

Parishville-Hopkinton Central School



District Reopening & In-Person Learning Plan 2021-2022

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New Member of PHCS Reopening Task Force for 2021-22:

Kate Cruikshank, *Assistant Principal*

The 2021-22 School Year Reopening Plan was completed in collaboration with SLL BOCES, North Country School Districts, and Public Health. Input from parent surveys indicated a need for return to in-person learning. Guidance from CDC, Public Health, and NYSED utilized.



Guiding Principles

Purpose

The purpose of this plan is to ensure the collective health and safety of Parishville-Hopkinton students and staff in the 2021-2022 school year. The health and safety of our students, staff, and their families is our top priority and we remain committed to doing our part to minimize the potential health and safety impact of COVID-19.

Considerations

The top priority will always be the safety of students, staff, and the greater community. A return to full In-Person learning is essential as remote learning highlighted inequities in education, was detrimental to the educational attainment of students of all ages, and exacerbated the mental health crisis among children and adolescents. We must have our students present for in-person learning opportunities, but it is imperative that we do so safely.

We understand the social, emotional, and mental health needs for in-person instruction. We recognize the value and importance of extracurricular activities and athletics. However, we must achieve the appropriate balance between safety and wellbeing. We believe this plan strikes that delicate balance.

Authority

The guidelines and recommendations contained in this document were formulated based on research from various sources in order to establish best practices. However, all directives and Executive Orders at the state level, and any guidance from the CDC or DOH will supersede the plans contained herein. Should changes occur, this document will be revised to reflect and incorporate them.

Flexibility

Our school district will need to be nimble and adapt to multiple scenarios and educational models depending on the current public health situation. In developing this document, we considered a number of possibilities in order to best plan for an uncertain future. However, as the COVID-19 crisis evolves, so too must our plans.

Priority Goal

It is the goal from the CDC and from the Parishville-Hopkinton CSD to have student, faculty, and staff physically present for in-person learning. Strategies for mitigating the transmission of the COVID-19 virus and variants will be layered, when feasible, but not to the detriment of in-person learning.

Responsibility

Superintendent Dr. William Collins will serve as the district's COVID-19 Coordinator for the 2021-2022 school year. Dr. Collins will work closely with our local health department and will be responsible for updating this plan. He will serve as a central contact for schools and stakeholders, families, staff, and other school community members and will ensure the district is in compliance and following the best practices per state and federal guidelines.

Health and Safety

Prevention Strategies to Reduce Transmission

CDC recommends that all teachers, staff and eligible students be vaccinated as soon as possible. However, schools have a mixed population of both people who are fully vaccinated and people who are not fully vaccinated. It is because of this that the CDC recommends universal indoor masking regardless of vaccination status at all levels of community transmission.

With input from Public Health, the school will consider multiple factors when making decisions about implementing layered prevention strategies against infection. Decisions will be based on the school population, families and students served, as well as factors among the community. The primary factors considered include:

- Level of [Community Transmission](#) of COVID-19.
- [COVID-19 vaccination coverage](#) in our community.
- Strain on the health system capacity in our area.
- COVID-19 outbreaks in the school or surrounding community.
- Information from screening testing in the school or community.

Strategies

CDC recommends universal indoor masking, physical distancing to the extent possible, and additional prevention strategies to protect students, teachers, and staff. Schools should not exclude students from in-person learning to keep a minimum distance requirement; layering multiple prevention strategies is essential when physical distancing of at least 3 feet is not possible at all times.

➤ Promote Vaccinations

COVID-19 vaccination among all eligible students as well as teachers, staff, and household members is the most critical strategy to help schools safely resume full operations.

Vaccination is the leading public health prevention strategy to end the COVID-19 pandemic. People who are fully vaccinated against COVID-19 are at low risk of symptomatic or severe infection. A [growing body of evidence](#) suggests that people who are fully vaccinated against COVID-19 are less likely to become infected and develop symptoms and are at substantially reduced risk from severe illness and death from COVID-19 compared with unvaccinated people.

Only a small proportion of fully vaccinated people get infected (breakthrough infections), even with the Delta variant. Moreover, when these infections occur among vaccinated people, they tend to be milder than among those who are unvaccinated. However, preliminary evidence suggests that fully vaccinated people who are infected with the Delta variant can be infectious and can spread the virus to others. To reduce the risk of becoming infected with the Delta variant and spreading it to others, students, teachers, and school staff should continue to use layered prevention strategies including universal masking in schools.

