms** that are not associated with a pre-existing condition: Dry Cough, Shortness of Breath, Loss of Taste, Fatigue, Chills, Sore Throat, Congestion/Runny nose, Nausea / vomiting, Diarrhea, Body Aches or Headaches out of the ordinary?
  - ii. **Do you (or your child) have a fever over 100.0 degrees or had a fever greater than 100.0 degrees in the past 14 days?** *Before entering the building, everyone will have their temperature taken by a screener with new gloves. Anyone with a temperature greater than 100.0 degrees F will be required to leave the building.*
  - iii. **Have you (or your child) tested positive for COVID-19 in the past 14 days?**
  - iv. **Have you (or your child) had contact with a confirmed or suspected COVID-19 case in the past 14 days.**
  - v. **Have you (or your child) traveled to any States that are listed on New York's Travel Advisory list in the past 14 days?** *A copy of the most recent list of states will be available at the screening table for review.*
- B. The Parent picking up will again be screened at the entrance at Pick-up Time.
- C. Recording of temperature data is not permitted. Rather, a log will be kept that lists Yes or No answers to the screening questions.
- D. After screening, Parents will be provided with a COVID Screening Form which will become the entry pass to drop off the child in the classroom.

- E. All temperature checks will be conducted with a Touch Free Infrared Thermometer.
- F. Screening staff should wear gloves when conducting the screening
- G. The thermometer should be cleaned with an alcohol wipe between each client. Staff can reuse the same wipe if it remains wet.
- H. Parents and Staff who are waiting in line to be screened should maintain social distance of 6 feet between themselves and others waiting in line.
- I. Children arriving at the center by bus will have their temperatures taken upon arrival in the classrooms as part of the Daily Health Check. Temperatures will be recorded as above or below 100.0. If a child's temperature is above 100.0 then an Administrator shall be contacted by the Teacher.
- J. If a child who arrived by bus presents with COVID symptoms or has a fever greater than 100.0, then that child will be isolated while supervised by a staff member. A parent will be called and will be expected to pick the child up immediately. Protocols provided in Article II.7 of this document shall be followed for next steps.

## **6. Assessment of Sick Children and Staff**

- A. Staff will be aware of and monitoring for COVID-19 symptoms during the day.
- B. In the case of a child who develops symptoms during the day an Administrator will be contacted to verify symptoms.
- C. If a staff member becomes ill at the program they should leave immediately and report to a medical professional. The staff member should inform a supervisor before leaving so that proper ratios can be maintained in the classroom. The staff member must contact his/her supervisor by the end of day with the details of the visit and if testing has been ordered.

## **7. Isolation of Children who become ill during school with COVID-19 symptoms**

- A. The child will be isolated from the other children while remaining under direct supervision in a separate room in The Conference Room. Multiple

children with symptoms may be isolated in the Conference Room at one time, however they should be spaced 6 feet apart.

- B. Parents would be called to make pick up arrangements of the child immediately.
- C. Staff members who are supervising a child in isolation will wear an N95 mask which they have been properly fitted for in addition to gloves and eye protection. One staff member from each room shall be fitted for N95 masks in addition to administrators.
- D. When possible, the area where the child became sick will be closed for 24 hours before cleaning and disinfecting.
- E. Windows should be opened in the area.
- F. Once areas used by the child have been cleaned and disinfected, then children and staff may return to the area.
- G. If the child was in a classroom, the Indoor Gym may be used as a temporary classroom until the end of day.
- H. When parents arrive to pick up a sick child, the child shall be escorted to the parent in the lobby.
- I. Parents picking up a sick child will be directed to contact their Health Care Provider. They also will be provided a list of instructions along with contact numbers for community providers in the event the family does not have a health care provider.
- J. Staff shall be trained to recognized the symptoms of MIS-C associated with COVID-19. In addition a bulletin shall be posted in each classroom with the symptoms. If MIS-C is suspected, an administrator must be contacted and 911 called.
- K. If a student or staff member reports being tested positive for COVID-19, school administration shall contact the COVID-19 Safety Coordinator who will contact the County Health Department to determine next steps for the school community.
- L. Attendance records and contact information will be kept up to date to aid in Contact Tracing for students, staff and families if a student or staff member tests positive for COVID-19.

## **8. Visitors**

- A. Visitors will be limited at this time to Licensors, School District officials, prospective parents, collaborating agencies personnel and Elmcrest Agency employees.
- B. All visitors will be screened according to Article II.5.

