



Academic Services

Re-Opening Plan for the 2020-21 School Year

**Agency Name:** Cantalician Center for Learning

**BEDS Code:**140707137080

**Administrative Address:** 2049 George Urban Blvd. Depew, New York 14043

**Program Site Address:** 2049 George Urban Blvd. Depew, New York 14043

**Program(s) provided at this site:**

- 4410 Pre-school Special Education
  - Special Class
  - Special Class in an Integrated Setting
- Multi-Disciplinary Evaluations
- 853 School Age Special Education
- Administrative Offices

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**Website where this plan and any plan updates will be posted:** [www.cantaliciancenter.org](http://www.cantaliciancenter.org)

**Important Contact Information:**

Role	Contact Information
Director of Education	Jason Petko <a href="mailto:JPetko@Cantalician.org">JPetko@Cantalician.org</a> 716-901-8700
Agency Nurse Coordinator	Patricia Lipka <a href="mailto:PLipka@Cantalician.org">PLipka@Cantalician.org</a> 716-901-8796
Training and Safety Specialist	Brian Kindron <a href="mailto:BKindron@Cantalician.org">BKindron@Cantalician.org</a> 716-901-8883

For questions about...	Contact Information
Google Classroom, Teletherapy, Zoom	Your child's teacher or therapists
Social-emotional Support	Alex Sawers, School Counselor <a href="mailto:ASawers@Cantalician.org">ASawers@Cantalician.org</a> 716-901-8766

Cantalician Center for Learning's COVID Response or Re-Opening Plans	716-901-8700 CovidResponse@Cantalician.org
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## **INTRODUCTION**

### **Background**

The safety of our students, staff, and school community are of the utmost importance. Cantalician Center for Learning's (Cantalician Center or school) COVID-19 Reopening Plan establishes and explains the procedures, practices and safeguards needed to meet the recommendations and guidance outlined by the following governmental agencies:

#### **NYSDOH: Interim Guidance for In-Person Instruction at Pre-K to Grade 12 Schools During the COVID-19 Public Health Emergency**

[https://www.governor.ny.gov/sites/governor.ny.gov/files/atoms/files/Pre-K to Grade 12 Schools MasterGuidence.pdf](https://www.governor.ny.gov/sites/governor.ny.gov/files/atoms/files/Pre-K_to_Grade_12_Schools_MasterGuidence.pdf)

#### **Reopening New York: Checklist for Pre-K to Grade 12 School Reopening Plans**

[https://www.governor.ny.gov/sites/governor.ny.gov/files/atoms/files/P12\\_Checklist.pdf](https://www.governor.ny.gov/sites/governor.ny.gov/files/atoms/files/P12_Checklist.pdf)

#### **Reopening New York: Guidelines for Pre-K to Grade 12 Schools**

[https://www.governor.ny.gov/sites/governor.ny.gov/files/atoms/files/P12\\_EDU\\_Summary Guidelines.pdf](https://www.governor.ny.gov/sites/governor.ny.gov/files/atoms/files/P12_EDU_Summary_Guidelines.pdf)

#### **NYSED: Reopening Guidance**

<http://www.nysed.gov/common/nysed/files/programs/reopening-schools/nys-p12-school-reopening-guidance.pdf>

#### **Centers for Disease Control and Prevention (CDC) CDC Guidance for K-12 Schools**

<https://www.cdc.gov>

#### **Federal Occupational Safety and Health Administration (OSHA)**

<https://www.osha.gov>

Based on the aforementioned guidance, we have developed procedures related to the Operations and Instruction for three scenarios: Face-to-Face, Hybrid and Remote Learning. Understanding the ever-changing nature of this pandemic, we have developed a plan to allow us to switch learning modalities if necessary.

### **Three Phases of Reopening & Maintaining Safety**

1. Planning for September 2020
2. Launching the 2020-21 School Year
3. On-going monitoring & assessment during the 2020-21 School Year

Additionally, each topic of the plan contains guidance, procedures, protocols and/or other measures which explain practices that have been considered in order to maximize the health and safety of students and staff.

This plan was developed to conform to the guidance provided by the New York State Education Department (NYSED) in their July, 2020, document entitled: *Recovering, Rebuilding, and Renewing: The Spirit of New York's Schools – Reopening Guidance*. This plan will be revised and updated as needed to adjust to changing public health conditions caused by the COVID-19 virus and all of the new requirements and regulations which may emerge over time. We solicited input and involvement from the families we serve and our staff during the original drafting of our re-opening plan. We will rely on continued input from all stakeholders as we move forward implementing this plan and as we contemplate any additions or modifications.

We know our program must be as flexible and as responsive as possible to the needs of our students, families, and staff members. We are closely monitor the conditions of our school community as the COVID-19 pandemic continues and the effectiveness and appropriateness of our plan. Be assured that nothing has changed our sincere commitment to our students and our determination to provide the highest possible quality of educational programming and related services during these difficult times.

The goal of the plan is to guide the delivery of high-quality educational services as safely as possible whether that service delivery is in-person, through a remote learning platform or a blended combination of remote and in-person services. Our focus and concerns extend to the social and emotional needs of our students, families and staff members. By diligently working together and remaining focused on the outcomes we desire, we will find solutions to the many challenges ahead.

Our plan includes all the required elements identified by NYSED and follows the structure of the guidance by addressing the following areas as they apply to our students with disabilities and their families:

- Communication/Family and Community Engagement
- Health and Safety
- Facilities
- Nutrition
- Transportation
- Social Emotional Well-Being
- School Schedules
- Attendance and Chronic Absenteeism
- Technology and Connectivity
- Teaching and Learning
- Special Education
- Budget and Fiscal

Any suggestions, concerns and/or questions about our plan should be directed to the contact person(s) identified at the beginning of this document.