<https://www.vaccines.gov/>

Health and Safety

➤ Consistent and Correct Mask Use

When teachers, staff, and students consistently and correctly wear a mask, they [protect others as well as themselves](#). Consistent and [correct mask use](#) is especially important indoors and in crowded settings, when physical distancing cannot be maintained.

- Indoors: CDC recommends indoor masking for all individuals age 2 years and older, including students, teachers, staff, and visitors, regardless of vaccination status.
- Outdoors: In general, people do not need to wear masks when outdoors.

During school transportation: [CDC's Order](#) applies to all public transportation conveyances including school buses. Passengers and drivers must wear a mask on school buses, including on buses operated by public and private school systems, regardless of vaccination status, subject to the exclusions and exemptions in CDC's Order. Learn more [here](#).

The school will provide masks for any person who is in need of one.

➤ Physical Distancing

Because of the importance of in-person learning, schools should implement physical distancing to the extent possible within their structures but should not exclude students from in-person learning to keep a minimum distance requirement.

Based on studies from 2020-2021 school year, CDC recommends schools maintain at least 3 feet of physical distance between students within classrooms, combined with indoor mask wearing to reduce transmission risk. When it is not possible to maintain a physical distance of at least 3 feet it is especially important to layer multiple other prevention strategies, such as using information from testing, cohorting, improved ventilation, handwashing and covering coughs and sneezes, staying home when sick with symptoms of infectious illness including COVID-19, and regular cleaning to help reduce transmission risk.

➤ Ventilation

Improving ventilation is an important COVID-19 prevention strategy that can reduce the number of virus particles in the air. Along with [other preventive strategies](#), including wearing a well-fitting, multi-layered mask, bringing fresh outdoor air into a building helps keep virus particles from concentrating inside. This can be done by opening multiple doors and windows, using child-safe fans to increase the effectiveness of open windows, and using the HVAC system for increased air flow.

During transportation, open or crack windows in buses and other forms of transportation, if doing so does not pose a safety risk. Keeping windows open a few inches improves air circulation.

Health and Safety

➤ Handwashing and Respiratory Etiquette

All staff, students, and visitors to the school will engage in handwashing and [respiratory etiquette](#) (covering coughs and sneezes) to keep from getting and spreading infectious illnesses including COVID-19. The school will reinforce these behaviors and provide adequate hand washing supplies.

- Teach and reinforce [handwashing](#) with soap and water for at least 20 seconds.
- Remind everyone in the facility [to wash hands frequently](#) and assist young children with handwashing.
- If handwashing is not possible, use hand sanitizer containing at least 60% alcohol (for teachers, staff, and older students who can safely use hand sanitizer).

➤ Staying Home When Sick and Getting Tested

Students, teachers, and staff who have symptoms of infectious illness, such as [influenza](#) (flu) or [COVID-19](#), should stay home and be referred to their healthcare provider for testing and care, regardless of vaccination status. Staying home when sick with COVID-19 is essential to keep COVID-19 infections out of schools and prevent spread to others.

The school will educate teachers, staff, and families about when they and their children should [stay home](#) and when they can return to school. During the COVID-19 pandemic, it is essential that parents keep children home if they are showing signs and symptoms of COVID-19 and get them tested.

➤ Cleaning and Disinfection

In general, the school will be cleaned once a day to remove potential viruses that may be on surfaces. Disinfection will be done on a scheduled rotation and will be done more frequently if the facility has had a sick person or someone who tested positive for COVID-19.

➤ Contact Tracing in Combination with Isolation and Quarantine

With any known positive contact, the school will support Public Health and provide contact tracing. The school may support Public Health with notification to parents of the contact and quarantining process, but the school does not place students into isolation or quarantine; Public Health holds that responsibility.

At present, if an unvaccinated person is symptomatic, they must be evaluated by a healthcare provider within 48 hours and be tested. They must remain out of school until released by a healthcare provider. A vaccinated person who is in contact with a positive person should be tested within 3-5 days after the contact. A vaccinated person who is asymptomatic will not need to quarantine.