- C. All visitors must sign in at the Main Office and must provide a contact phone number which will assist with contact tracing if needed.

## 9. At Home Screening

- A. The At Home Screening Questionnaire will be sent to every parent via email as well as via US Mail.
- B. Parents will be expected to screen their child and not put the child on the bus nor bring the child to the center if they answer Yes to any of the questions on the self-screening form.
- C. If a parent will be bringing a child to the Center, that parent should also use the At Home Screening questionnaire.
- D. Staff should use the same At Home Screening form each morning before reporting to work. If a staff member is sick, he/she should stay at home.
- E. If a child answers affirmatively to any of the At Home Screening Questions, then the parent should contact the Early Education Center either via our COVID dedicated email address – [EarlyEdCOVID@elmcrest.org](mailto:EarlyEdCOVID@elmcrest.org) or by calling the building at (315) 446-3220.
- F. After contacting the building via phone or email, parents should await further instructions unless the child is in a medical emergency in which case the parent should call 911, or if the parent has concerns about the overall health of the child, then he/she should contact their Pediatrician.
- G. The following At Home Screening Questions shall be used.
  - i. **Is your child experiencing any of the following symptoms** that are not associated with a pre-existing condition: Dry Cough, Shortness of Breath, Loss of Taste, Fatigue, Chills, Sore Throat, Congestion/Runny nose, Nausea / vomiting, Diarrhea, Body Aches or Headaches out of the ordinary?
  - ii. **Does your child have a fever over 100.0 degrees or had a fever greater than 100.0 degrees in the past 14 days?**
  - iii. **Has your child tested positive for COVID-19 in the past 14 days?**
  - iv. **Has your child had contact with a confirmed or suspected COVID-19 case in the past 14 days?**
  - v. **Has the child traveled to any States that are listed on New York's Travel Advisory list in the past 14 days?**



## 10. Healthy Hygiene Practices

Staff and children will be trained on healthy hand and respiratory hygiene practices. In addition:

A. Signage is present throughout the Center reminding individuals of:

- Stay Home if sick
- Cover Nose and Mouth with Face Covering
- Maintain Social Distancing
- How to Discard PPE
- Report Symptoms
- Hand Hygiene
- Cleaning and Disinfecting Guidelines
- Respiratory Hygiene and Cough Etiquette

### B. Hand Hygiene:

- i. All Adults (Parents, Staff, Visitors) will be required to use hand sanitizer on their hands upon entry into the building. In addition, staff will wash hands with soap and water for at least 20 seconds upon entry into the classroom. (Children **should not** use hand sanitizer)
- ii. Children will wash hands immediately upon arrival in the classroom with soap and water for at least 20 seconds upon entry into the classroom.
- iii. Handwashing protocol will be followed throughout the remainder of the school day in accordance with our Health Care Plan.

This includes handwashing for 20 seconds with soap and water...

- a. When hands are dirty.
- b. After toileting
- c. Before and after food handling or eating
- d. After handling pets or other animals
- e. After contact with any bodily secretion or fluid
- f. After coming in from outdoors or from any other space outside of the classroom.

### C. Respiratory Hygiene.

Children will be taught about proper respiratory hygiene on entry to school and on an on-going basis through a variety of teaching methods that include visuals, direct instruction, and modeling. Visual supports will be posted as

appropriate in the classroom and in the hallways of the school. Instruction will be provided in small groups and on a 1:1 basis to support practicing the new skills. Parents/guardians will be encouraged to practice the same skills at home.

## **11. Social Distancing**

We recognize that prolonged social distancing is developmentally impossible for our preschoolers. A certain amount of proximity is necessary for safety as well as healthy social emotional development. With this in mind, we are putting the following practices in place:

- A. Physical distancing shall be practiced within the classroom, hallways, playground and Gym as much as possible by rotating the times that children leave classrooms.
- B. Children will have their own cubby in the classroom so that their belongings do not come into contact with that of other children.
- C. During naps, Children will be arranged head to feet when placed beside each other, with increased distancing between children.
- D. Staff / Adults within the classroom will be asked to maintain social distance from each other (to the extent possible) throughout the day.
- E. Attempt will be made to maintain distance between children when possible by having smaller sizes of groups in Learning Centers.
- F. We will plan activities that limit close physical contact, sharing of equipment and waiting in line.
- G. Staff will stay with the same group of children (and adults) as much as possible, throughout the day and day to day. \*\* This will not apply to administration and Therapists who must engage in multiple classrooms every day.
- H. Parents are not permitted to spend an excessive amount of time in the building.
- I. The number of shared toys within the room will be reduced. Shared toys will be limited to items that can be cleaned and disinfected easily.
- J. Unused (or currently unnecessary) items will be placed into storage in order to allow surfaces to be cleaned and disinfected more easily.
- K. Aerosol Generating Procedures. Staff will be required to wear an N95 mask when administering a nebulizer treatment. (In lieu of N95, a surgical mask in combination with a face shield may be used).