<b>COMMUNICATION/FAMILY AND COMMUNITY ENGAGEMENT</b>	
<p>Re-Opening Task Force Stakeholders</p>	<p>Jason Petko – Director of Education                      Judith Vriesen – Director of Human Resources                      John Augustyn – Coordinator of Quality Assurance and Corporate Compliance                      Anne Reed – Preschool Coordinator                      Brian Kindron – Training and Safety Specialist                      Patricia Lipka – Agency Nurse Coordinator                      Julie Davis – Principal                      Vito Gigante – Occupational Therapy Department Head                      Sue Ruska – Speech Therapy Department Head                      Tia Phelps – Curriculum and Instructional Coordinator/School Safety Committee                      Linda Shoemaker – Teacher/President of the Cantalician Center Professional Staff Association                      Cortlin Specht – OTR/Union Officer                      Sue Drust – SLP/Vice President of the Cantalician Center Professional Staff Association                      Alex Sawers – School Counselor                      Bethany Wrigglesworth – Teacher/School Safety Committee                      Elizabeth Toth – OTR/School Safety Committee                      Kimberly Girdlestone – Teacher Assistant/School Safety Committee                      Donna Bove – Parent                      Nancy Campbell –The Parent Network of WNY                      Sam Mattle – Center for Self-Advocacy                      Martha Lamparelli – School District Consultant</p>
<p>Communication with Parents and Stakeholders</p>	<p>Collaboration with stakeholders was implemented throughout the creation of this document. Additionally, a draft of this document will be posted on Cantalician Center’s website for review by stakeholders, allowing them to comment or ask questions about the document through various platforms.</p> <p>The school will utilize numerous communication channels to inform parents, students, teachers, administrators, support staff and the community in general of procedures and protocols with respect to the COVID-19 pandemic. The most highly utilized channel is our email and text message mass communication system, School Messenger. The system sends our email, text message, and voice mail alerts, usually pointing to an explanatory document or letter on the school’s website. The school website is the primary repository for letters, documents, event headlines, frequently asked questions, and general information about the school. Communication with parents/guardians will be provided in the preferred language and mode of communication of the students’ families, in</p>

	<p>accordance with federal and State requirements. Cantalician Center will maintain regular communication with the parents/ guardians and other family members of students to ensure that they are engaged in their children’s education during the reopening process.</p>
<p>School Level Communication</p>	<p>Students are provided with daily verbal instruction/direction along with written and visual supports. Information is reinforced through direct instruction, social stories, the social-emotional curriculum, and modeling/demonstrating.</p> <p>Parents/Legal Guardians receive information through a variety of means such as: robo-calls; mailings; email; one-on-one meetings such as video-conferencing, phone calls, and texts.</p> <p>Continuous personal care instruction is provided throughout the school day. Instruction includes: appropriate signage/posters throughout the building with easy read wording and visual/picture cues; demonstration/modeling; social stories; and use of videos.</p> <p>At the parent’s request, the school works with outside resources such as the school district and other agencies to provide translation and/or interpretation of school communications.</p> <p>Upon request, the school works with outside resources such as the student’s school district and agencies to provide a translator and/or interpreter to facilitate communication.</p>
<p>Teaching Students how to follow COVID-19 protocols.</p>	<p><b>Hand Hygiene:</b></p> <p>Students are to practice good hand hygiene to help reduce the spread of COVID-19.</p> <p><b>Hand hygiene includes:</b></p> <p>Traditional hand washing (with soap and warm water, lathering for a minimum of 20 seconds), which is the preferred method; Use of alcohol-based hand sanitizers (60% alcohol or greater) when soap and water are not available, and hands are not visibly dirty.</p> <p>Hand sanitizer is provided throughout common areas (e.g. entrances, cafeteria) and near high touch surfaces.</p> <p>Signage is placed near hand sanitizer indicating visibly soiled hands should be washed with soap and water.</p> <p>Students who are unable to use alcohol-based hand sanitizers for health reasons are permitted to wash their hands with soap and water.</p>

	<p>Alcohol-based hand sanitizer dispensers are permitted in rooms and corridors in limited quantities in accordance with FCNYS 2020 Section 5705.5.</p> <p><b>Proper face covering wearing:</b></p> <p>Continuous instruction on proper face covering is provided throughout the school day. Appropriate signage/posters are located throughout the building with written and visual supports, as well as demonstration/modeling, social stories, and the use of videos.</p> <p><b>Physical distancing:</b></p> <p>Continuous instruction on proper physical distancing is provided throughout the school day. Appropriate signage/posters are located throughout the building with written and visual supports, as well as demonstration/modeling, social stories, and the use of video.</p> <p>Students are taught to recognize the physical changes of their environment including changes to physical space and movement patterns in and around the building.</p> <p><b>Respiratory Hygiene:</b></p> <p>Students are taught and encouraged to cover their mouth and nose when coughing or sneezing with a tissue and are instructed on how to dispose of the tissue appropriately. When no tissue is available, students will be encouraged to use the inside of the elbow (or shirtsleeve) to cover the mouth or nose.</p> <p>Hand hygiene is performed after sneezing, coughing and handling dirty tissues or other soiled material.</p>
<p>Reducing In-School Movement</p>	<p>The student’s schedule has been altered to maximize time spent in their classroom and/or therapy space(s).</p> <p>Special area teachers (e.g., music, art, physical education) will instruct students within their own classroom or outdoors.</p> <p>Weather permitting, instruction/therapy may be conducted outdoors.</p> <p>Restroom capacity is adhered to.</p> <p>Classroom furniture is turned (including teachers) to face in the same direction to reduce transmission caused by virus-containing droplets (e.g., from talking, coughing, sneezing).</p>



