

## Safe Return to In-person Instruction and Continuity of Services Plan

## Addendum Guidance

LEAs are required to update the Safe Return to In-Person Instruction and Continuity of Services Plan every six months through **Sept. 30, 2023.** Each time, LEAs must seek public input on the plan and any revisions and must take such input into account. The purpose of the plan is to keep stakeholders informed.

Every LEA should complete the addendum and upload in the LEA document library and post to the LEA's website (February 1 and August 27). Like the development of the plan, all revisions must be informed by community input and reviewed and approved by the governing body prior to posting on the LEA's publicly available website.

Please consider the following when completing the addendum:

- Ensure the LEA used multiple models of engagement offered to stakeholders. Examples may include surveys, in-person or virtual committee meetings, town hall meetings, or other inclusive engagement opportunities.
- LEAs should engage all applicable groups noted in meaningful consultation during the crafting of the plan.
- The number of stakeholders engaged should represent the composition of students. For example, if students with disabilities make up 15 percent of students, then 10-20 percent of respondents should represent this subgroup.
- Ensure the stakeholder engagement happened prior to the development/revision of the plan.
- The LEA must engage the health department in the development of the plan. This is not the same as providing the health department with COVID-19 numbers.
- Plans must explicitly address every bullet point in Question 3 regarding district policies and strategies.
- Plans require local board approval and public posting.
- LEAs must update the *Safe Return to In-Person Instruction and Continuity of Services Plan* at least every six months through Sept. 30, 2023, seek public input on the plan and any revisions and take such input into account. All revisions must include an explanation and rationale of why the revisions were made.
- All revisions must include an explanation and rationale, with meaningful public consultation, and in an understandable format The American Rescue Plan (ARP) Act requires LEAs to post their Health and Safety Plans online in a language that parents/caregivers can understand, or, if it is not practicable to provide written translations to an individual with limited English proficiency, be orally translated. The plan also must be provided in an alternative format accessible, upon request, by a parent who is an individual with a disability as defined by the Americans with Disabilities Act.

## Safe Return to In-Person Instruction and Continuity of Services Plan Addendum

The Elementary and Secondary School Emergency Relief 3.0 (ESSER 3.0) Fund under the American Rescue Plan (ARP) Act of 2021, Public Law 117-2, was enacted on March 11, 2021. Funding provided to states and local educational agencies (LEAs) help safely reopen and sustain the safe operation of schools and address the impact of the coronavirus pandemic on the nation's students.

In the fall of 2021, LEAs developed and made publicly available a Safe Return to In-Person Instruction and Continuity of Services Plan. All plans were developed with meaningful public consultation with stakeholder groups. LEAs are required to update the plan every six months through September 30, 2023 and must seek public input on the plan and any revisions and must take such input into account. LEAs also must review and update their plans whenever there are significant changes to the CDC recommendations for K-12 schools and to ensure the plan is current. Like the development of the plan, all revisions must be informed by community input and reviewed and approved by the governing body prior to posting on the LEA's publicly available website.

The following information is intended to update stakeholders and address the requirement.

LEA Name:	Rhea	County	1
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Date: 1/24/22

1. Describe how the LEA engaged in meaningful consultation with stakeholders in development of the revised plan.

Rhea County Department of Education has had ongoing conversations and collected input through various methods of interaction. These methods include surveys of parents/guardians, school principals, teachers, and various staff members throughout the district. All surveys are tabulated by district staff members and shared with anyone requesting to know the survey results. The district staff also conducts pulls the survey results and presents the Director responses that continue to appear or responses that we fill would make a positive impact on our district and the health crisis that we are in. The Rhea County School Board members also continue to provide opportunities at each monthly board meeting for student/parent input regarding the new year school plans. District discussions are regular in nature when planning to address attendance for the rest if the 2021-2022 school year and the 2022-2023 school year. Additionally, the school plan for re-opening for will continue to be made available in English and Spanish through the district website, Facebook, Twitter, and the local newspaper. Parents are always encouraged to notify the school district office if they needed help in understanding the new protocols for school. The district website also provides contact information for anyone needing help in processing through the school plans. After the initial surveys were sent out in 2021, the communication with stakeholders has been ongoing. Rhea County has made special efforts to let our stakeholders know that their opinions are valued and needed. We have received continual feedback through emails, phone calls meetings, and surveys.

## 2. Describe how the LEA engaged the health department in the development of the revised plan.



We have meaningful conversations with the health department weekly by phone. The conversations revolve around how best to respond to the current COVID conditions.



3. Provide to the extent to which the LEA has updated adopted policies and a description of any such policies on each of the following health and safety strategies.

Appropriate accommodations for children with disabilities with respect to health and safety policies

Rhea County has not made any changes in regards to our protocol with respect to health and safety policies for our children with disabilities. We have been very intentional in disinfecting and social distancing. Our SPED Coordinators have had ongoing conversations with the guardians of the these students and are ready and willing to adjust the protocol if needed.

Physical distancing (e.g., use of cohorts/podding)

*Rhea County has not made any changes to our physical distancing protocol. As our number go up with this latest strand of the virus, we will be listening to our stakeholders and make adjustments as needed.* 

Hand washing and respiratory etiquette

Rhea County will continue encouraging hand washing and respiratory etipuette. We will not be changing our protocol unless we hear from our stakeholders that a need is needed. Communication is encouraged by phone, email, monthly meetings, and sureveys.

Cleaning and maintaining healthy facilities including improving ventilation

Rhea County will continue the current protocol of sanitizing schools and buses. Our custodians are cleaning and disifecting multiple times per day. School bus drivers are sanitizing their buses multiple times per day. Hand disinfectant is easily located in all facitlities. No changes will be make unless we hear from our stakeholders that an adjustment is needed.

Contact tracing in combination with isolation and quarantine

The Rhea County Health Department is conducting all contact tracing and Rhea County School District is following all recommendations for contract tracing. Rhea County school district is following the CDC guidelines for isoloation and quarantine.

Diagnostic and screening testing

*Rhea County recently applied for and received a grant that would allow for us to test for COVID in the schools. We are currently working on the implementation.* 

Efforts to provide vaccinations to educators, other staff, and students, if eligible

*Rhea County did provide times during the school day for our educators to be vaccinated at our local health department. We have not provided any student vaccinations due to a lack of stakeholder support.* 

Universal and correct wearing of masks

Rhea County has not changed the recommendation of mask wearing. We have not shifted to a stricter view due to the vast majority of our stakeholders indicating that mandatory mask wearing is not what they want.

4. Provide a current description as to how the LEA is ensuring continuity of services including but not limited to services to address the students' academic needs, and students' and staff social, emotional, mental health, and other needs, which may include student health and food services.



Rhea County is continuing to conduct school in the traditional sense with the students and staff reporting to school for in-person learning. We feel that it is in the student's best interest to be at school to address their academic needs and to keep a close watch on their mental health. Students that are absent due to quarantine or absent due to illness will be given the opportunity to continue their school work through Google Classroom. In regardes to mental health, we feel that mental health issues are much easier to detect and assist with when personal relationships are made with the school personnel. It is very difficult to detect a student with a mental health crisis virtually. Therefore, we are striving to stay in school. The students that are struggling with depression or anxiety can see a representative from Cornerstone Behavorial Health or spending some time with the newing hired behavioralist.