Nebulizer treatments must be administered in an office or classroom where no other children are present.

- L. Parents, whose children require nebulizer treatments, will be encouraged to request a Metered Dose Inhaler with a spacer or valved holding chamber from their medical provider.

## 12. Accommodations for those who are High Risk

- A. Children who are medically fragile or who have underlying health conditions should seek the advice of their medical professional before attending school.
- B. If the risk is considered to be too great for a child's health to attend in-person, then remote learning will be offered for the student.
- C. If a staff member is over age 65, pregnant or has an underlying health condition, he/she should consult a medical professional before reporting to work in order to determine if extra precautions should be taken to mitigate potential exposure to COVID-19.

## 13. Face Coverings

- A. Preschool students will be encouraged to wear a face covering whenever social distancing of 6 feet cannot be maintained.
- B. On a case by case basis, (by Administration and in consultation with a parent and specifically for children with IEPs) a child may be excused from wearing a mask as per the guidelines of Page 36 of NYSED Recovering, Rebuilding, and Renewing: The Spirit of New York's Schools, *"Students where such covering would impair their health or mental health, or where such covering would present a challenge, distraction or obstruction to education services and instruction."*
- C. Preschool children wearing a face covering will be provided mask breaks during the day as determined by the classroom schedule. Preschool students will be able to take mask breaks when playing alone in an area that is 6 feet distance from other students, when eating food (with a barrier between students or socially distanced 6 feet), and when working on speech / language skills one-to-one with a speech therapist in an area away from other students and staff, or at any other times determined by Administration.
- D. **All adults** (and siblings of children in care over the Age of 2) entering the building are required to wear a mask or face covering. This mask

must cover the nose and mouth at all times in the building unless a person is in a solitary environment (i.e. working alone in their own office). (See Governor Cuomo's Executive Order 202.17 )

- E. For those entering the building who do not have a face covering, one will be provided.
  - i. If children do not have a face covering, they will be provided one by the school at no charge.
  - ii. If parents do not have a mask during pick up or drop off, they will be provided a disposable mask at no charge.
  - iii. Employees will be provided with a washable, reusable face covering. It will be the employees' responsibility to wash daily and report to work with the face covering.
  - iv. Replacements can be provided as needed.
- F. Staff and children will be trained on the proper way to wear face coverings and proper removal of a face covering.
- G. Parents will receive information on proper care of the face covering.

#### **14. Personal Protective Equipment (PPE)**

- A. A week's worth of stock of PPE will be maintained in the building at all times.
- B. Designated staff will be fitted for n95 masks within each classroom. Only those who have been properly fitted for n95 masks will be able to use them.
- C. Each person fitted for an n95 will keep their own mask in an accessible place.
- D. Adequate stock of PPE to replenish building needs will be maintained by the Agency.
- E. Program requests for PPE will be through an internal requisition sent to the warehouse with a turnaround of 24 hours.

#### **15. Suspected or Confirmed Case of COVID in building**

- A. In the event a parent/guardian or a child must be isolated because they have tested positive for, or exhibited symptoms of COVID-19, Center administration must advise the parent/guardian that they cannot enter the site for any reason, including pickup up of their child
- B. If the parent/guardian – who is a member of the same household as the child – is exhibiting signs of COVID-19 or has been tested and is

positive for the virus, Center administration must utilize an alternate parent /guardian or emergency contact authorized by the parent to come pick up the child. As a “close contact” the child must not return to the Center for the duration of the quarantine.

- C. If the parent / guardian – who is a member of the same household as the child – is being quarantined as a precautionary measure, without symptoms or a positive test, Center staff should walk the child out to the parent outside of the Center. As a “contact of a contact,” the child may return to the Center during the duration of the quarantine.
- D. If a child or their household member becomes symptomatic for COVID-19 and/or tests positive for COVID-19, the child must quarantine and may not return or attend the Center until after quarantine is complete.

## **16. Return to School following illness**

### **A. Students following illness**

Child must submit evidence of negative COVID19 test before returning or documentation determining testing is not necessary and/or child is not contagious.