	<p>Student belongings are kept separate from their peers. Supplies are limited to cohorts of students and are cleaned between cohort usages.</p> <p>Visual aids are utilized (e.g., painter’s tape, stickers, posters, cones, etc.) to illustrate traffic flow and appropriate spacing to support physical distancing.</p> <p>Meals are served and eaten in the classrooms to limit movement in the halls and allow for physical distancing.</p> <p>Gatherings are limited in small spaces (e.g., elevators, faculty offices) unless all individuals in such space are wearing acceptable face coverings. Signage outside of spaces note the capacity.</p> <p>Outdoor play spaces are being used with proper safeguards in place. Students will wash hands before and after touching play structures and keep 3-feet of space from other students as much as possible.</p> <p>There are visual cues that demonstrate physical spacing.</p> <p>Student assemblies, athletic events/practices, performances, school-wide parent meetings are cancelled, limited, or provided virtually. Some field trips, vocational opportunities, and school events are virtual (e.g. talent show).</p> <p>Only visitors conducting essential business are permitted to enter the building.</p> <p>Effective June 9, 2021, visitors are permitted for special events, tours, visits to classrooms, or other pertinent meetings related to their child’s therapy or instructional services. Proper health screening is required.</p>
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<b>HEALTH AND SAFETY</b>	
Vulnerable Student Populations	Students who are medically complex, who have neurologic, genetic, metabolic conditions, or who have congenital heart disease are at higher risk for severe illness from COVID-19 than other children. Further, students who are medically fragile may not be able to maintain physical distancing, hand or respiratory hygiene, or wear a face covering. It is important for parents/ guardians to work with their child’s healthcare providers so that an informed decision can be made on how best to meet the child’s needs at school while protecting their health and safety.
Observing signs of illness in students and others.	All staff are trained on the symptoms of COVID-19. When a staff member observes a student displaying signs or symptoms, they will call the Nursing Office. A nurse will go to the classroom to assess the student. When necessary, the student is escorted to the isolation room and the parents/guardians is contacted and required to pick up their child.
Staff, visitor, guests, contractor, and vendor health screenings	<p>Prior to arriving to work, employees receive a daily text message that prompts them to answer a health screening questionnaire.</p> <p>Upon arriving to the school, all others will complete a health screening questionnaire.</p> <p>Employees and/or all others who do not pass the health screening questions will be instructed to stay home/not enter.</p> <p>See <i>Appendix A: Screening and Testing Requirements</i></p>
Screening Instructions for Parents	<p>Parents/guardians will be provided resources and training prior to the return of in-person instruction regarding the careful observation of symptoms of COVID-19 that must be conducted before their child arrives to school.</p> <p>An electronic screening method is available to parents/guardians for this purpose. Parents/guardians who are unable to access this system can use a paper submission.</p> <p>Failure to complete the health screen prior to student arrival will result in the nursing department contacting the family via phone for completion.</p> <p>Despite the instructional model the student is following, they must complete a health screening questionnaire 1 time per calendar week. Exceptions can be made to accommodate the calendar (e.g. spring recess).</p> <p>Any student with a fever of 100°F or greater cannot be permitted in school.</p> <p>The following are listed as the most common symptoms of COVID-19:</p> <ul style="list-style-type: none"> <li>• Fever or chills (100°F or greater);</li> </ul>

	<ul style="list-style-type: none"> <li>• Cough</li> <li>• Shortness of breath or difficulty breathing</li> <li>• Fatigue</li> <li>• Muscle or body aches</li> <li>• Headache</li> <li>• New loss of taste or smell</li> <li>• Sore throat</li> <li>• Congestion or runny nose</li> <li>• Nausea or vomiting</li> <li>• Diarrhea</li> </ul>
<p>Student Health Screenings at School</p>	<p><b>Upon arrival:</b></p> <ol style="list-style-type: none"> <li>1. The screener will perform hand hygiene</li> <li>2. Utilize PPE</li> <li>3. Students are supervised by school personnel and encouraged to maintain physical distancing through the use of floor markings while waiting for temperature screens.</li> <li>4. Check the student’s temperature using a non-contact thermometer</li> <li>5. If their temperature is 100 degrees or higher, they will be escorted to the isolation room and rechecked in 15 minutes. If the student still has a temperature of 100 F or higher, parents are notified and required to pick up their child and contact their health care provider.</li> <li>6. When contact is made while performing a temperature check, the screener will use a clean pair of gloves.</li> <li>7. When non-contact thermometers are used, the screener will clean them with an alcohol wipe (or isopropyl alcohol on a cotton swab) between each student. Screeners can reuse the same wipe if it remains wet.</li> </ol>
<p>Warning Signs of Illness Within Students</p>	<p><b>Signs of any type of illness:</b></p> <ul style="list-style-type: none"> <li>• Flushed cheeks</li> <li>• Rapid or difficulty breathing (without recent physical activity)</li> <li>• Fatigue, and/or irritability; and</li> <li>• Frequent use of the bathroom</li> <li>• The school nurse will coordinate school health services to manage, prevent and/or reduce health issues.</li> <li>• The team will coordinate with student’s family and health team and include trauma informed education practice to address the behavioral health needs of students</li> <li>• Multimedia training (including the use of videos, visual aids) will be provided in the parent’s preferred language. Collaboration with home districts to meet the communications needs of the student and family will occur.</li> </ul>

