

## ***2021 Revised Education Re-Opening Plan***

As we all are aware, the COVID-19 pandemic has impacted all of our students, families, staff and school and we should anticipate there will be additional guidance provided by Centers for Disease Control (CDC), the New York State Department of Health (DOH), the New York State Education Department (NYSED) as well as our collective understanding of the COVID -19 best practices.

We should anticipate challenges and modifications that will come as we draw closer to the opening of the schools and be as plan-full and as flexible during these uncertain times.

The following document is intended to provide an outline of how we plan to re-open our school with the understanding that we will be incorporating any new guidance as they evolve and with input from families and staff, we will attempt to make the upcoming year as productive as possible.

We want to thank you for working with us and assisting us in maintaining the safety procedures to keep our students and staff as safe as possible.

Capture the moment  
Follow their lead  
Build on the wonder  
Build on the need

Look for beginnings  
For reasons to Know  
Capture the moment  
And knowledge will grow  
- Author Unknown

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## Program Description

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Hudson Valley Cerebral Palsy Early Childhood Education Center is a not-for-profit corporation and has been providing services to children and their families for over 30 years.

Hudson Valley Cerebral Palsy Early Childhood Education Center believes that quality programming for young children is based upon a comprehensive understand of child development and the acceptance of children as unique individuals. We believe that all children must be given the opportunity to learn about the similarities and differences in one another while emphasizing each other's worth and dignity.

Our primary goal is to provide the highest quality of care where each child's individual physical, social, emotional, and cognitive needs are met in a safe, nurturing and predictable environment. Daily schedules and lessons are planned to encourage and address the development of these skills. Safety and the concern about health and health practices are equally important aspects of the programs.

During these challenging times, the program strives to maintain systems and approaches that encourage experience and growth while maintaining the safety of the children.

The Early Childhood Center is composed of the following programs;

Infant, Toddler, Early Intervention and a Developmental Pre-School. During this time of COVID-19 pandemic the Infant program is on hold. The Preschool has two distinct models:

1. An Integrated Model
2. A Self-Contained Model

The Integrated Model is an innovative concept which groups children with special needs with their peers who do not experience developmental delay. It is taught within the classroom setting with a Special Education Teacher as a Team leader. The transdisciplinary team, is inclusive of Special Education Teacher, Teacher Aides, Psychologist, Speech and Language Pathologists, Occupational Therapists, and Physical Therapists. The age range is from 2.9 -5 years of age with the ratio of children averaging 6 typical peers to each 6 children who experience disabilities.

The Self Contained Model is a more traditional model in which the ratio of staff to children is high and the class consists exclusively of children who experience disabilities.

We educate approximately 100 students in our educational program. Many of our students have communication, medical, behavioral, and physical disabilities and needs.

Our Early Intervention Program offers rehabilitative therapies, educational programs and parent support. The children (12 mo. to 2.9 years of age) experience developmental disabilities.

The main emphasis of the individualized program for each child is to promote cognitive, social and motor development by utilizing a team approach.

In addition to classroom instruction students also have the opportunity to engage in specialty classes such as art and music and adaptive physical education utilizing our adapted, specially designed playground to meet the needs of children who experience challenges.

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## Communication

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Particularly during this unprecedented time with rapidly changing precautions and guidance, ensuring effective communication is key to maintaining protocols and procedures and ensuring the health and safety of the children that we are here to serve and guide.

Methods of communication may vary from family to family and are designed to meet the individual needs of each family to ensure a variety of ways to reach out to families and for them to reach out to us to share experiences, concerns, and questions.

The Center will ensure communication of the latest protocols and procedures via email, phone calls, website postings and classroom communication logs.

We will make every attempt to provide outreach to families to ensure academic success during these challenging times. Parents/ guardians will be provided with contact information and a means of reaching out to the teachers, therapists and administrators to further strengthen lines of open communication. Families are encouraged to reach out and if translation services are needed please let us know so that we can attempt to provide accommodations as best as possible.

There may be a need that services may be conducted remotely as they have occurred in the recent past. For families that do not have access to this technology, the program can assist (as supplies allow) with the use of equipment from the school or we will utilize low technology assistance in the form of packets and communication being sent via postal service or in the child's back-pack.

In addition, the Agency website or Facebook page may be utilized for mass communication measures. Changes in guidance from CDC, or Department of Health may be posted on how the program may have to be adapted to meet the changes in guidance to serve your child in the safest way possible.

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## COVID-19 Protocols and Safety Procedures

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It is important that during these times that protocols and procedures be followed as strictly as possible, but due to the complex needs and challenges that our students face it may be important to review these guidelines with the children to reinforce their importance in remaining healthy while engaging socially. Staff will be providing frequent reminders of the protocols for the children.

