

## Q & A - Returning to In-person Instruction in Schools Interactive Table of Contents

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## **Q & A - Reopening concerns – FAPE, Evaluations, Re-evaluations, IEP’s**

### ***What services and programs are districts required to provide for Pre-K aged students with IEP’s?***

Students with disabilities ages three through five are afforded the right to a free appropriate public education (FAPE) in the least restrictive environment (LRE). Services are defined in the individualized educational program (IEP) and are tailored to each student’s strengths and needs.

School districts must provide a free and appropriate public education (FAPE) consistent with the need to protect the health and safety of students with disabilities and those individuals providing education, specialized instruction, and related services to these students. The current unique and ever-changing environment may affect how educational and related services and supports are provided.

Federal disability law allows for flexibility in determining how to meet the individual needs of students with disabilities; however, if services continue to be provided to the general student population during a school closure, the school must ensure that students with disabilities also have equal access to the same educational opportunities, including the provision of FAPE. [28 CFR § 35.130]. In addition, the U.S. Department of Education (DOE) has made it clear that "ensuring compliance with IDEA [Individuals with Disabilities Education Act] should not prevent any school from offering educational programs through distance instruction."

*Source: <https://tats.ucf.edu/wp-content/uploads/sites/9/2020/03/Supple-Fact-Sheet-3.21.20-FINAL.pdf>  
Primary Source: Supplemental Fact Sheet Addressing the Risk of COVID-19 in Preschool, Elementary, and Secondary Schools While Serving Children with Disabilities, UNITED STATES DEPARTMENT OF EDUCATION, Office for Civil Rights Office for Special Education and Rehabilitative Services, March 21, 2020*

Per the Florida Executive Order (Number 20-52) (DOE Order 2020-EO-06) related to reopening schools: Pursuant to the authority granted in section 1001.10(8), Florida Statutes, school districts and charter school governing boards must provide the full array of services that are required by law so that families who wish to educate their children in a brick and mortar school full time have the opportunity to do so; these services include in-person instruction (barring a state or local health directive to the contrary), specialized instruction and services for students with Individualized Education Programs (IEPs) or live synchronous or asynchronous instruction with the same curriculum as in-person instruction and the ability to interact with a student’s teacher and peers as approved by the Commissioner of Education.

### ***If a student’s access to instruction changes (face-to-face, virtual) should the IEP be amended?***

Every student with a disability is entitled special education services based on their individualized education program (IEP). It may not be feasible, depending on the needs of the individual student to adhere both to distancing and safety guidelines and the criteria outlined in a specific IEP. Attempts to meet physical distancing guidelines while addressing the needs of the

individual student and may require creative solutions, often on a case-by-case basis. Additional supports and accommodations should be considered if changes in instructional or therapy techniques are needed in order to maintain best practices for a student's health and safety.

The decision to amend an IEP should be based on data along with input from teachers, therapists, family members, and professionals. Collaborate with family members related to concerns they have about addressing their child's health and physical needs. Keep documentation of all parent conferences. District staff should be consulted regarding guidelines for considering the amendment of a student's IEP.

Example 1: A student's goal addresses imitating speech sounds following a visual (mouth) and sound model. If masks are worn and the therapist is unable to present a clear model, consider providing the model using photos and recordings of the teacher or therapist producing the sound. Look online for example lessons that show production of specific sounds. The method of access to instruction should be documented along with the student's performance. However, changing the goal and objectives on the IEP would not necessarily be required.

Example 2: A student's goal addresses sequences of motor movements related to self-care (steps of toileting, handwashing, and self-feeding). The student is accessing instruction remotely. The therapist and teacher collaborate regarding instruction so that a prompting hierarchy of verbal, visual, and physically modeled movements can be provided consistently. The student often requires physical assistance during some steps of the self-care sequences (hand-over-hand, guiding to begin a motion, steadying from the elbow). Because of instructional access being provided remotely the therapist and teacher might consider coaching the family members who assist the student at home. A component of the coaching can be recorded videos to support the family in their efforts to provide prompts, as well as copies of visuals used. The method of access to instruction should be documented along with the student's performance. A change in the goal on the IEP would not necessarily be required at this time.

***Will requirements for eligibility/IEP timelines (i.e. consent for evaluations, evaluations, reevaluations) change or be waived?***

### **Individualized Education Programs (IEPs)**

If a child has been found eligible to receive services under the IDEA, the IEP Team must meet and develop an initial IEP within 30 days of a determination that the child needs special education and related services. [34 C.F.R. § 300.323(c)(1)].

IEPs also must be reviewed annually. [34 C.F.R. §300.324(b)(1)]. However, parents and an IEP Team may agree to conduct IEP meetings through alternate means, including videoconferencing or conference telephone calls. [34 C.F.R. §300.328]. School teams and parents are encouraged to work collaboratively and creatively to meet IEP timeline requirements. Keep documentation conferences and contacts with students' parents/guardians.

In making changes to a student's IEP after the annual IEP Team meeting, because of the COVID-19 pandemic, the parent of a student with a disability and the public agency may agree to not convene an IEP Team meeting for the purposes of making those changes, and instead

develop a written document to amend or modify the student's current IEP. [34 C.F.R. §300.324(a)(4)(i)]. Refer to your district for specific documents that address notice of changes to IEP without an IEP meeting.

*Source: <https://tats.ucf.edu/wp-content/uploads/sites/9/2020/04/qa-covid-19-03-12-2020.pdf> Primary source: Questions and Answers on Providing Services to Children with Disabilities during the Coronavirus Disease 2019 Outbreak, UNITED STATES DEPARTMENT OF EDUCATION, Office for Civil Rights Office for Special Education and Rehabilitative Services March 12, 2020*

### **Reevaluations**

A reevaluation of each student with a disability must be conducted at least every three years, unless the parents and the public agency agree that a reevaluation is unnecessary [34 C.F.R. § 300.303(b)(2)]. However, when appropriate, any reevaluation may be conducted through a review of existing evaluation data, and this review may occur without a meeting and without obtaining parental consent, unless it is determined that additional assessments are needed. [34 C.F.R. §300.305(a)]. Consult with district staff for specific district guidelines and procedures. It is important to document contacts with and information shared with families related to the procedures included in the reevaluation process.

*Source: <https://tats.ucf.edu/wp-content/uploads/sites/9/2020/03/Supple-Fact-Sheet-3.21.20-FINAL.pdf> Primary Source: Supplemental Fact Sheet Addressing the Risk of COVID-19 in Preschool, Elementary, and Secondary Schools While Serving Children with Disabilities, UNITED STATES DEPARTMENT OF EDUCATION, Office for Civil Rights Office for Special Education and Rehabilitative Services, March 21, 2020*

### **Consent:**

Electronic and digital signatures for consent are acceptable long as the public agency ensures there are appropriate safeguards in place to protect the integrity of the process. In addition, under Part B of IDEA, these safeguards should include a statement that indicates that the parent has been fully informed of the relevant activity and that the consent is voluntary on the part of the parent consistent with the IDEA definition of “consent”.

