

# Safe Return to In-person Instruction and Continuity of Services Plan Addendum Guidance 2023

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, local education agencies (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 it to ePlan in the LEA document library and post it to the LEA's website (**March 1 and Sept. 15**). 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 and when making any significant revisions or updates to 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 and revision of the plan. This is different from 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) helps 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 Sept. 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 and ensure they align with any significant changes to CDC recommendations for K-12 schools. 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: Dyersburg City Schools

Date: September 2023

### 1. Describe how the LEA has continued to engage in meaningful consultation with stakeholders in the development of the revised plan.

Dyersburg City Schools seeks feedback from a variety of stakeholders when revising our plan for SAFE RETURN to IN-PERSON INSTRUCTION AND CONTINUTITY OF SERVICES. Multiple modes of feedback were sought in the revision process including but not limited to: in-person meetings, COVID task force, surveys, zoom meetings, town-hall meetings, emails, etc. Each group consisted of a diverse set of stakeholders that were representavive of our school population including children with disabilities, English language learners, children who experience homelessness, children in foster care, children who are incarcerated, and other underserved populations.

\*\*\* After communicating this plan again with stakeholders, it was determinied that there is no need for revisions to the plan at this time.

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

Dyersburg City Schools utilizes a COVID task force to collect input from various stakeholders during this revision process as well. This input consists of local physicians, school staff, local health department members, local and state government officials, regional health experts, as well as our school nurses.

**3. Provide 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>
Using layers of protection to reduce risk is an important accommodation for children with disabilities especially for children and teens with special health needs. It is important to use different layers of protection together to reduce the risk of spreading COVID-19. Safer space. Avoid the 3 Cs: closed spaces, especially those with poor air flow where physical distancing alone may not be enough; crowded places, inside and outside; and close-contact, especially while singing, exercising and other activities that can raise the spread of respiratory droplets that can carry the SARS-CoV-2 virus. For students with special needs we will try to maintain a 6-foot distance from others.
<i>Physical distancing (e.g., use of cohorts/podding)</i>
Physical distancing is utilized per grade level when and where possible. Depending on the level of community and school transmission as reported by the number of daily cases per 100K and watching this trend over a 14 day period, students may be cohorted in pods of students to limit interaction among groups of students
<i>Hand washing and respiratory etiquette</i>
Students are educated on hand hygiene. Hand washing is encouraged prior to eating or drinking and following the use of multi-used or shared surfaces such as playground equipment, art supplies, etc. Hand sanitizer is provided at all times in multiple locations. Respiratory etiquette is taught for all students. Students are taught to use elbows or tissues for respiratory droplets while coughing or sneezing.
<i>Cleaning and maintaining healthy facilities including improving ventilation</i>

<p>Custodians and teachers are educated for increased cleaning and disinfection of areas such as classrooms, communal dining, cafeterias, restrooms, locker rooms, office areas, break areas, desks, etc. Signs are on teacher’s doors to children and remind to wash their hands often, for at least 20 seconds. We keep plenty of hand soap, tissues, wipes, and hand sanitizer on hand for everyone in your home to use. When the weather allows, increase fresh outdoor air by opening windows and doors. Use of fans to increase the effectiveness of open windows.</p>
<p><i>Contact tracing in combination with isolation and quarantine</i></p>
<p>School nurses give TDOH guidance to parents/staff regarding the most recent recommendation by the CDC for isolation and quarantine.</p>
<p><i>Diagnostic and screening testing</i></p>
<p>All symptomatic students and staff are eligible COVID testing on site. Students all received a parent permission form at the beginning of school, but also require additional parent verbal permission prior to testing. Antigen testing is used with results back with in 10-15 minutes. All test are entered into the TDOH redcap website</p>
<p><i>Efforts to provide vaccinations to educators, other staff, and students, if eligible</i></p>
<p>Vaccinations are offered to those eligible staff members on campus as well as off-campus by our health department and a partnering pharmacy. Booster vaccinations are also offered by our partnering pharmacy.</p>
<p><i>Universal and correct wearing of masks</i></p>
<p>In accordance with the CDC and the Tennessee Department of Health, Dyersburg City Schools allows universal indoor masking for all teachers, staff, students, and visitors for K-12 schools regardless of vaccination status. Masks should be non-valved, surgical or multi-layered cloth masks that completely cover the nose and mouth. Current TN legislation does not allow for a mask mandate unless we reach a threshold of 1000 positive cases per 100K over a 14 day period.</p>

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

Dyersburg City Schools will offer 180 days of in-person learning for all students. In addition to offering in-person instruction for all students, Dyersburg City Schools employs a Behavior Specialist at each of our campuses to address the social, emotional, and mental health needs of our students. Food Service will continue to offer free meals to all students during the 2022-23 school year to ensure that no child goes hungry.