The quarantining procedures will remain flexible based on community spread and will be the responsibility of Public Health.

Health and Safety

➤ Screening Testing

If directed to do so, Parishville-Hopkinton will conduct screening testing on our unvaccinated employees. If directed to do so, we will engage in a voluntary screening testing of students. As the variants continue to spread among the community, this may be more necessary and thus, be a directive of the Governor.

➤ Cohorting

Cohorting means keeping people together in a small group and having each group stay together throughout an entire day. Cohorting can be used to limit the number of students, teachers, and staff who come in contact with each other, especially when it is challenging to maintain physical distancing, such as among young children, and particularly in areas of moderate-to-high transmission levels.

We will attempt to cohort our elementary students, when possible, for the majority of the day. Due to scheduling constraints, our middle and high schools will not be able to cohort.

Health and Safety

Additional Considerations

Additional to the prevention strategies, PHCS will take the following precautions concerning:

➤ Disabilities or Other Health Care Needs

Provide accommodations, modifications, and assistance for students, teachers, and staff with disabilities and other health care needs when implementing COVID-19 safety protocols:

- Consider accommodations consistent with ADA.
- Work with families to better understand the individual needs of students with disabilities.
- Remain accessible for students with disabilities:
 - Help provide access for direct service providers (DSP) (e.g., paraprofessionals, therapists, early intervention specialists, mental health and healthcare consultants, and others). If DSPs who are not fully vaccinated provide services at more than one location, ask whether any of their other service locations have had COVID-19 cases.
 - Ensure access to services for students with disabilities when developing cohorts.
- Adjust strategies as needed.

➤ Visitors

The school will make determinations to reduce or limit guests to the district based on school and community factors, such as community transmission, vaccination coverage, strain on the health system, and outbreaks in the community or school.

All visitors to the school will adhere to the policies.

➤ Food Service and School Meals

Staff should wear masks at all times during meal preparation and service, and during breaks except when eating or drinking.

Students should wear masks when moving through the food service line.

Maximize physical distance as much as possible when moving through the food service line and while eating (especially indoors). Using alternate spaces outside of the cafeteria for mealtime seating or outdoor seating can help facilitate distancing. Students should not be excluded from in-person learning to keep a minimum distance requirement, including during mealtimes.

Given very low risk of transmission from surfaces and shared objects, there is no need to limit food service approaches to single use items and packaged meals.

Clean frequently touched surfaces. Surfaces that come in contact with food should be washed, rinsed, and sanitized before and after meals.

Promote hand washing before, after, and during shifts, before and after eating, after using the toilet, and after handling garbage, dirty dishes, or removing gloves.

Improve ventilation in food preparation, service, and seating areas.

Health and Safety

➤ Recess and Physical Education

In general, people do not need to wear masks when outdoors (e.g., participating in outdoor play, recess, and physical education activities). CDC recommends people who are not fully vaccinated wear a mask in crowded outdoor settings or during activities that involve sustained close contact with other people. Fully vaccinated people might choose to wear a mask in crowded outdoor settings if they or someone in their household is immunocompromised. Universal masking is recommended during indoor physical education or recess.

➤ Sports, Music, and Other Extracurricular Activities

School-sponsored sports and extracurricular activities provide students with enrichment opportunities that can help them learn and achieve, and support their social, emotional, and mental health. Due to increased exhalation that occurs during physical activity, some [sports](#) can put players, coaches, trainers, and others at [increased risk](#) for getting and spreading COVID-19. Close contact sports and indoor sports are particularly risky. Similar risks might exist for other extracurricular activities, such as band, choir, theater, and school clubs that meet indoors.

Prevention strategies in these activities remain important and should comply with school day policies and procedures.

Coaches and school sports administrators should also consider specific sport-related risks:

- Setting of the sporting event or activity. In general, the risk of COVID-19 transmission is lower when playing outdoors than in indoor settings. Consider the ability to keep physical distancing in various settings at the sporting event (i.e., fields, benches/team areas, locker rooms, spectator viewing areas, spectator facilities/restrooms, etc.).
- Physical closeness. Spread of COVID-19 is more likely to occur in sports that require sustained close contact (such as wrestling, hockey, football).
- Number of people. Risk of spread of COVID-19 increases with increasing numbers of athletes, spectators, teachers, and staff.
- Level of intensity of activity. The risk of COVID-19 spread increases with the intensity of the sport.
- Duration of time. The risk of COVID-19 spread increases the more time athletes, coaches, teachers, staff and spectators spend in close proximity or in indoor group settings. This includes time spent traveling to/from sporting events, meetings, meals, and other settings related to the event.
- Presence of people more likely to develop severe illness. People at increased risk of severe illness might need to take [extra precautions](#).