### **Prior Written Notice:**

The OSEP document of June 30, 2020 states that it would be appropriate to consider factors such as the closure of some buildings and facilities, social distancing, and other health-related orders during the pandemic in determining what constitutes a “reasonable time” for the purpose of prior written notice. Nevertheless, public agencies should make every effort to ensure that written notice is provided as soon as possible prior to the proposed or refused action.

*Source: <https://tats.ucf.edu/wp-content/uploads/sites/9/2020/07/osep-safeguards-services.pdf> Primary Source: IDEA Part B Procedural Safeguards, US Department of Education, Office of Special Education Programs, June 30, 2020.*

***Considering testing under alternate circumstances (virtual, PPE) how can we maintain standardization and validity of assessments? What are suggestions for gathering information to inform the process?***

**Reevaluations**

When appropriate, any reevaluation may be conducted through a review of existing evaluation data, and this review may occur without a meeting and without obtaining parental consent, unless it is determined that additional assessments are needed. [34 C.F.R. §300.305(a)].

**Evaluations and Eligibility**

Many assessment practices can be successfully implemented even when the practitioner cannot be in the same room with the child and family such as during the COVID-19 pandemic or other events that require social distancing. Assessment serves many purposes in early childhood special education service delivery, and these varying purposes require different tools and processes.

Suggestions for consideration:

- Establish and maintain a system of consistent and transparent communication with families. Document the family’s concerns related to evaluations. Discuss and document their choices whether they prefer alternate methods (remote, interview, combination of methods) or if their preference is for a person-to-person evaluation.
- Review existing information and records and discuss these records with the family. Staff should be knowledgeable of regulations of FERPA and HIPAA when requesting and discussing records.
- Investigate available assessment instruments in order to determine those that best meet the needs for administration, including options of interviews, videoconferencing, in-person and video observations. Maintaining of standardization is a vital component of assessment.
  - Tools that focus on naturally occurring behaviors lend themselves to collecting information remotely. With these tools, gathering information on a child’s functioning can be done through teleconference, parent report, or parent videos of the child engaging in everyday routines and activities. However, highly scripted assessments that require practitioners to directly administer tasks to a child are unlikely to produce valid results, and thus are not suitable for remote administration.
  - Statements from assessment tools publishers: <https://padlet.com/eita/statments>
- Best practices for conducting evaluations of young children apply for evaluations conducted using social distancing and increased safety precautions.
  - 1. Distancing and safety preventative measures:
    - Provide options for a family interview to be conducted remotely in order to maintain distancing.
    - Maintain appropriate social distance within the assessment environment. Request that the family members accompany their child into the testing environment and request that they assist in monitoring, redirecting, and physically intervening (for safety) as needed. Note: Emphasize that they

- should limit assistance so that they do not help their child on assessment items.
- Maintain your district social distancing guidelines during person-to-person evaluation sessions (i.e. distance apart, masks). Describe the district guidelines to the family before the evaluation session so that they know what to expect.
- 2. Cleaning Guidelines
    - Clean and sanitize the testing environment between children and families. Use materials and cleaning solutions as outlined in district guidelines.
    - Clean toys, manipulative items, and test items between children and families.
    - If possible keep a separate set of testing items that can be stored in bins. Alternate the use of sets of items to insure that there has been sufficient time after cleaning (as outlined in district guidelines).
    - Request that families bring a comfort or chew item if needed for their child.
    - Remind family members and children about the guidelines to wash hands upon entering the room. Examiners should model and set a good example by washing their hands. Provide wipes if hand-washing sinks are not available.
  - 3. Preparation
    - Collaborate with family members to prepare young children for “talking with” and “playing with” adults who will be wearing masks.
    - Set up the environment so that items that are not used in the assessment are not available and are preferably out of sight.
    - Examiners should have their materials in close proximity so that they can avoid moving around the room to gather materials.

See additional resources and suggestions in Options for districts for evaluations related to Transition from Part C. TATS Website page: <https://tats.ucf.edu/ideas-and-resources-for-evaluations-transition-and-collaborating-with-families/>

***How do we address parents’ requests that are not within the district guidelines (face-to-face or virtual meetings and evaluations, number of people attending meetings)?***

First, address the parents’ request by referring to the district’s guidelines regarding health and safety. If the requests continue to be unresolved, consult district leadership for guidance. If possible, offer parents the opportunity to invite their desired guests to attend remotely. Consult district contacts for assistance in responding to the parents’ requests. Maintain positive communication with the family while waiting for a resolution. Document contacts with parents/guardians related to the information about guidelines that is given to them, as well as their requests.

## *What are options for districts when children transitioning from Early Steps do not have current standardized assessments?*

As children transition from Part C to Part B services the expectation is to have the child's IEP in place by their third birthday. Similar to evaluation timelines, OSEP has not waived or changed this IDEA requirement related to Indicator 12. Subsequently, as children transitioning from Part C to Part B are evaluated and found eligible during this time, it is the expectation to complete those activities and start the IEP services on or before the child's third birthday. Keep in mind that instances in which parents choose to delay the evaluation or IEP start date constitute allowable use of delay codes.

During school/program closure and reopening with social distancing, it is critical that communication between Part C and 619 occur regarding available assessment information as written in their Interagency Agreements. Collaboration should occur in order to identify additional information needed in order to determine eligibility. In those instances, when there is not sufficient information to determine eligibility the LEA is responsible for gathering additional information or conducting assessments in order to comply with Indicator 12 timeline (Transition from Part C to Part B by third birthday).

First and foremost, ensure transparency with the family, gain their informed, verbal consent and provide written notices per IDEA. The results of any family contacts, including verbal consents, must be clearly documented in the child's record and on the form relating to the activity for which consent is being obtained.

A family may choose not to participate in virtual or socially-distanced evaluation procedures and therefore postpone their child's evaluation. It is important to document all contacts with the family and provide specific details regarding families' requests.