Staff will be required to wear masks *at all times when working with or around students indoors and outdoors when then cannot maintain 6 feet of social distancing. All students are now required to wear a mask in school and during transport to and from. If they are not able to tolerate wearing a mask the school will require a note from the physician indicating the medical reason for the exemption. Behavioral non-compliance is not an exemption and the team at school and at home should continue to provide prompts and encourage mask compliance at all times.* The Center will also have masks available for students who do not arrive to school with a mask or if mask is discarded or misplaced or soiled, provided that this is the family's desire. All masks provided by HVCPA Childhood Education Center will be washed at the end of the day.

*Students who present with medical concerns who cannot tolerate a mask must provide a written exemption from their HCP prior to attendance at school.*

All students will have multiple opportunities to practice hand washing and to practice social distancing. Children from the same classroom will engage with their classmates and their teacher and aides and it will be discouraged to mix children from other classes. Playground time, and music or art will occur within those same cohorts, *to the greatest extent possible*, to maintain similar groups and therefore reducing further exposure to other students.

Visual cues such as posters and demonstration of handwashing will be implemented in the school and practiced by everyone. Song and music will assist children in washing hands for the recommended 20 seconds.

Shaping, modeling and fading techniques will be utilized to assist children in hand-washing and facemask wearing with efforts made to de-sensitize children to wearing a mask and providing opportunities for them to discuss and gain and understanding of their purpose to reduce any fear or apprehension.

In preparation for the changes due to the COVID-19 pandemic the rooms have been measured and have been re-configured to provide social distancing. Long tables or round tables are replaced with small, individual desks, facing in the same direction and are situated for distancing, *a minimum of 3 feet apart*. Visual cues will also be visible in the hallways, especially during transition times for direction to avoid "bottle-neck" or unnecessary cohorting of students.

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## **Staff and Visitors**

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Staff have an Agency email account that can be accessed at any time, in any place that offers internet connection. This will be the main form of communication to disseminate information to staff in the Center.

The Center has identified a Covid-19 coordinator, the Registered Nurse, for the program. Any questions or concerns can be shared with the program administrator who will relay questions to the nurse and provide follow-up communication.

Visitors, at this time, will be strictly limited depending on the nature of the visit. Every attempt should be made to schedule visits in advance and preferably when there are no students in the building. Visits during school hours will be discouraged however if deemed necessary it must be scheduled in advance to reduce or minimize the opportunity for interaction between the visitor and students.

All visitors will be subjected to the following guidelines:

- Single point of entry into the building
- Visitors will be subject to temperature checks and health screenings
- All visitors must wear a mask throughout the duration of their visit. If they do not have a mask, one will be provided to them
- Contact tracing information, as needed, will be acquired
- Social distancing and all other protocols will be adhered to by the visitor.

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## **Visual Reminders**

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Visual reminders of CDC and DOH guidelines will be posted at the building entrance. Signs will include, hygiene, social distancing, proper mask use and the importance of monitoring signs and symptoms to reduce any unnecessary exposure.

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## **Program Overview for Health and Safety**

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The Education Center has implemented the following health and safety protocols in accordance with guidance from the Center for Disease Control, Department of Health, NY State Education Department and Office of Children and Family Services.

The classes were assessed for space with respect to ensure 6 feet of social distancing. Classrooms have been thoroughly cleaned and disinfected and re-organized to allow for adequate spacing of students and staff.

Classrooms are as follows:

	Student/Staff Ratio	# Classes	Total # Children
Special Classes in an Integrated Setting (SCIS):	12:1:2	2	24
Self- Contained Model:	8:1:2	3	24
Self- Contained Model:	6:1:2	3	18
*Early Intervention:	6:1:1	1 (morning) 1 (afternoon)	12 +(2)

*\*Integrated with 2 additional, typical children*

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## Family Role

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Families play a vital role in the health and safety of the student. Pre- screening prior to boarding the school bus, or leaving home with a parent or guardian can ensure optimal health and reduce the spread of Covid-19.

Families will be required to:

- Check their child’s temperature prior to departure from home whether by bus or with caregiver
- Look for any signs or symptoms of Covid-19 and ensure that their child remains home if showing any typical signs.
- *With the Delta variant’s high rate of transmission, no child should be sent to school with cold symptoms. ( see NYS DOH Flowchart for Student Attendance )*
- *If a family is aware that their child is displaying symptoms and was in close contact in the past 14 days with anyone who tested positive through diagnostic test for Covid-19, or anyone who has had symptoms of Covid-19 they MUST notify the preschool if the child is showing symptoms.*
- Periodically, families may also be required to answer the following wellness check questions:
  - a. Has the child knowingly been in close or proximate contact in the past 14 days with anyone who has tested positive through a diagnostic test for Covid-19 or who has had symptoms of Covid-19
  - b. Has the child been tested for Covid-19, and/or has tested positive through a diagnostic test for Covid-19 in the past 14 days;
  - c. Has the child travelled internationally or from a state with widespread community transmission of Covid-19 per the New York State Travel Advisory

The wellness survey may be collected utilizing various methods such as checklist sent home, phone call or email, and information acquired will result in possible changes in the child’s attendance status.