	<p><b>Signs of Multisystem Inflammatory Syndrome in Children (MIS-C) associated with COVID-19</b></p> <ul style="list-style-type: none"> <li>• Abdominal pain</li> <li>• Vomiting</li> <li>• Diarrhea</li> <li>• Neck pain</li> <li>• Rash</li> <li>• Bloodshot eyes</li> <li>• Feeling extra tired</li> <li>• Fever</li> </ul> <p><b>Signs of serious illness calling for immediate emergency transport to a health care facility:</b></p> <ul style="list-style-type: none"> <li>• Trouble breathing</li> <li>• Pain or pressure in the chest that does not go away new confusion</li> <li>• Inability to wake or stay awake</li> <li>• Bluish lips or face</li> <li>• Severe abdominal pain</li> </ul> <p>If a parent reports that their child tested positive for COVID-19, the Cantalician Center will notify the local health department to determine what steps are needed for the school community.</p>
<p>Tracking and Tracing of Confirmed Cases of COVID-19</p>	<p><i>See Appendix B: Tracking and Tracing</i></p>
<p>Parent Screening Support</p>	<p>Parents can direct their questions regarding student screenings to their child’s teacher, principal, or <a href="mailto:CovidResponse@Cantalician.org">CovidResponse@Cantalician.org</a>.</p> <p>When Internet access is problematic for families, the school will: provide equitable instruction and/or work in collaboration with the family and the student’s school district to attain Internet access resources.</p>
<p>Student Face Coverings</p>	<p>Any student who is over age two (2) and able to medically tolerate a face-covering shall be encouraged to cover their nose and mouth with a cloth face-covering when in a public place and unable to maintain, or when not maintaining physical distance.</p> <p>Students can use their own acceptable face coverings.</p> <p>The school will provide students with acceptable face coverings and maintains an adequate supply of face coverings in case of replacement.</p> <p>Face coverings must be cleaned or replaced after use or when damaged or soiled, will not be shared, and should be properly stored or discarded. If</p>

	<p>personal cloth face coverings are used, they must be washed frequently by the parent/guardian at home.</p> <p>Disposable surgical masks will be discarded in the trash. Face coverings are strongly encouraged at all times, except for meals and instruction with appropriate physical distancing.</p> <p>The school will train all students on how to adequately put on, take off, clean (as applicable), and discard including but not limited to, appropriate face coverings.</p> <p>Students who are able to wear a mask or cloth face-covering are required to wear them:</p> <ul style="list-style-type: none"><li>• Any time students are less than three (3) feet apart from one another</li><li>• Upon entry to the building</li><li>• While in any common spaces (for example, hallways, bathrooms, cafeteria)</li><li>• When in tightly confined spaces occupied by more than one individual at a time</li><li>• When there is more than one occupant in a school vehicle</li></ul> <p>Masks or cloth face-coverings do not need to be worn when:</p> <ul style="list-style-type: none"><li>• At least three (3) feet of physical distance is able to be maintained</li><li>• In-person gatherings when held in an open, well-ventilated space with appropriate physical distancing among students</li></ul> <p>Exceptions to mask/face covering requirements will be made for those for whom it is not possible due to medical conditions, disability impact, or other health or safety factors. Face coverings should not be placed on:</p> <ul style="list-style-type: none"><li>• Children younger than 2 years old</li><li>• Students where such covering would impair their health or mental health</li><li>• Covering would present a challenge, distraction, or obstruction to education services and instruction</li><li>• Anyone who has trouble breathing or is unconscious</li><li>• Anyone who is incapacitated or otherwise unable to remove the cloth face covering without assistance</li></ul> <p>Mask or face covering breaks should occur throughout the day. Breaks should occur when students can be three (3) feet apart and ideally outside, during mealtimes and snack time, and water breaks. Additionally, a break is granted if the child requests.</p> <p>On June 4, the State Health Commissioner Howard Zucker released a letter he sent to the Director of the CDC regarding a potential change to the use of masks in school. In short, he indicated the state was aligning end of the</p>
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	<p>school year mask guidance with the mask guidance previously released, which minimally includes:</p> <ul style="list-style-type: none"> <li>• Indoors, mask use will be strongly encouraged but not required for students, campers, and staff/teachers/counselors who are not fully vaccinated.</li> <li>• Outdoors, masks are not required; students, campers, and staff who are not fully vaccinated are “encouraged” to wear a mask in certain higher-risk circumstances.</li> <li>• Both indoors and outdoors, students, campers, and staff who are fully vaccinated do not need to wear masks.</li> <li>• Schools and camps may choose to implement stricter standards.</li> </ul> <p>While we wait for further information and guidance, all students and staff <u>must</u> continue to follow our current practice of wearing masks as we await a NYSDOH statement officially changing the mask guidance.</p>
Staff Face Coverings	See <i>Appendix C: Required Use of a Face Covering</i>
PPE Supplies	See <i>Appendix D: Purchasing of PPE and Supplies</i>
Staff Physical Distance Guidelines	See <i>Appendix E: Physical Distancing</i>
Limiting Building Access	<p>Visitors to the building will be limited. Limitations include employees who are not otherwise scheduled to work on a given day. Restroom facilities will be restricted to use by students and employees only.</p> <p>Visitors will only be permitted entry through the main entrance and will be required to buzz for entry to the building. Only visitors with scheduled meetings with an employee in the building should be allowed in.</p> <p>Visitors will be required to successfully complete the health screen including temperature, sanitize their hands upon entry to the building and wear a face covering before being allowed entry. Disposable face coverings will be available for those who need one.</p> <p>Mail carriers will be met in the vestibule to exchange incoming and outgoing mail.</p> <p>Deliveries are made to the entrance vestibule. Delivery people are required to wear a face covering when entering the building. Physical distancing will be practiced.</p>