When determining methods of conducting evaluations, including hearing and vision screening, it is important to consider the effectiveness of each component of the evaluation. Consider a combination of the following:

- Review of existing developmental information, including videos of the child, if available;
- Virtual observation of a play session or other routine;
- Guiding parents in simple activities that can then be reviewed together;
- Direct assessments that are able to be conducted in an interview format

When using a review of records to inform professional judgment related to eligibility the following should be thoroughly reviewed and considered:

- Possibility of administering an evaluation instrument;
- Reviewing the child's history (including interviewing the parent);
- Identifying the child's level of functioning in each of the developmental areas (cognitive development, physical development, including vision and hearing), communication development, social or emotional development, and adaptive development);
- Gathering information from other sources such as family members, other caregivers, medical providers, social workers and educators, if necessary, to understand the full scope of the child's unique strengths and needs; and

- Reviewing medical, educational, or other records.
- The use of a child's previous records during the evaluation process is further detailed at the following site: [https://www.ecfr.gov/cgi-bin/text-idx?SID=ff53566124171a51fa168636bf1c206e&mc=true&node=se34.2.303\\_1321&rgn=div8](https://www.ecfr.gov/cgi-bin/text-idx?SID=ff53566124171a51fa168636bf1c206e&mc=true&node=se34.2.303_1321&rgn=div8)

The following resources offer guidance related to evaluation instruments that are recommended for consideration when procedures might likely rely on virtual or social-distancing formats: TATS Website page: <https://tats.ucf.edu/ideas-and-resources-for-evaluations-transition-and-collaborating-with-families/>

- Screening, Evaluation, and Assessment Updates from ECTA: <https://ectacenter.org/topics/earlyid/screeneval.asp>
- Norm-referenced Assessment Tools with Potential for Remote Administration: [https://tats.ucf.edu/wp-content/uploads/sites/9/2020/06/Assessment\\_Tool\\_Table.pdf](https://tats.ucf.edu/wp-content/uploads/sites/9/2020/06/Assessment_Tool_Table.pdf)
- Q&A Related to Pre-K Evaluations, Transitions, Additional Year, and Reevaluations <https://tats.ucf.edu/wp-content/uploads/sites/9/2020/05/Questions-and-Answers-2-edit-SS-5.1.20-1.pdf>
- Vision and Hearing Screening Questionnaire (Example) <https://tats.ucf.edu/wp-content/uploads/sites/9/2020/04/ESE-hearing-vision-questionnaire.pdf>
- IDEA Part B Procedural Safeguards, US Department of Education, Office of Special Education Programs, June 30, 2020. <https://tats.ucf.edu/wp-content/uploads/sites/9/2020/07/osep-safeguards-services.pdf>
- Applying Assessment Principles to Determining Eligibility Remotely, ECTA, April 22, 2020, <https://tats.ucf.edu/wp-content/uploads/sites/9/2020/07/y2020remoteeligibility619.pdf>
- Resource Links to Screening Instruments from Head Start, <https://tats.ucf.edu/wp-content/uploads/sites/9/2020/07/screening-resource-links.pdf>
- Statements from assessment tools publishers: <https://padlet.com/eita/statments>

***What are the guidelines for situations in which a student is not receiving therapy and related services (due to shortage of therapists, illnesses, exposure to COVID-19)? What are suggestions related to compensatory services?***

The student's IEP team is encouraged to consider related services in the context of what specially designed instruction (special education services) means within a district's continuity of learning plan. Related services (i.e. OT, PT) are supportive services required to assist a child who has been identified as a child with an IEP to benefit from special education services.

When districts reopen schools, regardless of a student's access to instruction, IEP teams will need to review individual student IEPs to determine Present Levels of Performance for students, including progress monitoring data from previous remote instruction.

Per the Florida Executive Order (Number 20-52) (DOE Order 2020-EO-06) School districts must immediately begin working with IEP teams to identify students who may have regressed during school closures. School districts must ensure that IEP teams determine needed services,



including compensatory services. IEP teams must follow a student-centered approach with a commitment to ensure that the individual needs of each child are met.

An IEP team may consider using informal assessments or screenings to determine if a student has experienced changes in a performance and/or gaps in skill development. Where, due to the COVID-19 pandemic and resulting closures of school buildings, there has been an interruption in providing IEP services, IEP teams should make an individualized determination whether and to what extent compensatory education may be needed. (Article 7 of IDEA) NOTE: If a student with a disability was refused services by a school, or otherwise did not receive services or instruction, while other students were receiving services during the building closures, then actual compensatory services may be warranted.

It is vital that contacts and conferences with families be documented. The appropriate district-level staff should be consulted regarding guidelines for determining and providing compensatory services.

### ***What are suggested guidelines for addressing inconsistent attendance and the impact it will have on a student's progress on the IEP goals?***

Special considerations and accommodations to account for the diversity of students should be made, especially for our vulnerable populations, including those who are medically fragile or have special health care needs or disabilities, with the goal of safe return to school. No student should be excluded from school unless required in order to adhere to local public health mandates or because of unique medical needs. Pediatricians, families, and schools should partner together to collaboratively identify and develop accommodations, when needed. Collaborate with families and document contacts and conferences with them related to their concerns about students' health and safety needs.

*Source: <https://services.aap.org/en/pages/2019-novel-coronavirus-covid-19-infections/clinical-guidance/covid-19-planning-considerations-return-to-in-person-education-in-schools/> Primary Source: COVID-19 Planning Considerations: Guidance for School Re-entry. American Academy of Pediatrics.*

### **Clearly Articulated Attendance Policies**

The multiple scenarios that school districts may face during reopening require that they practice flexibility in attendance policies and practices. At-risk students and staff may need accommodations to remain in their homes, increasing the need for access to internet and related educational technologies for those engaged in distance learning.

Pre-K ESE has no attendance requirement since it is not a compulsory program but consideration should be given regarding ways to encourage attendance and communicate with families when students' attendance is inconsistent. Document contacts with families related to attendance. Progress monitoring data should be consistently collected to ensure that IEP goals are being addressed and that families are informed about the status of students' progress.

*Source: American School Superintendents' Association Task Force for Reopening Schools, Guiding Principles and Action Steps, June, 2020.*

## Q & A - Addressing IEP Goals while Following Safety Guidelines

### *How can teachers develop plans for addressing individual needs and safety guidelines?*

The impact of schools being closed may have been greater for students with disabilities. Staff and families should not expect that all students will return to school with the same levels of skills as before the switch to remote instruction. The priority for addressing IEP goals and other related concepts should focus on the following:

- Review students' IEP's before the start date for students. Check that materials to address their individual needs are available and plan for any additional supports that will be needed in following safety guidelines
- Consider safety, cleaning, and sanitation needs for
  - Assisting students with toileting and other self-care
  - Location, use, and cleaning of special seating equipment
- Understand students' IEP's in order to plan for providing accommodations. *Remember that many students with delays and disabilities might experience challenges in returning to school.* Be ready with visuals, social scripts, and social-emotional supports.
- Build and maintain routines and structure
  - Safety guidelines should be the foundation for your routines (i.e. handwashing, staying in areas of activities, distancing)
  - Teach classroom rules with emphasis on safety guidelines
- Focus on relationships and social-emotional development
  - Lessons and activities should emphasize safety and should help students use calming strategies
  - Develop strategies for providing social interactions while maintaining safety guidelines
- Plan activities that embed learning opportunities within daily routines so that students receive multiple lessons and extra practice with the concepts.
- Refer to district guidelines and develop a consistent plan for maintaining communication with families. Document contacts and conferences with families in order to record their concerns and needs and to provide information about classroom and school procedures.