### **B. Return to School for Students following positive COVID-19 test result**

- i. If symptomatic child tests positive, they may return to care after:

At least 3 days (72 hours) have passed since recovery, defined as resolution of fever without the use of fever-reducing medications; **AND**

Improvement in respiratory symptoms (e.g., cough, shortness of breath); **AND**

10 days have passed since symptoms first appeared.

If retesting is completed: child must receive two consecutive negative results within a 24 hours period.

- ii. If asymptomatic child tests positive they may return to care after:  
10 days have passed since date of positive results **AND** has no subsequent illness;

If retesting is completed: child must receive two consecutive negative results within a 24 hours period.

- C. Clearance of Employees who were exposed to COVID-19 or who tested positive:** In consultation with HR, Operational Risk Manager and Administration, the Department of Health “Protocols for Essential Personnel to Return to Work Following COVID-19 Exposure or Infection” will be followed in order to get staff cleared to return to work.

## **17. Cleaning / Disinfecting**

- A. Disinfecting of Rooms and Touch surfaces throughout the building shall occur twice daily. This includes touch points such as door knobs, light switches, garbage can lids, restrooms, etc. Disinfecting duties shall be shared among staff members and logged when completed.
- B. Drinking Fountain will be closed. Classrooms will have water available for students throughout the day.
- C. Gym and Playground must be disinfected between each classroom’s usage. This will include the wiping down of all touch surfaces. Outside time will be increased as weather permits.
- D. Shared toys will be disinfected as determined necessary based on usage and threat of transmission of germs to other children throughout the day.
- E. Mouthed toys or toys that have been touched significantly will be placed in a Dirty Toy bucket to be disinfected before being reintroduced.
- F. Toys from home will not be allowed during this time.
- G. Any sensory activities (e.g. playdough, rice, etc.) will be conducted in individual child specific sensory bins. Items that are used for sensory activities will be bagged after use with the child’s name and cannot be shared with other children.
- H. As Administration deems necessary, the number of shared items within the classrooms may be reduced in order to help with infection control.
- I. All toys shall be disinfected at the end of the day.
- J. Sleeping mats should not be stacked. Sleeping mat surfaces cannot touch even when stored.
- K. Pens used for sign-in / sign-out will be disinfected after each use by parents. Or parents may choose to bring their own pen.
- L. Therapy rooms shall be disinfected between sessions when children from a different classroom are going to be served. Disinfecting does not need to occur between sessions for children from the same classroom.

- M. Staff should use hand sanitizer after using the Time Clock. Time Clock shall be disinfected twice per day as part of the general building disinfecting.
- N. Only EPA Registered disinfectants that kill COVID-19 shall be used in the Center. These shall be provided by the Agency and include: Bleach solution, Lysol spray, EcoLab 14 Plus and Dual Blend #19.
- O. All disinfecting will be logged and signed. Disinfecting will be overseen by the Day Care Coordinator and Disinfecting logs will be kept in the Day Care Coordinator's Office.

## **18. Social Distancing in Safety Drills**

- A. Fire Drills will be conducted monthly. Children will need to be kept within arms reach of teachers when exiting and re-entering the building. Classes will leave their rooms without mixing in the hallways with other groups. At the Assembly point, groups of children will be kept from mixing with other groups.
- B. Shelter in Place drills will be conducted twice yearly. These drills will be short in duration in order to reduce time that children are in close proximity. Staff will assist children to increase social distancing during the drill.

## **19. COVID-19 Safety Coordinator**

Jerry Shannon, Director of Early Childhood Services will serve as Safety Coordinator. The COVID-19 Safety Coordinator will be the main point of contact for any communication and follow up regarding the identification of positive COVID-19 cases for early education programs, to respond to email sent to the Elmcrest dedicated COVID-19 email system, or to address other questions that arise related to COVID-19 concerns that cannot be answered by program staff. COVID-19 Safety Coordinator will also work with Elmcrest's Agency Crisis Management and COVID-19 Team to coordinate responses.