	<p>Parents/Guardians who are unable to adhere to face covering requirements must notify the facility ahead of their arrival for instructions.</p> <p>Applications for employment will only be accepted on-line.</p> <p>Signage advising all visitors of the face covering requirement, health screen, physical distancing, and facility contact information for questions are posted conspicuously at all entrances.</p> <p>Effective June 9, 2021, visitors are permitted for special events, tours, visits to classrooms, or other pertinent meetings related to their child’s therapy or instructional services. Proper health screening is required.</p> <p>On June 4, the State Health Commissioner Howard Zucker released a letter he sent to the Director of the CDC regarding a potential change to the use of masks in school. In short, he indicated the state was aligning end of the school year mask guidance with the mask guidance previously released, which minimally includes:</p> <ul style="list-style-type: none"> <li>• Indoors, mask use will be strongly encouraged but not required for students, campers, and staff/teachers/counselors who are not fully vaccinated.</li> <li>• Outdoors, masks are not required; students, campers, and staff who are not fully vaccinated are “encouraged” to wear a mask in certain higher-risk circumstances.</li> <li>• Both indoors and outdoors, students, campers, and staff who are fully vaccinated do not need to wear masks.</li> <li>• Schools and camps may choose to implement stricter standards.</li> </ul> <p>While we wait for further information and guidance, all students and staff <u>must</u> continue to follow our current practice of wearing masks as we await a NYSDOH statement officially changing the mask guidance.</p>
<p>Cleaning and Disinfecting Protocols</p>	<p>See <i>Appendix F: Hygiene and Cleaning</i></p>
<p>School Safety Drills</p>	<p>The school recognizes conducting drills is an important part of keeping students and staff safe in an emergency, however, steps will be taken to minimize the risk of spreading infection while conducting drills. As per guidance from NYSED, modifications to drills will be made with consideration made to the needs of our students. Staff and students will be made aware of all changes/modifications to drill procedures.</p> <p>Regardless of the modifications made to conducting drills, staff and students will be reminded that if an actual emergency occurs, the most</p>

	<p>imminent concern is to get to safety. Maintaining physical distancing in an actual emergency that requires evacuation or lockdown may not be possible and should not be the first priority.</p> <p>Drills may be conducted on a “staggered” schedule, where classrooms evacuate separately rather than all at once, and appropriate distance is kept between students to the evacuation site. Drills will include all staff members including administration and administrative employees.</p> <p>Drills will be conducted so all students and staff have the opportunity to participate in the drills and will accommodate for changes in schedule.</p> <p>The alarm system is tested quarterly.</p> <p>Also See <i>Appendix G: Physical Distancing</i></p>
<p>Accommodations for Students Who are at High-risk</p>	<p>When a student is unable to wear a face covering and/or physical distance due to their disability, medical condition/needs, behavioral/emotional needs, staff will be expected to follow the PPE guidelines outlined in this plan while working with the student.</p> <p>Students are provided instruction and accommodations to increase tolerance to wear a face covering and understanding of PPE guidelines (social stories, verbal prompting, and reinforcement plan).</p> <p>Students are provided alternate means of instruction, such as Teletherapy and remote instruction.</p>
<p>Signage</p>	<p>Signs will be posted throughout the school building consistent with DOH COVID-19 public health protections against COVID-19.</p> <p>Hand washing signs are posted in all bathrooms and next to all sinks. Respiratory hygiene signs are posted in each room in the school, throughout hallways and shared areas.</p>
<p>COVID-19 Resource Persons</p>	<p><b>Primary:</b>                  Patricia Lipka, Agency Nurse Coordinator                  2049 George Urban Boulevard, Depew NY 14043  <a href="mailto:plipka@cantalician.org">plipka@cantalician.org</a>                  716-901-8796                  716-901-8797                  Health Clinic</p> <p><b>Secondary:</b>                  Brian Kindron, Training and Safety Specialist                  2049 George Urban Boulevard, Depew NY 14043  <a href="mailto:bkindron@cantalician.org">bkindron@cantalician.org</a>                  716-901-8883                  Administrative Offices Area</p>