Resources: [https://challengingbehavior.cbcs.usf.edu/docs/Leadership\\_ReOpening\\_Guide.pdf](https://challengingbehavior.cbcs.usf.edu/docs/Leadership_ReOpening_Guide.pdf)

*Source: Be Informed. Be Involved. Toolkit for Teachers and Families, Louisiana Department of Education <https://www.louisianabelieves.com/docs/default-source/covid-19-resources/louisiana-continuous-education-toolkit---guidance-for-early-learning-at-home.pdf>*

### *What are some suggestions for progress monitoring (i.e. virtual, inconsistent attendance)?*

Per the Florida Executive Order (Number 20-52) (DOE Order 2020-EO-06) related to reopening schools: *“Robust progress monitoring must be extended to all students in the same district or public charter school with tiered support for students who are not making adequate progress.*

*Students who are receiving instruction through innovative teaching methods must be provided additional support and the opportunity to transition to another teaching method if they fail to make adequate progress. Progress monitoring data must be shared regularly with the Department, as prescribed, to help ensure that resources are rapidly deployed to support students who are failing to make adequate progress.”*

Although IEP teams should begin to review data collected during remote instruction and monitor to identify students who may have regressed during school closures, it is important to allow teachers and staff adequate time to review the current information about students and to plan accordingly.

Emphasize that there should not be a rush to change IEP goals or services and that time should be allowed for students to adjust to the return to school and for teachers and therapists to gather observational and evaluative information. Collaborate with families to gather and share information related to students’ performance during remote instruction and current needs.

Expand progress monitoring to include aspects of development that might have been most impacted by school closures. Explore methods of providing meaningful data related to the following:

- Social emotional needs related to trauma and being in situations of uncertainty
- Development of self-care and independent functioning skills
- Gaps in skill development
- Difficulty transitioning back to school
- Understanding of and use of safety measures

The impact of schools being closed may have been greater for students with delays and disabilities. Begin progress monitoring as part of the procedures for re-teaching skills and routines. In addition, monitor students’ progress on learning and using the new skills associated with returning to school (i.e. social distancing, cleaning and sanitation, masks).

Collaborate with all staff in the classroom and with therapists to prioritize skills for teaching and monitoring. Select skills which will be essential for student participation during their return to school. Monitor curricula and emerging academic skills as much as possible during daily routines and activities. Coordinate efforts related to types of forms used, communication among staff, and each person’s role in documenting and noting each student’s progress and needs.

Collaborate with families in order to coordinate efficient methods for communicating needs, as well as progress. Contacts and conferences with families should be documented.

***What are the suggested guidelines for limiting number of visitors in the classroom (guidelines for family members, volunteers, therapists, and resource specialists who provide coaching)?***

Classroom staff and therapists should be aware of district and school policies related to school reopening and collaborate with each other and with family members to determine additional supports that might be required in helping students follow safety and distancing practices.

Prepare the environment so that natural supports are provided (i.e. furniture arrangement, visual reminders, staff zoning).

Collaborate with therapists to develop policies for entering the classroom and schedules that respect rules related to the number of people allowed in classrooms. Review IEP's in order to determine opportune ways to use sections of the classroom and group students in ways that facilitate delivery of their therapy and related services.

Consult district guidelines and school administration when considering permitting visitors to enter the classroom. Refer to district guidelines and consult with school administration when discussing drop-off and pick-up procedures with families.

Many schools will likely limit the number of individuals in a facility at a time. Drop off and pick up procedures might be restructured. Collaborate with classroom staff in order to plan times during arrival and dismissal when their assistance might be needed to support students.

Communicate with families regarding best times and methods to contact the teacher and therapists and document contacts and conferences.

*Source: Safe Start, Washington State Department of Health, Child Development During the Covid-19 Outbreak, June 30, 2020.*

### ***What are suggestions for maintaining safety guidelines for medically fragile students?***

When developing classroom plans and procedures it is vital to consider the medical and health concerns for students who have extensive needs for physical care and assistance. Listed below are suggestions to consider when planning supports for students with medical and physical needs:

- Allow for additional training needed by their teachers and service providers.
- Be certain that information about their medical needs is provided and that additional precautions related to COVID-19 are included in the information and training provided to staff.
- Collaborate with families, therapists, classroom staff, and medical providers to ensure that needed supplies and equipment are available and that training has occurred related to their use.
- Establish methods for documenting the ongoing medical and health status of these students. Maintain a written consultation log in order to document the sharing of information with district nursing staff and family members.

Depending on the needs of each individual student, it may not be feasible to adhere both to distancing guidelines and the criteria outlined in a specific IEP. Plans for addressing physical and medical needs of students are made on a case-by-case basis with the health and safety of the student being prioritized. Additional cleaning and sanitation of supplies and equipment beyond that used in some areas of the classroom might be required.

No student should be excluded from school unless required in order to adhere to local public health mandates or because of unique medical needs. Pediatricians, families, and schools should partner together to collaboratively identify and develop accommodations, when needed.

*Source: <https://services.aap.org/en/pages/2019-novel-coronavirus-covid-19-infections/clinical-guidance/covid-19-planning-considerations-return-to-in-person-education-in-schools/>*

Amendments to a student's IEP might be needed in order to provide additional accommodations for health and safety needs. Changes in the IEP that address program or service delivery should be made only if warranted for the student's medical welfare; and after consultation with family members, student's pediatrician, district nursing staff, and classroom staff; and should include review of classroom and medical data. Maintain and document consistent communication with families regarding progress, needs, and ongoing plans.

### ***What are the suggested guidelines when a student or adult who has been in the classroom tests positive for COVID-19?***

Classroom staff should be aware of district and school guidelines related to screenings and actions in response to suspected or confirmed illness of classroom staff or students. It is important to follow the guidelines consistently, and it is equally important to inform and prepare students and their families of the guidelines.

Classroom staff should remain calm if there are reports of symptoms of COVID-19 among staff, family members, or students. Respond in a manner that does not disturb or alarm students and their families. Report information that you have received to your school's designated contact person or administrator. Follow the district guidelines for notifying family members. If information needs to be shared, do so privately so that students do not overhear.