## 20. Transportation Related Health and Safety

- A. Transportation is provided to students in preschool special education programs pursuant to section 4410 by the county Department of Health in which the student resides. The county in consultation with the transportation vendor is responsible for routing as well as social distancing and hygiene protocols on all buses.
- B. The bus company is expected to: train on and enforce CDC and DOH guidelines, mandate face coverings for drivers and attendants, provide other PPE as needed for drivers and attendants, and enforce pre-screening of drivers and attendants before the start of their morning and afternoon shifts.
- C. Bus Drivers will not be permitted to enter the building.
- D. Bus drivers should wear gloves if they must be in physical contact with students.
- E. Parents will be reminded on a regular basis to not put a sick child on the bus.
- F. Parents should not send their child on the bus if any of the Screening Questions can be answered “Yes” for the child or an immediate family member. If a child or family member would answer “Yes” to any of the Screening questions, the parent is encouraged to call an Early Ed Administrator to discuss.
- G. Classroom staff will be responsible for meeting children from their specific classroom at the bus. This will reduce the number of contacts that a child has during a day.
- H. Children will disembark from the bus one at a time.
- I. Children will be expected to wash their hands with soap and water upon entry into the classroom.
- J. After children arrive, they will have their temperatures taken in the classrooms along with a Daily Health Check. Temperatures will be recorded as above or below 100.0. If a child’s temperature is above 100.0 then an Administrator shall be contacted by the Teacher.
- K. If a child has COVID symptoms or has a fever greater than 100.0, then that child will be isolated while supervised by a staff member. A parent will be called and will be expected to pick the child up immediately. Protocols provided in Article II.7 of this document shall be followed for next steps.
- L. SPICE children will not be expected to wear a mask on transportation if wearing so would impair their physical and/or mental health.



Parents should express their child specific concerns to Early Education Center Administration who can communicate exclusions regarding mask wearing to the transportation provider.

- M. Children should be properly socially distanced on buses by the bus driver and attendant.
- N. If families prefer to drop off their children, they will be encouraged to do so. Assistance will be provided to families to submit transportation reimbursement requests. Parents who choose to drop off their children will follow the screening protocol found in Number I, Article D of this document (in the Health and Safety section) and will be expected to maintain social distance with other parents and staff members.
- O. If a student's home school district closes due to COVID-19, the County will still be expected to provide transportation for the child to the school, or if it is not possible then at a minimum provide transportation reimbursement to families who transport their own children.

### **III. Facilities**

- 1. No changes will be made to our facilities.

### **IV. Child Nutrition**

#### **1. Access to School Meals**

- A. Meals will continue to be provided to all children in our Early Education Center at no cost. Families will be requested to complete a new application for free or reduced-price meals as part of orientation in September 2020, which assists the Agency with reimbursement.
- B. In the event of a school closure or a move toward remote learning for a child, a family will be directed to their home school district for meals served remotely. This is a matter of convenience for families since we serve children from 17 school districts across an extensive geographical area.
- C. Family Coordinator will monitor families who are food insecure during closure periods to insure that families are accessing meals within their local district. In the event of food emergencies, agency resources may be accessed to assist families in need.

## **2. Child Nutrition Program**

- A. Food provided is healthy and meets Child Nutrition Program Requirements**
- B. Production Records shall be completed for each meal.
- C. Meal counts shall be taken in each classroom and reported to the SPICE Office Coordinator.

## **3. Food Service Health and Safety**

- A. Meals shall not be served family style. Rather, food will be plated and then served to children. All second servings of food or beverage must be on new disposable paper products.
- B. Staff members will be expected to wear gloves and disposable aprons during serving.
- C. Staff lunches will not be served buffet style, but will be plated individually in the kitchen.
- D. Kitchen will be properly disinfected and sanitized daily.
- E. Cook will be required to wear a mask.
- F. Only Kitchen staff will be permitted to be in the Kitchen.
- G. Vendors will be screened (or monitored for self-screening protocols) before being granted access into any Agency buildings.

## **4. Food Allergies**

- A. Food Allergies are conspicuously posted in each classroom in a document titled Vital Information. All classroom staff are required to familiarize themselves with potential allergies of students.
- B. Our Building is a Nut Free building.

## **5. Hand Hygiene and Sharing**

- A. All Staff and students must wash hands with soap and water before and after meals and snack times.
- B. Children will not be permitted to share food with other children.

## **6. Cleaning and Disinfecting**

- A. Tables will be properly disinfected using bleach and water solution before and after meal times.

## **7. Social Distance During Meals.**

- A. Spacing will be increased as much as possible between children during mealtimes by adding an additional table to each classroom and utilizing all available tables in the classroom. Plexi-glass partitions will be used during meal times to provide a barrier so that children may remove their masks while eating.