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<b>FACILITIES</b>	
Physical Space and Room Configuration Considerations	<p>Preparation to reconfigure classrooms with a focus on increasing distance between students and the teacher/therapist as much as possible.</p> <p>These steps may include:</p> <ul style="list-style-type: none"> <li>• Removal of gathering rugs in classrooms</li> <li>• Removal of classroom gathering spaces (couches, tents, etc)</li> <li>• Removal of unnecessary furniture to increase available space for physical distancing</li> <li>• Reallocation of classroom/therapy spaces as needed</li> <li>• Remove items not immediately needed or necessary to allow for better physical distancing. Items such as furniture, toys, and difficult to clean learning materials will be put into storage</li> <li>• Change in furniture type</li> <li>• Face students desk in the same direction</li> <li>• Use floor tape to designate spaces and distances between students, staff, and objects</li> <li>• Store loose items in covered bins</li> <li>• Limit the accessibility of instructional supplies, materials, and objects</li> <li>• Only keep necessary instructional supplies, materials, and objects in the classroom or therapy space</li> <li>• Decrease the number of objects in the classroom students are likely to touch, manipulate, or use</li> <li>• External storage units have been purchased to store materials</li> </ul>
Building Access	<p>After-hours usage of the building by other organizations is limited.</p> <p>Staff and students utilize multiple entrances for entering/exiting the building.</p>
Barriers	<p>The reception area is outfitted with Lexan to prevent the spread of infection.</p> <p>Portable table top dividers are for use with students in therapy areas and some classrooms.</p> <p>Classrooms will utilize current dividers or furniture to assist with physical distancing and create separate physical areas for students to work in.</p>
Sinks and Hand Sanitizers	<p>Bathroom facilities, including sinks for hand washing, are readily available for frequent hand hygiene. Adult supervision will always be present when students are washing their hands.</p> <p>Many classrooms have hand washing facilities (bathrooms) inside.</p>

	<p>Staff have access to numerous locations for hand washing.</p> <p>Each classroom is outfitted with approved hand sanitizer.</p> <p>Hand sanitizer dispensers are located throughout the building. They are in classrooms; therapy spaces; hallways; at entrances; and in administrative locations.</p>
Doors and Windows	<p>Any door approved to be in a maintained, open position will be opened to improve air flow in the building.</p> <p>All classrooms are designed to use make-up air that is filtered from the outside fresh air, therefore windows do not need to be opened for additional fresh air.</p>
Drinking Fountains	<p>Two no-touch water bottle filling fountains are in the school.</p> <p>Water fountains are limited to bottle or cup fill up only.</p> <p>Students may use water bottles during the school day.</p>
Ventilation	<p>Mechanical make-up air units bring in outside air that is filtered. These units are checked regularly by an outside HVAC company.</p> <p>The current air purification technologies in place meets all industry standards.</p>
Cleaning/Disinfecting Procedures	<p>See <i>Appendix F: Hygiene and Cleaning</i></p>

<b>NUTRITION</b>	
<b>Food Handling Procedures</b>	<p>The Buffalo Public Food Service Department will continue to comply with Child Nutrition Program requirements, including all applicable health and safety guidelines, whether we are serving meals to our children in-person or remotely. This includes providing school breakfast and lunch options to students each day who are enrolled in the School Food Authority (SFA). This includes students while in attendance at school and those learning remotely.</p> <p>All applicable health and safety guidelines are followed.</p> <p>Alterations to the kitchen and cafeteria are made to meet the physical distance guidelines; including floor marking, signage, etc.</p> <p>Food service workers are monitored on a daily basis; by completing Cantalician Center’s daily Health Screen questionnaire and temperature check in addition to self-reporting any COVID -19 symptoms that may develop throughout the day.</p> <p>All food service staff are required to wear face coverings, gloves, and hairnets at all times while prepping and servicing food.</p> <p>Students eat all meals in their classrooms while following federal and state guidelines.</p> <p>Use of the salad bar and condiment/beverage stations are suspended.</p>
<b>Food Allergies</b>	<p>Kitchen staff are provided a list of student allergies and updated as needed.</p> <p>Signage is posted in student eating areas indicating allergies within that area.</p> <p>Cantalician Center will continue to train teachers/staff on food allergies, including symptoms of allergic reactions to food.</p> <p>Cantalician Center will train all non-food service staff on any meal service-related activities they will be responsible to perform.</p> <p>All food transported from the kitchen to the classroom will be individually sealed or contained to prevent cross contamination.</p>
<b>Meal Consumption and Eating Locations</b>	<p>All meals, beverages and utensils provided by the kitchen will be individually prepared and packaged.</p> <p>All student meals will be served in their classrooms.</p>

	<p>Meals will be sorted by classrooms and individually packaged for pick-up or transport to the classroom.</p> <p>All eating surfaces will be cleaned and sanitized before and after meals.</p> <p>All student feeding protocol and plans remain in place.</p> <p>Staff wear appropriate PPE while assisting students.</p> <p>When possible and available physical barriers are utilized to separate students while eating.</p> <p>Students will eat facing the same direction.</p>
Hygiene	<p>Students are trained in proper hand washing techniques following signage and steps posted in all bathroom and sink areas.</p> <p>Students are required to hand wash before and after all meals. Hand sanitizer is available in all classrooms to be used as needed.</p> <p>Staff are required to hand wash before serving.</p> <p>Staff are required to wear gloves while serving and assisting students.</p> <p>All food and beverages are individually wrapped and served.</p> <p>Sharing of food and beverages is prohibited.</p> <p>Teachers present and discuss new expectations and rules during mealtimes using a variety of tools and visual supports.</p> <p>Families are informed of the guidelines for sending in food for their child; including meals, snacks and beverages.</p>
Accommodations	<p>Families will receive monthly menus and are provided access to the daily nutritional values. This includes utilizing a variety of methods such as the school’s website, printed mailings, e-mails etc. to inform our families.</p> <p>Our Food Service provider postings have access to Google Translate for multiple languages.</p>

<b>TRANSPORTATION</b>	
Bussing	Transportation remains the responsibility of each student's home school district (school age student) or county (preschool student).