Important: Follow guidelines given by your district. Remember the federal, district, and school guidelines regarding student and family confidentiality, as well as Family Educational Rights and Privacy Act (FERPA), and Health Insurance Portability and Accountability Act (HIPAA) policies. Staff members who receive questions from families should document the communications and concerns along with their responses to them, while being sure to note federal, district, and school guidelines.

*Source: Joint Guidance on the Application of the Family Educational Rights and Privacy Act (FERPA) And the Health Insurance Portability and Accountability Act of 1996 (HIPAA) To Student Health Records, Student Privacy Office, US Department of Education. <https://tats.ucf.edu/wp-content/uploads/sites/9/2020/03/2019-HIPAA-FERPA-Joint-Guidance-508-1.pdf>*

## Q & A - Safety Guidelines for Students and Staff

### *What are suggestions related to information for planning and implementing safety guidelines?*

Teachers and staff in Pre-K programs will need to not only be familiar with district and school guidelines but should work to teach and implement these guidelines consistently. Staff should collaborate frequently and monitor the young students in the program to ensure their safety and facilitate their participation. Implementation of several coordinated interventions will be required to consistently address safety and health of students:

- Provision of information, training, and collaboration of all staff
- Identify priority needs for planning staff roles and responsibilities
  - Hygiene
  - Distancing (students and adults)
  - Screening for health concerns (based on district guidelines)
- Development of classroom plans for teaching and implementing guidelines
  - Personal hygiene emphasizing handwashing
  - Cleaning and sanitizing classroom furniture and materials
  - Monitoring and Grouping students for social distancing
  - Schedules and routines
  - Meals and snacks
  - Utilizing outdoor spaces
- Development of plans based on individual needs
  - Assistance with self-care skills
  - Embedding lessons
  - Consistent communication with families

### **Transportation**

Teachers and paraprofessionals should be aware of the guidelines for students who are transported to school on the bus. Paraprofessionals are often required to ride buses with Pre-K, as well as with students with disabilities. Although they will have likely received training related to their duties when assisting students who are riding the bus, teachers should be aware of their roles and responsibilities and schedule morning entry routines based on the timeframe that paraprofessionals who assist students on buses arrive in the classroom.

Teachers can also support students who are transported by school bus by reinforcing bus guidelines with visuals, social narrative, and reminders. Collaborate with paraprofessionals, drivers, and families to develop supports for students who have difficulties following guidelines.

Teachers and paraprofessionals should be aware of the guidelines for arrival and dismissal for students who are transported by their families. Many districts' plans include a process of family drivers waiting in the car with their student until an assigned staff member arrives to pick up the students and assist them in going to their classrooms. As with students who ride the bus, teachers can support students with visuals and social narratives related to the vehicle-arrival procedures.

### **Screening and monitoring for health**

Follow district guidelines for screening students upon arrival. It is recommended as a best practice to take students' temperature each morning only if the school uses a no-touch thermometer. The no touch thermometer needs to be wiped with an alcohol wipe after each use. Thermometers must be properly cleaned and disinfected after each use.

### **Cleaning and Disinfecting**

Given the challenges that may exist in students in effectively adhering to recommendations, it is critical staff are setting a good example for students by modeling behaviors around physical distancing, face coverings and hand hygiene.

#### *What guidelines for Cleaning and Disinfection should be noted?*

Clean, sanitize, and disinfect throughout the day. Follow district guidance but increase how often you clean if required due to the young ages, developmental levels, and disabilities of your students.

#### *Clarification of Terms:*

- *Cleaning* removes germs, dirt, food, body fluids, and other material. Cleaning increases the benefit of sanitizing or disinfecting.
- *Sanitizing* reduces germs on surfaces to levels that are safe.
- *Disinfecting* kills germs on surfaces of a clean object.

The U.S. Environmental Protection Agency (EPA) regulates sanitizer and disinfectant chemicals. If you sanitize or disinfect without cleaning first, it will reduce how well these chemicals work and may leave more germs on the surface. Refer to district guidelines for specifics related to approved products.

### ***Inventory the items in your classroom and develop a cleaning plan.***

**Remove toys and items** that are shared and that are difficult to disinfect (doll clothes, cloth dolls).

- Some items cannot be cleaned and sanitized. This includes things like playdough and sensory or water tables, stuffed animals, and dress up clothes. These items should be removed from the program unless they are individually assigned and labeled.
- Rotate toys that are out at any one time, so they can be cleaned and sanitized.
- Books and other paper-based materials are not high risk for spreading the virus. However, Pre-K students, especially those with delays and disabilities might tend to put books in their mouths. Keep some board books in bins and monitor for the need to clean and sterilize. If possible, designate specific bins of books for students while continuing to provide them opportunities for choices and access to their favorites.

**Store and use toys** in a way that provides access to an adequate number and variety to meet classroom needs for engagement and participation; but use them in a manner that does not require cleaning every toy each day.

- Store toys in bins or large bags when possible so that toys that are not used will not have to be disinfected.

- Put only some of your classroom toys, games, puzzles, and manipulative items out at one time. Switch out these items daily so that only one set needs to be cleaned while leaving a second set for students to use the next rotation.

**Determine what needs to be cleaned and how often.** Determine what items need to be disinfected. Develop and schedule for cleaning and disinfecting.

- Toys that cannot be cleaned and sanitized should not be used.
- Toys and books that students have placed in their mouths or that are otherwise contaminated by body secretions or excretions should be set aside.
  - They should be cleaned by hand by a person wearing gloves.
  - Follow district guidelines, including cleaning with water and detergent, rinsing, and then sanitizing with disinfectant, rinsing again, and air-drying.
  - You may also clean in a mechanical dishwasher.
  - Be mindful and monitor consistently when students are using items that are more likely to be placed in their mouths, like play food, dishes, and utensils.
- Set aside toys that need to be cleaned.
  - Place in a dish pan with soapy water or put in a separate container marked for “soiled toys.”
  - Washing with soapy water is generally an accepted method but refer to district guidelines.
  - Try to have enough toys so that the toys can be rotated through cleanings.

*Resource:* [Sample Routine Schedule for Cleaning and Sanitizing](#) (editable)

### ***Clean and Disinfect Bedding***

Cots, mats, and bedding should be labeled for each student. Use bedding that can be washed. Keep each student’s bedding separate, and consider storing in individually labeled bins, cubbies, or bags. Bedding that touches a student’s skin should be cleaned weekly or before use by another student.

If possible, at nap time, ensure that students’ naptime mats or cots are spaced out as much as possible, ideally 6 feet apart. Consider placing students head to toe in order to further reduce the potential for viral spread.