## **V. Social Emotional Well-being**

1. We will provide resources and referrals to address mental health, behavioral and emotional support services and programs.
  - A. Family Coordinator will link families to community organizations who can assist with emergency needs as they arise (food, clothing, housing, counseling, etc.).
  - B. A parent survey during the enrollment process assists with the identification of more vulnerable families so that continued outreach can be provided to families.
  - C. Ongoing communication with Teachers about family needs allows the Family Coordinator to reach out to families as needs arise, even during remote learning.
  - D. Play therapy is offered to families who need it, even when it is not listed as an IEP service.
  - E. Parent workshops will be offered via Zoom (or in person as permitted) on topics relevant to preschoolers (bedtime routines, positive discipline strategies, using visual schedules, engaging preschoolers in healthy eating, etc.).
  - F. Parent support groups are planned to be offered to parents regarding: parenting preschoolers with ASD, parenting preschoolers in foster care or post-adoption and mindfulness.

2. Professional development opportunities will be provided for faculty and staff on supporting students during and after COVID-19 as well as providing support for developing coping and resilience skills for students, faculty and staff.
  - A. The Family Coordinator will provide a formal training time during Staff Development days to train Teachers, Therapists and Staff members in how to support preschoolers and parents during COVID-19.
  - B. The Second Step curriculum will continue to be used in the classroom in order to assist preschoolers in socio-emotional development, including regulation skills and coping strategies. Staff Development opportunities will provide additional training in Second Step as well as the Calm Down Cube.
  - C. The Family Coordinator will provide ongoing staff development in how to assist in developing coping and resilience skills for students, as well as resources to assist parents with positive discipline (e.g. 1, 2, 3 Magic).
  - D. The Family Coordinator will take an active role in Team Meetings to provide emotional well being support to faculty and staff.
  - E. The Family Coordinator will be available for ongoing coaching for staff who may be experiencing emotional distress as a result of COVID-19 and act to refer faculty and staff to other services in the community.
  - F. Faculty and Staff will be able to access the agency Employee Assistance Program as needed. Information regarding the EAP will be posted prominently on the Employee bulletin board.

## **VI. School Schedules**

1. We will offer in-person full day education for all students, five days per week.
  - A. Parents may request for their child to receive remote learning, which will also be offered for any children whose parents request.
  - B. In the event that a reduction in density is necessary, children without IEPs will be moved to remote learning first, in order to provide in-person instruction and therapies to children with IEPs on a continuous basis.
  - C. If a student tests positive within a classroom, that classroom will move to remote learning until all contacts can be identified, notified, tested and cleared in coordination with the County Health Department.

D. If a school closure is necessary or is ordered by officials, then learning shall switch to remote learning via See Saw platform.

## **VII. Attendance and Chronic Absenteeism**

1. Daily attendance and teacher / student engagement will be collected and reported.

A. For in-person students, attendance shall be tracked via in classroom attendance sheets and the CPSE Portal.

B. For remote learning students, daily contact shall be made between Staff and the student. Attendance shall be tracked in Paper Student Logs.

C. For remote learners, all interactions with Students and family members shall be documented in Student Logs. Online interactions will also be made through Seesaw platform.

D. Attendance shall be reported via the CPSE Portal for children in 4410 and School Tool for SCSD UPK students.

E. Collaboration logs shall be kept for remote students for team engagement between therapists and teachers with students and parents.

F. Attendance will be discussed with District Officials for children whom chronic absenteeism becomes an issue.

## **VIII. Technology and Connectivity**

1. Families will be surveyed for their level of access to high speed broadband and to devices to access remote learning.

2. To the extent practicable, and in cooperation with the home school district of a student, efforts will be made to provide devices and internet access for families who do not have sufficient access.

A. Attempts will be made at our Salt Springs Road location and our Northside Early Education Center to boost our wi-fi access into the parking lot so that families in need can access an internet connection.

3. Multiple Methods of Learning

- A. Families will be surveyed for their preferred mode of learning for their child. For families who prefer non-technologically based learning, lesson plans and materials will be mailed on a weekly basis and follow up with the family will be made via phone.
- B. During remote learning, tele-practice may be used for the various therapies on the IEP since in-person therapies will not be an option.
- C. Ongoing professional development will be provided to teachers regarding remote/ on-line learning.
- D. Super-users will be identified within Staff who can assist other staff with needs that arise, specifically with Zoom, Seesaw and other platforms that may be used for remote learning.
- E. Training will be provided for parents in how to access technology as part of orientation, in the event that we must move to remote learning.
- F. In consultation with Agency IT, student data privacy standards will be followed.