Health and Safety

Procedural Emphasis

➤ Daily Health Screenings

All people entering our buildings will be reminded to self-evaluate their symptoms as they relate to COVID-19. If any are experiencing symptoms, then they should not enter the building and check with their healthcare provider.

Daily affirmations of a person's health will not be required to submit; however, the District will send periodic reminders of the symptoms of COVID-19 with the stipulation that they remain home if symptomatic.

Temperature scanners will be available for self-use.

Students entering the building during the normal entrance hours will be greeted by a staff member. Alcohol-based hand sanitizer will be available at entrances and classrooms for self-use.

Teaching and Learning

Instructional Models

➤ In-Person Learning

A return to full in-person learning is essential as remote learning highlighted inequities in education, was detrimental to the educational attainment of students of all ages, and exacerbated the mental health crisis among children and adolescents. We must have our students present for in-person learning opportunities, but it is imperative that we do so safely.

➤ Hybrid Learning

The hybrid learning model will not be utilized this year as the priority is to have students attend five-days per week, in-person.

➤ Remote Learning

Remote learning will not be a choice provided to families. In the past two years we have witnessed that children in this learning model have not had equitable experiences in their learning opportunities compared to students engaged with in-person learning.

Remote learning will take place when necessary for a group, class, grade-level or school. Quarantined students and/or students within the public health process will have access to their daily classroom instruction.

➤ Mandatory Quarantines

If an entire class, cohort, or school is under a mandatory quarantine, it's possible that the school will pivot to remote learning opportunities.

Individual students who are under a mandatory quarantine will have access to all classroom resources through their teachers' learning management system, such as Google Classroom. Access to instructional lessons, asynchronous learning opportunities, check-ins, and feedback will be provided.

➤ Additional Assistance

With the return to in-person learning we recognize that periodically our students may be subject to a mandatory quarantine. Others may need help reclaiming lost instructional time during the pandemic. We are prepared to provide additional assistance to students in need of extra help.

Social Emotional Learning/Mental Health

Mental Health For Students

Operating assumption: Every single member of our school community has experienced some sort of trauma associated with the COVID-19 pandemic—and some students may have lost loved ones, experienced food insecurity, or lost their home. We are ensuring that we have a strong plan to be socially and emotionally responsive.

The isolation brought about by social distancing can exacerbate children's depression and anxiety. As students return, we will have counseling support to address the numerous causes of trauma that result from the deaths of friends and family members, economic hardship from a parent losing his or her job, or abuse, violence, or neglect. The isolation brought about by social distancing can also exasperate children's depression and anxiety.

➤ Mental Health / Trauma Informed Practices

- We have a strong understanding of the current mental health crisis as a result of Covid-19. We are consulting with local mental health facilities to ensure that there are opportunities for referrals and services. We will perform classroom instruction where we will teach lesson plans on mental health and wellness.
- We established a comprehensive crisis management plan that leverages available internal and external/ community-based resources, which can be activated efficiently as needed following an acute incident (e.g., loss of student, loss of a school staff member).
- Counselors have a process for recommending students to our school social worker who have greater mental health needs.
- Our mental health counselor and school counselor already meets regularly with the administrative team and discusses counseling issues and student needs.
- Our Wellness Committee currently has a Mental Health Component, inclusive of counselors.
- Screening instructions (offered verbally to younger students) will provide age-appropriate and transparent disclosure of protocols in place to protect confidentiality while adhering to mandated reporting guidelines.
- Information to parents are included in newsletters, on the school website, Facebook and community emails.
- We already compile and regularly update comprehensive lists of wellness resources available to both staff and students that can be provided in conjunction with screening activities, and that references school and community wellness resources.
- We have designated mental health counselor/Community Schools director, April Fullerton, who will work across the district, local public health agencies, and community partners.