### ***Clean and Sanitize Classroom Furniture***

Refer to district guidelines for soaps and disinfectants that are acceptable for use and for how often surfaces should be cleaned. Some areas of your classroom and some furniture might require more frequent cleaning than required.

- Any surfaces or items that come into contact with a student’s mouth or have body fluids left on them should be cleaned and disinfected immediately. These items should be left unused until dry.
- Bathrooms and toilets should be cleaned and disinfected daily (refer to district guidelines) but it is important to monitor bathrooms, toilets, and sinks in order to clean bodily fluids quickly between use by students.



- Although toilet training is an important part of self-care skills, refer to district guidelines regarding the use of potty chairs during school reopening. If potty chairs or toilet inserts are used, they should be cleaned and disinfected between uses. If feasible assign potty chairs and inserts to students individually if it is within your district guidelines to use them. Note: Refer to your district’s guidelines and communicate with families regarding the use of potty chairs and toilet inserts. Document information shared with families.
- Non-carpeted floors should be cleaned daily and carpeted floors should be vacuumed daily. If bodily fluids or excessive soil is on a carpet, it might require shampooing or cleaning.

## *Implementing Safety and Distancing Guidelines*

### **Collaborating and Communicating with Families**

You are a trusted voice for the families you serve. Talk to families about the importance of the school and district guidelines. Families should be informed prior to the beginning of school about daily temperature checks and the protocol for notifying them if their children exhibited fevers or symptoms. Explain the process for notifications and actions in the case that a staff member exhibit symptoms or test positive for COVID-19. It is important to keep them informed and provide reminders if needed related to the district guidelines. Document contacts and conferences with families in order to record their concerns and questions, as well as record your responses to them.

Refer to district guidelines and communicate with family members regarding how they should tell you about possible or confirmed cases of COVID-19. Families should report possible illness if anyone in their household shows symptoms or has tested positive for COVID-19.

### **Items from Home and Transportation**

- Limit the number of items brought into the classroom because this can be a way to transmit the virus. Ask families to avoid sending toys such as stuffed animals because of the difficulty in cleaning.
- Emphasize the importance of the family providing a change of clothes for each student.
- Ensure that family members are aware of district guidelines for sending lunches and snacks to school.
- Ensure that family members are aware of district guidelines related to drop-off, pick-up procedures and schedules, as well as being aware of rule for the bus. Provide appropriate contact information if they have questions.
- Let families know times of the day when you are most likely to be available to talk with them. Provide email or school communication programs’ information so that they are able to send questions and concerns. Explain to family members that your time is limited during the day because of increased needs for cleaning and monitoring students for safety and health precautions. Document your contacts and conferences with families.

### **Food and Eating**

Refer to district guidelines for specific information related to how breakfast and lunch will be served at your school.

- Pre-K students often require assistance during mealtimes (i.e. opening containers, self-feeding). Classroom staff should wear gloves when handling food.
- Maintain distancing and grouping during meals.
- Clean tables before and after meals.
- Use outdoor spaces for meals if possible. Consider having one group outside and one in the room if possible. Rotate groups daily or weekly so that each group gets a turn to eat outdoors.
- Students and staff should wash hands before and after eating.
- Consider the use of disposable plates and meal supplies if items can't be properly washed, rinsed, and sanitized.
- Serve students their snacks and meals and ensure that they are not sharing food with each other.
- Cleaning up individual eating areas can be done by each student based on their abilities to do so. Social distancing should be maintained by having them go one at a time to dispose of their trash.
- Use touchless trashcans (foot pedal to open) and emphasize to students that they should not touch the trashcan.

### *Making use of Outdoor Space*

Extend the indoor environment to outdoors, and take the class outside, weather permitting.

- Emphasis should be placed on grouping students and limiting the size of groups participating in playground time.
- Outdoor playgrounds/natural play areas only need routine maintenance, and hand hygiene should be emphasized before and after use of these spaces.
- Outdoor play equipment with high-touch surfaces (i.e. railings, handles) should be cleaned and disinfected regularly if used continuously and according to district guidelines.

Offer outdoor play in staggered shifts or separated into groups to play in various sections of the outside area.

- If two or more groups are outside at the same time, they should have at least 6 feet of open space between them.
- Use cones, flags, tape, or other signs to create boundaries between groups.
- If you can, have equipment (i.e. balls, hoops) for each student in the play group not using the playground equipment. Clean outside toys regularly. Always wash hands right after outdoor play time.
- Bubbles are often a good activity for outdoor play. A useful strategy is to assign bubbles per student, label, and store each student's separately.

Lessons and activities can be moved from the classroom to an outside area. Coordinate with school staff to ensure that the limit for number of students is not exceeded.

- If possible take small groups to an outside area for story time or for guided play activities. This is a good strategy for having a smaller group inside the classroom for distancing, as well as for specific activities.

- Handwashing and cleaning materials should be according to district guidelines and practiced consistently just as they are inside.
- Refer to district guidelines related to topical sunscreen. Communicate these guidelines to family members. At the same time, monitor the amount of sun and heat to avoid over-exposure. Ensure that students have ample drinking water.

### ***Staff Collaboration and Planning with Service Providers***

Keep small groups consistent. The staff and students in each activity group should remain the same from day to day to reduce contact, as well as to build feelings of community and help students become familiar with routines.

It is best if the staff to student ratio allows for one staff member to take a break without having to bring another individual into the small group space. If that is not possible and a float person is brought into the room, these practices should be followed:

- Any adult who is not a normal part of the group should wash hands immediately upon entering and upon leaving the space.
- Any person providing breaks who is not a normal part of the group should wear PPE according to district guidelines when they are in the classroom.
- Consider timing when bringing in adults who are not normally part of a group to minimize close interactions with students.
  - For example, give staff their lunch break during students' nap time so the float staff can remain 6 feet away from the students while they rest; or
  - Plan 10-minute breaks when the students have just started a new, engaging activity that does not require much adult interaction; or
  - Plan breaks when the group is having outside time where the risk of transmission is lower.

Collaborate with therapists to develop plans related to the number of people allowed in classrooms. Review IEP's in order to determine opportune ways to use sections of the classroom and group students in ways that facilitate delivery of their therapy and related services. Be sure to note on the classroom schedule the times when therapists will be working with specific students so that an area in the classroom is available.

## Suggestions for Supporting and Teaching Health and Safety Guidelines in Pre-K Classrooms

### *Safe Use of Materials and Toys*

- Keep each student's belongings separated from others' and in individually labeled containers, cubbies, or areas.
- Ensure adequate supplies to minimize sharing of high touch materials to the extent possible (e.g., assigning each student their own art supplies, fine motor materials, manipulative learning materials)
- Limit use of supplies, materials, and toys by one group of students at a time and clean and disinfect between uses.
- Provide individual play mats or use colored tape to mark off individual areas on tables and in play centers.
- Avoid sharing electronic devices, toys, books, and other games or learning aids.
- Use social narratives and visually display routines for playing with toys and using materials within a designated area.
- Teach and use visuals to support students during the clean-up routine so that used toys and materials are placed in bins.

