

Entity ID	CTDS	LEA NAME
4472	130240000	Seligman Unified School District #40

How the LEA will maintain the health and safety of students, educators, and other staff and the extent to which it has adopted policies, and a description of any such policies, on each of the following safety recommendations established by the Centers for Disease Control and Prevention (CDC)

established by the Centers for Disease Control		
CDC Safety Recommendations	Has the LEA Adopted a Policy?	Describe LEA Policy:
CDC Salety Recommendations	(Y/N)	Describe LEA Policy.
Universal and correct wearing of masks Modifying facilities to allow for physical distancing (e.g., use of cohorts/podding)	Y Y	Facing coverings are option and will only be required as per local, state or federal mandate. Maintained modifying seating in classrooms and lunchrooms to allow social distancing.
, , , , , , , , , , , , , , , , , , ,		Educational and school day changes were made to allow cohorting of students.
Handwashing and respiratory etiquette	У	 A procedure was developed and maintained that included: Everyone will use hand sanitizer coming in and out of their classrooms. Hand sanitizers were included by exit/entrances off all hallways and cafeteria. Explicit instruction on hygiene on handwashing, coughing, sneezing
Cleaning and maintaining healthy facilities, including improving ventilation	Y	 Water bottle filling stations are available for students to use. Students will be encouraged to bring labelled water bottles Cases of bottled water are provided in each classroom and athletic facility Continued increased sanitation of classroom furniture, cafeteria furniture and outside tables, offices, bathrooms, and nurses office Purchased large water based cooling fans for both sides of the gym for increased ventilation Hand sanitizers available in all classrooms, and hallways, cafeteria
Contact tracing in combination with isolation and quarantine, in collaboration with the State, local, territorial, or Tribal health departments	У	 District will follow CDC and AZDHS Release from isolation and Quarantine guidelines Students and staff that have close contact with a person infected with COVID-19 must quarantine for 14 days Close contact is when a person is within 6 feet of an infected person for a cumulative total of 15 minutes over a 24-hour period

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		 Students and staff are not subject to quarantine if they are fully vaccinated or have had COVID-19 within the previous 90 days. In either case, documentation is required. Students and staff that test positive for COVID-19 must isolate for 10 days from the onset of symptoms or from the test day if asymptomatic Contact tracing conducted by district RN in conjunction with the county health department
Diagnostic and screening testing	у	Test kids with nurse for staff only
Efforts to provide vaccinations to school	у	Vaccinations were offered on-site for all staff
communities		through the county health department
Appropriate accommodations for children	у	All procedures developed were universal for all
with disabilities with respect to health and		children. If children with Special Needs were not
safety policies		able to attend school would receive services to
		meet their IEP requirements
Coordination with State and local health	У	Coordinated contact tracing, vaccinations,
officials		information regarding spread of COVID-19
		provided by county health department

How the LEA will ensure continuity of services, including but not limited to services to address students' academic needs and students' and staff social, emotional, mental health, and other needs, which may include student health and food services

How the LEA will Ensure Continuity of Services?

Coordinated contact tracing, vaccinations, information regarding spread of COVID-19 provided by county health department

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Students' Needs:	
Academic Needs	 Instruction as normal for in-person learning; Google classroom for students infected or under quarantine
Social, Emotional and Mental Health Needs	 SE counseling services provided to school from the county No restrictions on after school activities including athletics No restriction on assemblies
Other Needs (which may include student health and food services)	 No restrictions on the preparation of services of food in cafeteria and classrooms other than normal health department requirements
Staff Needs:	
Social, Emotional and Mental Health Needs	 Staff social needs will be met with regular in-person (with a virtual option) grade level meeting and school staff meeting Mental health services are available to staff through the EAP (Employee Assistance Program)
Other Needs	NΛ

The LEA must regularly, but no less frequently than every six months (taking into consideration the timing of significant changes to CDC guidance on reopening schools), review and, as appropriate, revise its plan for the safe return to in-person instruction and continuity of services through September 30, 2023

Date of Revision	March 30, 2023
Public Input	



Describe the process used to seek public input, and how that input was taken into account in the revision of the plan:

Public input will be gathered through staff meetings, parent/teacher conferences, and through public input at regular governing board monthly meetings

U.S. Department of Education Interim Final Rule (IFR)

(1) LEA Plan for Safe Return to In-Person Instruction and Continuity of Services

- (a) An LEA must describe in its plan under section 2001(i)(1) of the ARP Act for the safe return to in-person instruction and continuity of services—
 - (i) how it will maintain the health and safety of students, educators, and other staff and the extent to which it has adopted policies, and a description of any such policies, on each of the following safety recommendations established by the CDC:
 - (A) Universal and correct wearing of masks.
 - (B) Modifying facilities to allow for physical distancing (e.g., use of cohorts/podding)
 - (C) Handwashing and respiratory etiquette.
 - (D) Cleaning and maintaining healthy facilities, including improving ventilation.
 - (E) Contact tracing in combination with isolation and quarantine, in collaboration with the State, local, territorial, or Tribal health departments.
 - (F) Diagnostic and screening testing.
 - (G) Efforts to provide vaccinations to school communities.
 - (H) Appropriate accommodations for children with disabilities with respect to health and safety policies.
 - (I) Coordination with State and local health officials.
 - (ii) how it will ensure continuity of services, including but not limited to services to address students' academic needs and students' and staff social, emotional, mental health, and other needs, which may include student health and food services.

(b)(i) During the period of the ARP ESSER award established in section Start Printed Page 212022001(a) of the ARP Act, an LEA must regularly, but no less frequently than every six months (taking into consideration the timing of significant changes to CDC guidance on reopening schools), review and, as appropriate, revise its plan for the safe return to in-person instruction and continuity of services.

- (ii) In determining whether revisions are necessary, and in making any revisions, the LEA must seek public input and take such input into account
- (iii) If at the time the LEA revises its plan the CDC has updated its guidance on reopening schools, the revised plan must address the extent to which the LEA has adopted policies, and describe any such policies, for each of the updated safety recommendations.
- (c) If an LEA developed a plan prior to enactment of the ARP Act that meets the statutory requirements of section 2001(i)(1) and (2) of the ARP Act but does not address all the requirements in paragraph (a), the LEA must, pursuant to paragraph (b), revise and post its plan no later than six months after receiving its ARP ESSER funds to meet the requirements in paragraph (a).
- (d) An LEA's plan under section 2001(i)(1) of the ARP Act for the safe return to in-person instruction and continuity of services must be—
 - (i) In an understandable and uniform format;
 - (ii) To the extent practicable, written in a language that parents can understand or, if it is not practicable to provide written translations to a parent with limited English proficiency, be orally translated for such parent; an
 - (iii) Upon request by a parent who is an individual with a disability as defined by the ADA, provided in an alternative format accessible to that parent

