

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: Newport City School System_____

Date: February 1, 2021_____

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

Similar to the initial plan, a survey was developed and posted publicly requesting stakeholder input. The survey was developed in a way that would indicate whether the respondent was a student, family member, school staff member, or public official. Other questions helped to determine subgroup affiliations and/or association with rights organizations. The survey was administered directly by district administration in various public meetings, during parent meetings, and open to the public for participation. Additionally, school staff were emailed regarding their opportunity to take the survey. During this review, additional student input was possible because of having more students on campus during this period, as compared to the summer survey, allowing for 50% of each of grades 6-8 to complete the feedback tool. The district continues to open participation in feedback to all members of stakeholder groups, including posting the feedback survey publicly, through school-family communication platforms, providing print copies when necessary, allowing feedback submissions, and engaging in discussions at School Board meetings.

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

For the 2020-2021 school year, the Health Department and district Health Coordinator partnered to do contact tracing. The health department sent the Health Coordinator notifications when the district had a positive or exposed student (per parent permission). The Health Coordinator provided a line list of exposed students to the Health Department when a positive or exposed student was at school 48 hours prior to the test result. For the 2021-2022 school year, the Health Department has discontinued contract tracing.

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.

<i>Appropriate accommodations for children with disabilities with respect to health and safety policies</i>
<i>Beyond the current health and safety protocols in place for the district, Newport City School System staff utilize enhanced cleaning and safety protocols in working with medically fragile students. Additionally, the district uses enhanced social distancing practices, cohorting of students, and encouraging continued voluntary masking. The district has also hired additional educational assistants to reduce student:adult/teacher ratios in efforts to provide additional protections through cohorting and smaller group instruction.</i>
<i>Physical distancing (e.g., use of cohorts/podding)</i>
Students continue to be cohorted throughout the day so that they are with the same group of students all day. Classrooms are set-up so that students can maintain a comfortable distance from one another in order to minimize spread from droplets being expelled. Students are also spaced out in the cafeteria while they are eating breakfast and lunch.
<i>Hand washing and respiratory etiquette</i>
Proper handwashing technique continues to be encouraged, and monitored, by school staff.
<i>Cleaning and maintaining healthy facilities including improving ventilation</i>
Air purifiers are continuing to be used in all classrooms. Teachers continue to have students wipe down desks and chairs in-between classes with disinfecting wipes. Custodial class uses spray disinfectant multiple times a week on classrooms and common areas.
<i>Contact tracing in combination with isolation and quarantine</i>
The School Health Coordinator continues to collect information from families, doctors' offices, and the health department pertaining to students and staff who need to be excluded from school attendance. The length of time that one must be excluded from attendance depends on their contact with positive cases. The school follows CDC guidelines if a doctors' office does not provide a return to school date. The School Health Coordinator contacts school administration in the event that a student is at school and needs to be excluded from attendance. They are immediately removed from the classroom and walked to the Isolation Room to await pick-up.
<i>Diagnostic and screening testing</i>
The school nurse has been trained and equipped with Covid-19 PCR screening tests, and is now able perform them on staff and students. If a student or staff member presents with symptoms, they are given the option to be tested by the nurse or to go to a medical facility to be tested. This has allowed for quicker identification within the school of positive cases.
<i>Efforts to provide vaccinations to educators, other staff, and students, if eligible</i>
Local health care agencies continue to provide vaccines and boosters to all eligible individuals. Students and staff are made aware via email, social media, and/or parent-school communication tools when a vaccination clinic is being held. Additionally, the School Health Coordinator has worked with local health providers to set up vaccination opportunities for staff members. These include flu and other vaccines being offered, as well as after school opportunities for staff members seeking initial or booster doses of Covid-19 vaccine. The opportunities include both on and off-campus vaccination clinics to meet the needs of those interested.
<i>Universal and correct wearing of masks</i>

At this time, the school board can no longer require students, staff, or visitors to wear masks inside the building per Tennessee legislation. However, the district continues to make available masks for those who wish to wear them, as well as encouraging (but not requiring) them to be worn based upon CDC guidance and current levels of risks within the school.

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.

Teachers and students continue to incorporate technology into the teaching and learning process on a weekly basis. This will allow for a smooth transition in the event a student, grade-level, or the entire school goes remote. There are currently multiple interventionists who are working with students who are showing gaps in their learning. Students are identified using AimsWeb as a universal screener.

When students are excluded from school attendance, every effort is made to provide them with access to the materials being studied in their classes. This is done using packets, textbooks, and/or chromebook technology, as well as access to internet hotspots when needed.

Work continues on establishing a school-based mental health liaison to help students in need of counseling. The school counselors meet with students identified by staff or parents as in need of an outlet for their emotional well-being.

Currently, all students who are at school are offered free breakfast and lunch.