### *Social Distancing*

#### **Room Arrangement and Supports for Distancing**

- Space seating and tables at least 6 feet apart when feasible.
  - Provide acrylic sheets or other barrier between students seated at a table.
  - Assign seats and mark each student's seat with name, symbol, or photo. Do this in multiple areas of the room.
- Provide physical guides, such as tape on floors or sidewalks and signs on walls, to ensure that staff and students remain at least 6 feet apart in lines and at other times (e.g. guides for creating "one way routes" in hallways).
- Limit, or eliminate, use of common spaces. When possible, divide large group spaces in order to allow more students to safely use the space. For example, use child-sized furniture, (i.e. rolling shelves and kitchenettes) to divide a room and serve as physical reminders to students to remain in their assigned areas.
- Find creative ways to use yarn, masking tape, or other materials for students to create their own space.
- Develop a system for students to change activity areas. Teach and support them in remaining in an activity area for a designated time. Provide a variety of materials in order to increase their engagement and interest.

#### **Strategies for teaching and supporting young students with social distancing**

- Implement strategies to model and reinforce social and physical distancing and movement.
- Use carpet squares, mats, or other visuals for spacing.

- Model social distancing when interacting with students, families, and staff.
- Role-play what social distancing looks like by demonstrating the recommended distance.
- Give frequent verbal and visual reminders to students.
- Create and develop a scripted story around social distancing, as well as handwashing, proper etiquette for sneezes, coughs, etc.
- Send home a tip sheet for parents and family members to also learn about social distancing.

*Resource:* [Ideas for Room Arrangement](#)

*Resource:* [Teaching Young Children about Social Distancing \(TATS\)](#)

## *Hygiene and Safety*

### **Teaching Hygiene, Health, and Safety**

- Signs and Messages
  - Post visuals and photos to remind students and staff about hand-washing and masks.
  - Post visual showing step-by-step routines
  - Include messages and reminders about hygiene and safety guidelines when communicating with families. Send stories and visuals home so that families can reinforce lessons.

### **Strategies for teaching and supporting young students with hygiene and safety**

- Teach, model, and reinforce healthy habits and social skills.
- Explain to students why it's not healthy to share drinks or food, particularly when sick.
- Practice frequent handwashing by teaching a popular child-friendly song or counting to 20 (handwashing should last 20 seconds).
- Teach students to use tissue to wipe their nose and to cough inside their elbow.
- Model and practice handwashing before and after eating, after coughing or sneezing, after playing outside, and after using the restroom.
- Create and develop scripted stories about handwashing, wearing masks, and hygiene etiquette (i.e. sneezing, coughing, refraining from touching face)
- Develop and post visuals for step-by-step processes for hygiene and safety
- Explain and describe the guidelines for storing toys in bins, using individual materials, and waiting in assigned areas. Use visuals for teaching and as reminders.

*Resource:* [Washing Hands Story \(Pyramid\)](#)

*Resource:* [Visuals - Safety Reminders for Covid-19](#)

## *Wearing Masks*

### **Strategies for teaching and encouraging students to wear masks**

- Model the use of masks along with social narratives and photos of staff and students wearing masks.
- Collaborate with families to teach step-by-step processes of mask use.
- Designate parts of the day when masks are not required (i.e. outside play). Refer to district guidelines when determining the schedule for mask use.
- Have a designate way to keep up with students' masks. One idea is to attach each student's mask to a lanyard that is worn around the neck. This makes it less likely that the mask will be dropped or put down and forgotten.

*Resource* : [Teaching Young Children about Wearing Masks \(TATS\)](#)

## *Outdoor Play*

### **Outdoor lessons and play**

- Extend the indoor environment to outdoors, and take the class outside, weather permitting.
  - Outdoor playgrounds/natural play areas only need routine maintenance, and hand hygiene should be emphasized before and after use of these spaces.
  - Outdoor play equipment with high-touch surfaces, such as railings, handles, etc, should be cleaned and disinfected regularly if used continuously.
- Continue to emphasize the grouping of students. Limit the size of groups participating in playground time. Structure outdoor time so that small groups can play in different area of the playground.
- Plan activities and supply materials so that those who are not using the playground equipment are able to maintain interest and stay engaged.
- Consider scheduling outdoor play in staggered shifts with part of the whole group outside while part is inside. The number of groups and amounts of time would depend in part on the number of adults available to supervise and interact with the students.
  - If two or more groups are outside at the same time, they should have at least 6 feet of open space between them.
  - Use cones, flags, tape, or other signs to create boundaries between groups.
  - If you can, have equipment such as balls and jump ropes for each group.
  - Always wash hands right after outdoor play time.

Be familiar with the specific guidance in place for your program related to amount of time outdoors, guidelines about the application of sunscreen. Collaborate with school staff and administrator about the scheduled use of the playground by other classrooms.

If possible, consider having the entire group or shifts of groups have snacks and/or lunch outside. Refer to your school's guidelines regarding permission, location, and health and safety requirements for eating outside. Emphasize hygiene precautions (i.e. handwashing before and after eating). Be prepared with plans for instructing students about where to sit, how to follow safety guidelines, and how to clean up after eating.

Many lessons can be taught outside, depending on school and district guidelines.

- One example is story time. Follow-up literacy activities (i.e. a nature walk on the school grounds to look for items or colors mentioned in a book) are good outside learning activities.
- If possible, art activities can be taken outside (i.e. hanging paper from a fence and painting with big brushes, drawing with sidewalk chalk).
- Blowing bubbles is an engaging activity for most young students. Because the interest level is often high during bubble activities, it is a good time to model and focus on language and communication skills.

Based on scheduling and available staff, planning activities based on some children having a lesson outdoors and others staying indoors for their lesson can be a good strategy for social distancing and for increasing amount of adult interactions with the groups.

### *Attending to students' social emotional health.*

Integrate social and emotional learning as a priority through student engagement and positive social interactions. Even though students are distanced from each other and whole-group activities might be infrequent, it is important to provide visual, auditory and sensory supports to promote engagement.

#### **Strategies for supporting children in maintaining distance during play**

- Offer more opportunities for individual play and solo activities, such as fine motor activities (i.e., drawing, coloring, cutting, puzzles, and other manipulatives).
- Plan activities that do not require close physical contact between multiple students.
- Stagger indoor and outdoor play and adjust schedules to reduce the number of students in the same area.
- Use visual schedules, first/then strategies, photos, and social scripts to help students get accustomed to remaining in an assigned area with a specific group of peers.