<b>SOCIAL EMOTIONAL WELL-BEING</b>	
Overview	<p>Students may have experienced trauma during their time away from the school building, their routine, and educational and therapeutic services. Trauma produces alterations in mood, focus, concentration, memory, behavior, emotions, and trust. A deep understanding of how stress and trauma affect the brain and body can help guide our response, a response that needs to be comprehensive, holistic, multi-dimensional, and specific. By incorporating both social-emotional learning (SEL) and an asset-based, culturally sensitive trauma-informed lens, the school will create a foundation for supporting whole child development.</p>
Curriculum	<p>The social-emotional learning skills or the five-core social-emotional competencies, as identified by the Collaborative for Academic, Social and Emotional Learning (CASEL) are the foundations for young people's well-being: self-awareness, social awareness, self-management, relationship skills, and responsible decision-making.</p> <p>The school utilizes a School Counseling Plan, under the direction of a certified school counselor to meet the current needs.</p> <p>The school utilizes an advisory council, shared decision-making, school climate team, or other collaborative working group comprised of families, students, members of the board of directors, school leaders, community-based service providers, teachers, certified school counselors, and other pupil personnel service providers, including school psychologists, to inform the School Counseling Plan.</p> <p>The school provides resources and referrals to address mental health, behavioral, and emotional support services and programs as outlined in the School Counseling Plan.</p> <p>The school provides professional development opportunities for staff on how to talk with and support students during and after the ongoing COVID-19 public health emergency. The counseling plan identifies supports for developing coping and resilience skills for students.</p>
Ukeru	<p>Ukeru includes verbal and nonverbal communication, managing and de-escalating conflict by converting/diverting aggression, building an environment focused on comfort versus control, and recognizing traumatic experiences of students who receive services for developmental and behavioral needs. It also involves a system of blocking techniques to protect oneself and others during behavioral episodes including physical aggression. The use of Ukeru decreases the physical contact between staff and students.</p>
Professional Development	<p>On-going professional development opportunities are provided to staff.</p>

	<p>Integration of social-emotional learning (SEL) in their teaching, including the skills to foster positive learning environments and techniques for embedding SEL into instruction (in-person and remote and/ or virtual instruction).</p>
<p>Awareness and Outreach</p>	<p>The school creates opportunities for staff and students to regularly practice and reflect on their social and emotional competencies.</p> <p>Cantalician Center contracts with mental health professionals to meet the needs of our school community.</p> <p>The school provided a survey to families to assist in notifying the school of their mental health and other needs.</p>
<p>Family and Parent Engagement</p>	<p>The school counselor will continue work with current parent group to assist in developing a community of stakeholders participate in advisory council.</p> <p>A committee has been established to ensure SEL curriculum continues to meet the needs of our students and families.</p> <p>The committee reaches out to family members and staff to regularly answer questions and address concerns.</p> <p>Parents will be introduced to SEL Curriculum.</p> <p>The committee provides families with a list of outside resources to address other emotional/mental health needs.</p>



<b>SCHOOL SCHEDULES</b>	
Time Adjustments	<p><b>Arrival and Dismissal:</b></p> <ul style="list-style-type: none"> <li>• Will occur at a designated location</li> <li>• Vehicle flow and logistics will accommodate anticipated increase of parent transports</li> <li>• If parents are signing out at a time other than arrival or dismissal, the procedure will take place in a specified location</li> <li>• Drop-off items for students during the day are limited to essential items</li> </ul>
Signage	Signage identifying parent and bus arrival and dismissal locations are posted outside.
Building Traffic Patterns	<p>Cantalician Center has designed measures to reduce foot traffic and encourage physical distancing using tape or signs with arrows in hallways/spaces throughout the school. Posted signage and distance markers denote spaces of (3) three feet in all commonly used areas and any areas in which lines are commonly formed or people may congregate (e.g., outdoor spaces, classrooms, cafeterias, health screening stations).</p> <p>Interactions of students between drop-off and entrance to school building is limited.</p> <p>Staggered arrival and drop-off times and locations are in place to limit contact between students/staff and direct contact with parents as much as possible.</p> <p>Four separate entrances and exits to school building have been established.</p> <p>Co-mingling between cohorts and large group gatherings will occur only when necessary. Group Speech session may commence effective June 1.</p>
Cohorts	Time when students remain together as a class within a specific learning or therapy space is maximized.

<b>ATTENDANCE AND CHRONIC ABSENTEEISM</b>	
Documentation of Daily Attendance	<p>The teacher collects and documents each of their student’s daily attendance.</p> <p>To be considered present while remote and in-person:</p> <ul style="list-style-type: none"> <li>• The student has arrived early or late to school</li> <li>• The student arrives to school, is sick and goes to the nurse’s clinic</li> <li>• The student receives education or therapeutic services</li> <li>• The student participates/engages in distance/at-home learning</li> <li>• The student independently learns/practices skills in their home without direct instruction from a teacher</li> <li>• The student participates in a therapy session</li> </ul> <p>Given the specific learning needs of each student, the teacher/therapist utilizes judgment as to how much the student should be actively engaged to be considered present.</p> <p>Given remote instruction, teachers are encouraged to establish a pre-determined schedule with the parent on when the student will be engaging in instruction. This allows for attendance documentation during the school day even if the student independently learns/practices skills in their home after regular attendance hours.</p>
Truancy	<p>The Cantalician Center for Learning will use progressive measures to address student truancy that is intermittent or chronic. These measures include parent or guardian phone conferences, parent or guardian meetings, a phone call to the child’s Care Coordinator (if applicable), written correspondence to the parent or guardian, written correspondence to the child’s home school district, and referrals to Child Protective Services.</p>
Promoting Attendance and Participation	<p>The teacher will gain an understanding of when/how often/what methods the parent prefers to communicate. This can be completed via phone call, email, or paper document.</p> <p>The student’s distance learning schedule is created in collaboration with the parent, teacher, and therapist.</p> <p>Flexibility on behalf of the parent, teacher, and therapists is essential in meeting each student’s scheduling needs.</p> <p>Teachers and therapists are encouraged to use a variety of medium to communicate with parents and colleagues (e.g. Zoom, email, phone calls).</p>