Social Emotional Learning/Mental Health

➤ Mental Health / Trauma Informed Practices (Continued)

- We will activate communication channels for district stakeholders to address mental health concerns resulting from COVID-19 (for example, a telephone hotline or a designated email).
- Communicate with parents and guardians, via a variety of channels, return to school transition information including:
 - Destigmatization of COVID-19;
 - Understanding normal behavioral response to crises;
 - General best practices of talking through trauma with children; and
 - Positive self-care strategies that promote health and wellness.
- We will be following ASCA and ACA recommendations closely, and pursuing training opportunities provided to us to ensure we are fully prepared to help students with their evolving mental health needs as a result of COVID.
- There are several PD opportunities and resources available through the local & state counseling associations.
- We have a District Trauma-Sensitive Team who are highly trained and are preparing an action plan for turnkey training to the entire staff.

➤ Staff Mental Health

- It is important that we thoughtfully plan for how to best support the well-being of educators. As educators' social-emotional state improves, they will better be able to support the social-emotional well-being and learning needs of their students.
- We have accounted for the well-being of our educators and staff as we continue to develop reopening plans.
- Considerations:
 - Provide time and space for individuals to process traumatic events, re-establish connections with each other, and receive support that promotes their healing.
 - Support educators' access to mental and behavioral resources and encourage them to utilize these services.
 - Create opportunities for staff to regularly practice and reflect on their social and emotional competencies.

Social Emotional Learning/Mental Health

Integrated Social-Emotional Learning

- Every students' academic and social-emotional needs will be addressed with the integration of Social and Emotional Learning (SEL) and strengthening connections with students.
- We will identify those for whom this transition might be exceptionally challenging. Students who lost family members or friends will still be grieving. Asian-American students in particular may have experienced racist physical or verbal attacks while school was closed, given the misconceptions associated with COVID-19. Students with disabilities who rely on structures and routines; students who have experienced trauma prior to the school closures, like refugee students or students with limited or interrupted formal education; and students who have lost housing or economic security during this transition might particularly struggle to return to school.
- Pre-K and younger elementary students might find it difficult to be separated from their parents or siblings after spending so much time with them.
- We plan to listen to students and families in planned transition meetings with families including input from sending and receiving teachers.
- Teachers will need quick, direct information on the social and emotional needs of each student from at least three sources: the classroom teachers from the prior year, the caregiver who has been with the student during the six-month gap in schooling, and the student themselves.
- Other teachers or support providers who might deeply know the student can also add their insights.
- We will keep in mind the following needs:
 - Loss of family and community members. Many students will return to school having personally experienced loss of family and community members. Students may be in various stages of grief and will have had different levels of support in processing the losses in their communities.
 - In particular, we know that Black and Latinx communities are suffering disproportionately more cases and deaths due to the COVID-19 virus, We should be prepared for Black and Latinx students to have suffered more loss and anxiety.
 - Returning to school after a longer-than-normal break will be challenging. We can anticipate many of the same social and emotional challenges from students that come with restarting school after the typical summer break, but in this case the break will be longer. This may mean that we should expect longer timelines to get students reacclimated to the rhythms of the school day and the expectations of being a student at school.
 - General anxiety from the end of social distancing. Students will be returning to school following an extended period of social distancing. There is variability in how students are experiencing social distancing and in the explanations for why social

Social Emotional Learning/Mental Health

distancing is important. In general, however, most students have probably grown used to maintaining 6 feet of distance and not gathering in groups larger than 10 people. Schools and teachers should be prepared for a period of transition as students reacclimate to entering a classroom of students. There will likely be developmental differences in the impact of this on students, with younger students requiring different accommodations than older ones.