#### **Strategies for building classroom and friendship connections while distanced**

- Plan ways that give students opportunities to participate in whole-group activities while remaining distanced:
  - Working on a classroom mural or painting (i.e. a few at a time at the art area – distanced – with one group project developed)
  - Music and movement with distance but with the same song and movements. Classroom staff should monitor groups and individuals to support children in understanding the song and movements. If the planned song includes specific motions (i.e. Wheels on the Bus) place visual drawings of the motions, model motions before the activity, use a video that models the motions and play the same video on a tablet or computer placed so students in the small groups can watch.
  - Make a classroom book with photos and names of the students. A good example of this strategy is a book that shares students' favorites (i.e. a block or Lego structure, piece of art work, a favorite book). Take the photo to other small groups

while using comments such as “Tommy wants you to see what he built”. These photos can also be emailed to families. Remember to respect student confidentiality when sending photos of projects. Do not include students’ names.

- If you have dividers such as acrylic-sheet dividers facilitate play so that students can develop a common play scheme on both sides of the acrylic sheet.
- Provide photos and models to support children in greeting each other while maintaining distance.

*Resource* : [Considerations for Reopening after Extended Closure](#)

### **Suggestions for supporting students’ individual social, emotional and behavioral needs**

- Teachers, families, and staff will need to use strategies to prepare students for seeing their teachers, classroom staff, and therapists in masks and attend to students’ emotional responses to this new policy.
- One option is for staff to share a picture of themselves with and without the mask in advance of students’ return to school.
- Use masks with child friendly designs or characters.

Some students might experience difficulty adjusting to the new routines. Some reasons for the need for supports during school reopening might include:

- Distancing and wearing masks are routines that are different from their prior experiences at school.
- After several months away from school during remote learning, some students might require extra time and supports to re-adjust to person-to-person school.
- COVID-19 and accompanying economic worries and changes in family routines might have caused families, including young children, to experience stress and uncertainty. The additional change of returning to school might cause further stress for some families and students.

Students might react in a variety of ways when they experience uncertainty and stress. Some students might react in the following ways:

- crying,
- withdrawing,
- feeling tired,
- seeking attention, and
- seeking to be held.

Other students who are experiencing stress might exhibit noncompliant behaviors such as the following:

- resisting masks,
- refusing to distance from peers,
- aggressive actions such as hitting, spitting, and
- leaving an assigned area.

It is important to monitor students’ emotional reactions and to establish relationships and connections with them as school begins again. Some ideas for providing an environment that will assist students in feeling welcomed, safe, and secure are below:



- Focus on safety and building/rebuilding resiliency.
- Personalize and show sensitivity.
- Coordinate with staff to provide consistent behavior responses and wording.
- Establish adults' roles as safe and caring helpers.
- Provide choices
- Teach and support consistent routines while modeling and providing practice for new routines.

*Resource* : [Building Relationships \(University of Connecticut\)](#)

*Resource* : [When we All Come Together Again - printable story](#)

### **Strategies to individualize and support emotional well-being**

Supporting students in development of relationships and self-regulation should be paired with consistent classroom instruction related to the following:

- Teach students how to identify and handle emotions
- Teach lessons in recognizing feelings (i.e. fear, anger, worry) and provide practice in ways to deal with and self-regulate feelings
- Facilitate guided practice in routines and learning the parts of the schedule. This helps students know what to expect and know the steps of classroom routines, thus building a sense of security.
- Emphasize that the classroom and school are safe places. To reinforce this concept, provide a safe place for calming down in the classroom.
- Comfort items may be especially needed during this time of transition as they may help to reduce stress for students.
  - To avoid these items coming into contact with other students, efforts should be made for these items to be placed in a cubby or bin and be used at naptime or as needed.
  - If possible, a comfort item should remain in the classroom to avoid cross contamination from another site. Use photos of the item to help comfort the student in another setting. Comfort items are often blankets or stuffed animals that students bring from home. Fabric items should be washed daily.
- Support students with strategies to increase their ability to focus and pay attention in order to stay engaged in on-task behavior.
- Teach skills and provide reinforcement related to students' efforts in learning to set goals and plan how to problem-solve and regulate emotional reactions.

*Resource* : [Video of Circle Time for Calming \(filmed before rules for distancing\) \(Pyramid\)](#)

*Resource* : [Going Back to School - printable story](#)

## References:

References are arranged in order of the agency or department that developed the documents cited.

American Academy of Pediatrics, *COVID-19 Planning Considerations: Guidance for School Re-entry. Interim Guidance*, June 25, 2020 from <https://ectacenter.org/topics/disaster/coronavirus-re-opening.asp>

American Academy of Pediatrics, *Return to School During COVID-19, Healthy Children*. <https://www.healthychildren.org/English/health-issues/conditions/COVID-19/Pages/Return-to-School-During-COVID-19.aspx>

Department of Social Services and Department of Education, California, April 7, 2020. *Social and Physical Distancing Guidance and Healthy Practices in Response to the Global Pandemic*, Source: <https://services.aap.org/en/pages/2019-novel-coronavirus-covid-19-infections/clinical-guidance/covid-19-planning-considerations-return-to-in-person-education-in-schools/>

Departments of Education, Health, and Human Services. Michigan, *Considerations for Planning Return to In-person Education*, June 4, 2020. Source: <https://services.aap.org/en/pages/2019-novel-coronavirus-covid-19-infections/clinical-guidance/covid-19-planning-considerations-return-to-in-person-education-in-schools/>

ECTA Resources:

*Child Find and Identification*: <https://ectacenter.org/topics/earlyid/earlyid.asp>

*Part B Section 619 Eligibility*: <https://ectacenter.org/topics/earlyid/partbelig.asp>

*Transition*: <https://ectacenter.org/topics/transition/transition.asp>

*IEP's*: <https://ectacenter.org/topics/iep/iep.asp>

IDEA Guidance: <https://www.ed.gov/coronavirus>

*Part B Procedural Safeguards*, June 30, 2020. Source: <https://www.ed.gov/coronavirus>  
*COVID-19 pandemic* may be found online at <https://www.ed.gov/coronavirus>

Office for Civil Rights Office for Special Education and Rehabilitative Services, US Department of Education, March 21, 2020, *Supplemental Fact Sheet Addressing the Risk of COVID-19 in Preschool, Elementary and Secondary Schools While Serving Children with Disabilities*, <https://tats.ucf.edu/wp-content/uploads/sites/9/2020/04/qa-covid-19-03-12-2020.pdf>