Families should be made aware of signs and symptoms of Covid-19 (see below) to ensure proper assessment of their child's medical status prior to attending the Center.

Parents will be notified of their responsibility with regards to promoting health and safety and reducing the spread of Covid-19. This will include complying with:

- Children should be kept home if they have a temperature of 100 or greater.
- Keep your child home if they display any symptoms of Covid-19 (*see NYSDOH flowchart for Students*)
- Children should remain home if anyone in the home tested positive for Covid-19, has symptoms of Covid-19 or has come in contact with someone who has tested positive for Covid-19
- Parents will be expected to pick up their child from school if he/she develops a temperature, or begins to display symptoms of Covid-19 while at school.
- If a hybrid model is required, family's will be asked to comply with a schedule of designated days
- Parents should send their child in to school with essential items only... no toys... the Center has toys which are used, cleaned and disinfected daily.

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## **Instructing Staff on Signs and Symptoms of Covid-19**

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All staff will receive in-service training in accordance with the NYS Department of Health, NYSED and CDC guidelines. The following are trainings that will include, but not limited to, the following:

- Signs and symptoms of Covid-19 (fever  $\geq$  100) cough, shortness of breath, difficulty breathing, fatigue, muscle or body aches, headache, loss of taste or smell, sore throat, congestion, nausea, vomiting, diarrhea, flushed cheeks, rapid or difficulty breathing and frequent use of the bathroom)
- Hand hygiene (washing hands frequently throughout the day with warm water and soap for a minimum of 20 seconds and using paper towel to dry hands)
- Use of hand sanitizer: When hands cannot be washed, an alcohol-based hand sanitizer with at least 60% alcohol should be utilized
- When to call the RN
- When to isolate a child. The Center will have an isolation area with a separate entrance and staff monitoring, so that any child arriving with symptoms or temperature will not be in the common area of Center or with other children
- Universal Precautions
- Social Distancing
- Agency Policy for Staff Illness

- Notifications and proper paperwork related to Covid-19

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## Daily Health Screenings: Staff and Children

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### Staff:

- Each staff member arriving at the Center will have their temperature taken. If it is above 100 F they will be asked to leave and will be able to return with a physician's note indicating *an alternate diagnosis or negative viral test for Covid-19 and a note returning them, full duty.*
- Staff should also indicate if they have had proximate contact with anyone exposed and /or traveled to states indicated in the Travel Advisory
- Staff testing positive for Covid-19 will follow NYS DOH guidelines for return to work.

### Students:

- *If a child is out sick from school, and is exhibiting Covid-19 or related symptoms, he or she is required to produce a note from their HCP indicating an alternate diagnosis and when the child can return, or a negative Covid-19 test.*
- *If a child presents with a fever, over 100 degrees or symptoms during the day while at school, such as runny nose, loss of taste or smell, cough fatigue (see NYS DOH Covid 19 Flowchart for Student Attendance), they will be placed in an isolation room with staff supervision while awaiting their parent or guardian to arrive for pick -up*
- Staff conducting the checks or remaining in the isolation room, will utilize proper PPE as needed.
- *The child may return with a doctor's note stating when they are safe to return or with receipt of a negative PCR Covid-19 test.*
- If the child tested positive for Covid-19, the Center must be notified to commence Contact Tracing procedures.

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## Social Distancing

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Keeping safe means keeping space between you and others. Staff and students will stay a minimum of 3 feet apart from others whenever possible.

- *Same students will be placed with the same teaching staff whenever possible to reduce mingling out of the designated cohorts whenever it is possible.*
- All desks in the classroom will be facing the same direction and will *be 3 feet apart.*
- Students will eat their lunch and snacks at their desks within their classroom.

- Playground use will be limited to one class at a time. Children will be washing their hands before and after time in the playground.
- When possible, traveling through the corridors, staff will ensure that the children and others stay to the right when traversing down the halls.