## **IX. Teaching and Learning**

1. The 2020-2021 continuity of learning plan will include the availability of in-person, remote and a hybrid model of preschool instruction. All students will be offered in-person instruction, with parent choice remaining at the forefront. If a parent chooses remote instruction, this will be provided as will any desirable combination of in-person and remote – referred to as a hybrid model of instruction
2. Instruction provided will be aligned with outcomes delineated in the New York State Next Generation Learning Standards for Pre-kindergarten.
3. Meaningful parent engagement in the educational process is supported in the parent's preferred language through the following: CPSE placement meeting; intake meeting and facility tour with Family Coordinator; enrollment paperwork and individual meeting to review; multiple mailings to outline program goals and practices; orientation session for parent and child prior to school opening; planned parent forums and trainings designed based upon parent need; individual parent contacts by multiple staff members (teacher, administrator, therapist, behavior analyst; family coordinator) on a regular basis; and the constant fostering of two-way communication between school and home.

4. Educational equity will be a key driver relative to instructional decisions. Instructional staff will provide consistent, accessible opportunities for all students and will ensure that State standards are utilized as instructional benchmarks.

- A. Academic instruction, regardless of the delivery method, will be designed and provided by an appropriately certified teacher.
- B. Parent orientation materials for the 2020-2021, as well as the Parent Handbook will clearly communicate the plan for families to contact administrators and teachers with instructional questions. Plans for individual families will be created based upon unique family needs.
- C. Instructional experiences (in-person, remote or hybrid) will be inclusive, culturally responsive, and will consider the needs of all students. Additionally, all instructional experiences will adhere to established state regulations and guidelines for unique populations.
- D. The 2019-2020 school closure has resulted in an increased need for social/emotional and academic supports to ensure success during the 2020-2021 school year. Families provide extensive information about themselves and the needs of their children at the onset of the school year through the “All About Me” document in order to assist in planning for these supports.
- E. All pre-school children are screened during the initial days of prekindergarten using formative assessments (TSG) to determine individual student needs and target extra help to ensure both academic and social-emotional needs are addressed.
- F. Staff have participated and will continue to participate in forums to discuss individual student needs and to share best practices regarding instructional design for in-person, remote and hybrid models of learning. These forums include: regularly scheduled classroom meetings, team meetings, teacher meetings, therapist meetings, administrative meetings and individual provider meetings.
- G. Professional development needs for administrators, teachers, therapists and teaching assistants for the upcoming year will be identified, particularly those needs related to teaching remotely and the use of technology. Appropriate professional development will be designed and delivered for the 2020-2021 school year.

- H. Families and caregivers will be offered training and supports to ensure comfort and ease with instructional programs and technological platforms to be used in the event of remote instruction.
- I. Family style eating will not be practiced, in keeping with social distancing, health and safety requirements. Meals will be plated in a “single-serve” manner and additional tables will provide for greater social distancing during meals in prekindergarten classrooms.
- J. All pre-kindergarten classrooms have interior bathrooms with sinks that are highly visible to staff. Proper handwashing protocols are taught and are utilized upon entry to the classroom as well as after bathroom visits, by both students and staff.
- K. Center-based and small group instruction will continue to be an essential instructional component. Significant adaptations have been made in order to ensure health and safety:
  - i. \*all group sensory tables have been removed from classrooms and have been replaced with individual student sensory bins (water, sand, rice, pasta, beans)
  - ii. \*playdough has been provided for children in individual student containers – each container is labelled by student name. In addition, individual student playdough trays (metal cookie sheets) have been provided and children are taught to work in “their space.”
  - iii. \*students will be provided with individually labelled “writing/art boxes” which contain markers, scissors, pencils, crayons, glue sticks and liquid glue
  - iv. \*instructional strategies will include developmentally appropriate practices such as child-choice during learning center time. Staff will intentionally limit the number of “available” slots at each center to promote social distancing
  - v. \*dress-up clothes, stuffed animals, pillows and other “hard to clean” items have been removed from classrooms
  - vi. \*all DOH and OCFS guidelines will be strictly followed with learning center areas and materials sanitized following student use
- L. Instructional staff will promote the development of socially appropriate inter-personal relationships within classroom groups, while discouraging physical contact such as hand-holding buddy systems.
- M. Remote learning plans that involve “non-screen” activities have been developed and used and will continue to be a priority for the 2020-



2021 school year. These plans include “learning at home kits” with a significant number of materials; instructional activities posted to See-Saw for parents to engage with children; weekly mailed activities requiring “hands-on” engagement; and frequent individual parent training via phone, email and Zoom to support parents in these endeavors.