- Experiencing a sudden end of school without the natural transition milestones of the end of year. Students did not have the opportunity to participate in the normal events and milestones that mark the end of an academic year. Many didn't realize when they said goodbye to teachers and classmates at the end of the day that they wouldn't be returning the next. While some students may be able to reconnect in virtual learning environments with their teachers and classmates, the sudden and abrupt way that schools closed may make restarting school more challenging than usual, especially for younger children. You may need to find ways to help younger students experience some of the closure events that they missed from the spring to help them successfully transition into a new school year.
- Disconnection as a result of the social separation from peers. Older children and adolescents who developmentally rely more heavily on peer relationships during stressful times may return to school feeling more disconnected or isolated from peers and potentially depressed. Isolating at home with only close family during a time when pre-teens and teens naturally begin to pull away from family members as their primary means of support may lead to increased tensions with family, leaving pre-teens and teens feeling isolated and alone. These feelings can increase the likelihood of depression and suicidal thoughts.
- Food insecurity. Students who rely on schools for breakfast and lunch may have been disconnected from their most stable source of food during the COVID-19 pandemic. While districts continued to provide meals, it's unclear how many of the students who typically accessed those resources were able to obtain them.
- Transportation may have prevented students from getting to schools where meals were served and communication about the availability of meals may not have reached the most vulnerable communities. In addition, community food banks, a regular source of food for families with food insecurities, are experiencing higher levels of demand and have less capacity to meet the demands given the requirements of social distancing. This means that students may be returning to school having experienced food shortages and insecurities at home during the pandemic. They will need reassurance about access and availability of food at school.
- Financial and housing insecurity. Unemployment is growing daily, and we are uncertain to what extent and how long it will take for the economy to recover following the COVID-19 pandemic. Students may return to the classroom with fears associated with caregivers' loss of employment and loss of housing.
- Concerns about racism, especially for Asian students. Asian students may be concerned about perceptions and misconceptions associated with COVID-19 and

Social Emotional Learning/Mental Health

- their peers. Media reports indicate that since the start of the COVID-19 pandemic, people of Asian descent have suffered racist physical and verbal attacks. Asian students may be concerned for their physical and emotional safety upon returning to school.
- Anticipatory grief and anxiety about the safety of caregivers who are essential workers. Students may enter the school year with caregivers or family members who spent the last six months putting themselves and their family at risk because they needed to work on the front lines as essential employees. Their caregivers or family members may still be working in conditions that increase their and their family's exposure to the COVID-19 virus. The anticipatory grief and long-term state of anxiety about the ongoing potential for exposure will likely create emotional trauma and stress that could manifest itself in different ways in the classroom.



- PHCS currently subscribes to the [Positivity Project](#). The mission of the Positivity Project is to empower America's youth to build positive relationships and become their best selves. Their vision is to partner with schools across the country and equip educators with the training, strategy, and resources to teach their student-positive psychology's 24 character strengths. While this program is currently used mostly at the elementary level, we plan to expand these ideals into the secondary level.
- We will support teachers in being clear and intentional about expectations and classroom routines. Teachers will post the schedule for the day and stick with it. We will give students time and space to get to know each other and get acclimated to their school community, even if they were members of it before the pandemic—and we will ensure that we have a plan to build community in our school, using proven approaches like restorative justice or community circles.
- We intend to use what is learned in individual transition meetings. Once teachers have information on the social and emotional needs of students, they will consider which of their students need the most intensive support to successfully transition back in to school.

Social Emotional Learning/Mental Health

- Our school will plan activities which support the transition of students for their 2020-2021 experience to the current school year. We recognize that our students have not experienced a 'normal' school routine since March of 2019, with our youngest students having never experienced school during a time without current COVID restrictions and safety measures in place. These activities will maximize relationship building student-student, student-teacher, and student-school.
- We will discuss our school closure plan in the event that schools must close again due to a second wave of infections. We have a district, school, and classroom plan in place and discuss with students what it will look like if schools should close again. This way, students are prepared and will know what they need to pack up at the end of a day if a sudden order comes down for districts to close again. Preparing students and teachers in advance will ease the transition to at-home learning should the need arise again.

School Safety and Violence Prevention

- According to the National Threat Assessment Center, breaks in attendance have an alarming effect on school violence.
- Incidents occurred most frequently at the start of the school year (Sep) or after students returned from winter break (Jan). Seventeen attacks (41%) took place within the first week back to school following a break in attendance, such as a suspension, school holiday, or an absence due to illness or truancy.
- Nearly one quarter of the attacks (n = 10, 24%) took place on the first day that the attacker returned to school after an absence. In two of these incidents, the attacker was actively suspended from the school at the time of the attack.
- These findings led us to consider making concerted efforts to facilitate positive student engagement following discipline, including suspensions and expulsions, and especially within the first week that the student returns to school.