*\*It should be noted that all attempts to maintain social distancing will be made. There will be times, however, when providing services to children with special needs that social distancing will be challenging. Staff is therefore required to wear masks at all times when in spaces occupied by students.*

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## **Returning to School after a Positive Case of Covid-19 or Illness**

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Staff and students testing positive for Covid-19 will work directly with our Covid-19 coordinator and the county health department. All staff and students must provide documentation from their primary care provider to return to school and must adhere to the following:

- *Provide documentation of release of isolation/quarantine or Negative Covid -19 test or documentation of an alternate diagnosis and clearance to return*
- To be eligible to return to work, staff with confirmed or suspected Covid-19 must have maintained isolation for at least 10 days after illness onset, and must have been fever free for at least 72 hours without the use of fever reducing medications and must have other symptoms improving *or provide documentation of a negative Covid-19 viral test.*
- *If symptoms are improving and you are fever free for at least 24 hours without the use of fever reducing medication you may return to work with a note from HCP indicating Covid-19 test was negative or provide copy of the negative test result or HCP gives alternate diagnosis then a note signed by HCP explaining the alternate diagnosis is required.*
- *If a diagnostic test was recommended but not done and no alternate diagnosis or staff was not evaluated by HCP then they must remain in isolation at home for at least 10 days and symptoms are improving and you are fever free for at least 72 hours without fever reducing medications.*

*\*Please see NYSDOH Flowchart for staff and child attendance at School*

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## **Cleaning and Disinfection**

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All education, administration and custodial crews will be trained on proper cleaning and disinfecting procedures related to Covid-19.

Staff will clean surfaces in the classrooms and play areas after each use. Equipment, toys and any commonly used items will be cleaned and disinfected.

Several times throughout the day staff will provide addition cleaning of high traffic and touch point areas such as:

- Door handles
- Electronic devices
- Tables
- Surface in classrooms
- Playground area equipment
- Classroom toys and equipment...

Cleaning crew will be enhanced throughout the day and be available for periodic bathroom area cleaning and disinfecting. At the end of each day cleaning staff will disinfect each classroom and therapeutic area by utilizing an Electrostatic Sprayer and CDC approved disinfectant.

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## **Safety Drills**

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All mandated emergency drills will be conducted as per required procedures, eight (8) evacuation drills and four (4) lock-down drills.

Social distancing will be practiced throughout the drill as much as possible.

Mock drills will be conducted on a more frequent basis by classroom to practice evacuating using social distancing without causing unsafe situations.

In the event of a true emergency, getting children to safety as quickly as possible will take precedence.

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## **Aftercare Program**

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A limited Aftercare Program will follow all the Covid-19 policies as well as the policies and guidelines established by OCFS and NYSDOH.

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## **Facilities**

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A new MERV-11 filtration system has been installed for the buildings ventilation system. This will provide another level of protection that will assist in reducing the spread of Covid-19 virus.

MERV means, Minimum Efficiency Reporting Value. The filter ranges from 1-16. The higher the MERV value the more efficient the filter will be in trapping airborne particles.

Although the filtration system will not eliminate the virus, the MERV-11 (which is the maximum capacity for the system in the Center) which is also used in smoke removal, hospital inpatient care and general surgery rooms will assist in providing a filtration system which will further enhance protection against the spread of the virus.

*In addition, the facility also uses ultraviolet lights installed into the Rooftop unit and all air coming in to the facility runs through the UV lighting system and is considered effective in removing viruses from the air within the preschool*

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## **Nutrition**

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Snacks and lunch, which are provided by the parents, will be eaten in the classrooms. Students will eat at their desks, which are 6 feet apart from other students.

Students will be encouraged or assisted in washing their hands with soap and water prior to eating and again after they have eaten their meal or snack.

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## **Transportation**

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Transportation is not provided by the Center. This is provided by the counties that the children reside in. We will work together with each of the counties to provide safe and effective transportation for all of our children.

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## **School Schedules**

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### In- Person Model:

Our intention at this time is to provide In-Person instruction. Key components to this model have been outlined above.

### Remote Model:

If we are required due to changes in guidance, remote instruction will be as follows.

- Remote Instruction will be divided into two categories. One is educational and one is therapeutic
- Under the educational section the Special Education Teacher will provide a daily zoom class for all students.

- In addition, an individual session for each student will also be provided 3 times per week.
- Individual sessions will focus on the child's IEP goals
- Packets of informational work will be mailed out each week to the student. Teachers will review each packet with the child and parents during the individual session
- Therapeutic instruction will be provided following the mandates of the IEP. Each child will receive the required Speech, Occupational Therapy, Physical Therapy as well as Counseling sessions.
- This will be done remotely using the computer and telehealth

#### Hybrid Model:

A Hybrid model is a combined program using both In-Person and Remote learning.

- The student will be expected to attend school 3 days a week following the In Person model.
- This will include all of the health and safety precautions established in our In-Person model above.
- In addition, on alternate days, when not in attendance on site, the student will be receiving all mandated/required therapies utilizing the Remote Model for Telehealth.