- N. Pre-school programming will remain full day (5.0 hrs.) five days per week. UPK youngsters participating in this CBO’s program will follow the attendance guidance of the Syracuse City School District.
  - O. Primary instruction in each prekindergarten classroom will be led and delivered by an appropriately certified NYS teacher. Instructional programming will be supported by a minimum of three teaching assistants within each classroom.
  - P. Student cohorts will be created within the preschool population and these cohorts will be maintained throughout the pre-kindergarten day. Children will remain with the same group of peers and adults for the duration of the instructional day.
  - Q. For the duration of the pandemic and this plan, the use of classroom volunteers will be prohibited in order to limit the number of persons and to increase social distancing.
5. Parents will be provided with contact information for questions about instruction and technology.
- A. The Family Coordinator will act as the first line of contact related to any Technology concerns, including accessibility issues. The Family Coordinator will assist the family with connecting with the appropriate party so that the needs can be addressed.
  - B. Teachers will be available to parents to answer questions and provide information related to instruction. Families will be able to contact the Teacher via phone, email or through the online instructional platform.
  - C. Contact information will be provided to families as part of the orientation process and will be communicated within the preferred home language and mode of communication for the family.

## **X. Special Education**

1. Special education services will be provided as delineated on each students’ Individual Education Plan (IEP) and consistent with FAPE regulations. All

procedures/practices will align with DOH guidelines to protect the health and safety of students and staff members.

2. The delivery of special education services to students is documented in the CPSE Portal for in-person services and on Continuity of Learning logs for remote services. In addition, CPSE Chairs are notified regarding the method of service delivery (in-person, remote, hybrid, teletherapy) for each student. Parents are communicated with regarding their child's progress in the format (written, text, phone, Remind app.) and language identified by the parent as being preferable.
  - A. SPICE at Elmcrest will communicate the proposed Continuity of Learning Plan for 2020-2021 to all CPSE Chairs.
  - B. SPICE at Elmcrest considers preschoolers with disabilities to be a high need student group. All planned reopening services will be delivered in-person, except where the parent/guardian requests an alternative method.
  - C. Consistent with the regulation that least restrictive environment (LRE) must be maintained for all students with disabilities, SPICE at Elmcrest will provide a SCIS (special class integrated setting) for students whose IEPs identify that classroom model. This integration with typical peers will be provided to the maximum group size allowed in conjunction with DOH and OCFS guidelines.
  - D. IEP services will be implemented as written, except where the mixing of "cohorts" would make grouping of children for therapies a health/safety risk.
  - E. Progress monitoring is an essential component of 4410 programming. Formative assessment data is collected daily in SPICE classrooms and is utilized to drive instructional planning. In the event of remote services, data collection occurs through remote means (pictures, videos, parent reports, work samples, etc.)
  - F. Requests for compensatory services will be made to CPSE Chairs in the event that a child demonstrates loss of skills or regression attributable to missed educational or therapy sessions during the pandemic. Data will be collected to document the loss of skills due to therapy format (e.g. tele-therapy) and any lack of progress with supports in place to substantiate the need for compensatory services.

- G. UPK children enrolled at SPICE will continue to be assessed, monitored and referred to CPSE for evaluation during the pandemic, as need arises.
  - H. It is the intention of the SPICE at Elmcrest program to provide 180 instructional days during 2020-2021 and six weeks of instruction during summer 2021. Given the unforeseen nature of the pandemic, a hybrid model (some in-person and some remote) of instruction may be utilized to accomplish this.
3. Meaningful parent engagement in the educational process is supported in the parent's preferred language through the following: CPSE placement meeting; intake meeting and facility tour with Family Coordinator; enrollment paperwork and individual meeting to review; multiple mailings to outline program goals and practices; orientation session for parent and child prior to school opening; planned parent forums and trainings designed based upon parent need; individual parent contacts by multiple staff members (teacher, administrator, therapist, behavior analyst; family coordinator) on a regular basis; and the constant fostering of two-way communication between school and home.
  4. SPICE at Elmcrest administrators are involved in on-going communication with CPSE Chairs who are responsible for the placement of children. CPSE Chairs provide the program staff with current information including an IEP and any related educational evaluations at the time of referral. CPSE Chairs indicate on the IEP the plans for monitoring and reporting student progress to the school district.
  5. All necessary accommodations, modifications, supplementary aids and services, and technology will be provided by the program as deemed necessary and as indicated on IEPs.

## **XI. Staffing**

1. Teachers will be required to have a valid certification or to have an approved Plan of Study that will result in certification.