Family Engagement

We will seek to actively include families and students in the decision-making process, teams, and meetings regarding interventions and supports. There will be ongoing consideration of families' capacity to provide in-home support for student and the provision of supports or accommodations that may be necessary to facilitate family participation.

- A key component of successfully reopening schools is meaningful family engagement. As district and school leadership teams look to return to in-person instruction, engaging parents and families in meaningful ways throughout the transition will create a more collaborative and successful path forward.

Social Emotional Learning/Mental Health

- Throughout reopening, it is important to connect students and families to wraparound services that will be critical in the upcoming academic year such as health care, mental health supports, child care, after-school enrichment programs, and other services to meet day-to-day needs. Authentic parent and family engagement involves understanding the needs of all children and families including our most vulnerable populations—students with disabilities, English Learners, migrant students, students experiencing homelessness, students in foster care, economically disadvantaged students, and students most directly affected by COVID-19.
- Meeting a range of needs can be accomplished by involving a diverse group of parents and families in the planning for reopening, from the initial conversations. This type of active and authentic parent engagement in the decision-making process builds trust and credibility for the final plan.
- In conducting family engagement, we will consider the following:
 - Administer a survey to parents in our district in multiple languages based on our district's demographics to assess the needs of families during the reopening phase. Consider using multiple platforms to administer this survey.
 - Involve parents/guardians in district- and school- level planning teams. Communicate plans in writing, in multiple languages based on our district's demographics outlining our plans for the upcoming academic year, including our expectations for students and families. We will use multiple platforms to disseminate this information.
 - Establish, strengthen, or continue valuable partnerships with municipal recreation departments and adult education programs, local community service organizations, nonprofits, businesses, cultural organizations, religious organizations, and state agencies such as the Office of Children and Families.
 - Utilize county-based resources such as the Childcare Council to assist in making connections to organizations serving the local community.
 - Conduct virtual home visits during the pandemic as a way for teachers to learn more about the families of their students, get the parents more involved in their child's education, and bridge cultural gaps that may exist.

Digital Equity and Access

Digital Equity

Each child is provided with the same style of device (Chromebook) for use during school. There is an expectation at some grade levels that this device will travel back & forth between home and school each day. The care of this device is critical to our ability to provide equity to each child.

➤ Expectations for Teachers

- Teachers will prepare engaging learning opportunities.
- Teachers will share clear expectations and grading policy for class.
- Teachers will set clear due dates.
- Teachers will assign meaningful tasks and provide timely feedback.
- Teachers will support the students and family throughout their learning experiences.

➤ Expectations for Students

- Students will be ready for class, prepared for learning.
- Grading will be reflective of student work, progress, engagement, and assessment.
- Students will review the ground rules for remote learning (if necessary) and review the syllabus.
- Students will respond to each academic assignment or assigned task with substantive work.
- Responses to requests need to be timely and connected to topics that are current. Timeliness is critical to the feedback process.
- Students are expected to utilize their learning opportunities daily.

➤ Remote Learning Etiquette (when necessary)

- Behaviors are consistent with a school setting.
- Ideally, students should be in a location conducive to learning; at a desk or table with minimal distractions.
- Attire should be consistent with the school dress expectations.
- Promptness and preparedness to learn is essential for all meetings.
- Engagement in remote learning is imperative. Chat features or discussion is required.
- All attendees are expected to have their camera turned on at all times, focused on the face.
- Positive attitude and good manners are a must.

➤ Technical Issues Procedures

- Email helpdesk@phcsd.org or call the school office. Describe your technical problem.
- Contact instructors describing how your problem impacts their class.
- Students are encouraged to use their school-issued gmail account and Chromebook to complete tasks.
- Students are responsible for making up missed assignments.

Digital Equity and Access

Access

The school is a partner to assist families with obtaining the necessary access for remote learning, when necessary. The schools may provide a “Kajeet” to support this endeavor. Kajeets are school issued and it is the expectation that they will return to school unblemished.

➤ *Kajeet*

To support schools and districts with their student connectivity needs, Kajeet has created Distance Learning Bundles. We have taken our trusted wireless solutions, the Kajeet SmartSpot® and Sentinel-Ready™ LTE Chromebook, and bundled them with flexible data plans ideal for distance learning and blended learning initiatives.