	<p>Parents can email <a href="mailto:CovidResponse@Cantalician.org">CovidResponse@Cantalician.org</a> with any questions or concerns. Up-to-date information is available on the school’s social media platform and website.</p>
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<b>TECHNOLOGY AND CONNECTIVITY</b>	
<p>Providing Access to Devices and Internet</p>	<p>Survey families for the following:</p> <ul style="list-style-type: none"> <li>• Available devices/services that families have access to</li> <li>• Level of access to devices, specific time/length of time needed to access distance learning platforms and Internet access students have in their place of residence, including high speed internet.</li> <li>• Assistance needed in training for technology/devices/programs being used.</li> </ul> <p>Trainings are provided in Google Classroom for families to access.</p>
<p>Encouraging Student Participation</p>	<p>The school provides ways to demonstrate mastery of Learning Standards through multiple modalities (recorded video/audio, written transcripts, etc.).</p> <p>Instruction is provided to enable access at a later time to families for learning (recorded sessions).</p> <p>Paper copies are available to supplement technology.</p> <p>Developed system for families to provide information, feedback, and materials to school staff.</p>
<p>Professional Development</p>	<p>The school provides professional development to staff on designing effective remote/online learning experiences and best practices for instructions in remote/online setting.</p> <p>Trainings are provided via recorded video, printed materials, online trainings and one-on-one support.</p>
<p>IT Support and Data Privacy</p>	<p>The school’s established distance learning support person can be reached at: <a href="mailto:distancelearning@cantalician.org">distancelearning@cantalician.org</a></p> <p>The school possesses a video library with tutorials for students, teachers, and families on technology use.</p> <p>Data privacy and security is maintained and follows Federal and State laws related to student/staff technology use.</p> <p>The school has condensed the number of technology platforms being used by staff to ensure effectiveness and safety of the digital tools.</p>
<p>Creating Equal Access and Providing Flexibility</p>	<p>The school provides flexibility to decrease stress and increase equitable access for students and families. Examples to include weekly instead of daily deadlines and choice boards with activities requiring varied levels of technology access.</p>

	<p>The school provides multiple modality activities (e.g. hard copy, online activities etc.) to allow for flexibility in technology and connectivity issues. The school collaborates with home districts to help provide students with technology/ internet access necessary to ensure educational equity.</p> <p>Cantalician Center can make requests to add digital platforms onto devices they have assigned to individual students to allow for digital learning.</p>
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<b>TEACHING AND LEARNING</b>	
Overview	<p>The school’s re-opening plan provides for regular substantive interaction between teachers/therapists and students whether delivered in-person, remotely, or through a hybrid model of instruction. All instruction has been developed so that whether delivered in- person, remotely, or through a hybrid model due to a local, state school closure, there will be clear opportunities for instruction that are accessible to all students. Such opportunities are aligned with state standards, Individualized Education Plans (IEP), and include routine scheduled times for students to interact and seek feedback and support from their teachers/therapists.</p> <p>The school created a clear communication plan and parent resources for how students and their families/caregivers can contact the school and service providers with questions about their instruction and/or technology. This information is accessible to all, available in multiple languages, widely disseminated, and include clear and multiple ways for students and families to contact schools and providers (e.g., email, online platform, and/or by phone).</p> <p>Opportunities were provided for staff to meet prior to the start of school to discuss individual student needs and share best practices with in-person, remote, or hybrid models of learning.</p> <p>Alterations to the student’s model of instruction can be based on individual student need as determined by the school and family.</p> <p>At the request of the parent, siblings will follow the same instructional model.</p> <p>If the parents/guardians choose not to send their child back to school after consulting with the district and their medical professionals, vulnerable students will be offered a virtual instructional model.</p>
Instructional Equipment and Supplies	<p>Classrooms and therapy spaces have adequate supplies in order to minimize sharing of high touch materials to the extent possible (art supplies, music equipment, general classroom supplies) or use of supplies and equipment is limited to one group at a time. Supplies are cleaned and disinfected after use.</p>
Access to Instruction and Therapy	<p>In accordance with the Individuals with Disabilities Education Act (IDEA) and ensuring the provision of Free and Appropriate Public Education (FAPE), each student with a disability has unique needs and it is the purpose of the education system to ensure every student has access to their grade-level standards and makes progress in their education. The IEP is the roadmap for each student with a disability. In these challenging and evolving times including COVID-19 restrictions, it is critical that the IEP</p>

	<p>team meets and works collaboratively with the family to jointly determine appropriate services, accommodations, and modification to allow for the greatest access and academic success.</p>
Engaging Families Regardless of their Home Languages(s)	<p>The school engages families through various means. These include virtual instruction through Teletherapy, Google Classroom, Zoom meetings, phone calls, email, and printed materials. Parent - teacher/therapists conferences are scheduled to engage families on a regular basis.</p>
Communication	<p>The school provides regular communication to families responsive to recent changes/developments. Communications regarding academic instructional outlines, technological assistance, and mental health support are the foundation of these communications. Additionally, logistics of school closure and its implications on instructional delivery are communicated to families.</p> <p>Parents are encouraged to be an active participant in their child’s education. Given the instructional model in place, parents should express any concerns to their child’s principal.</p> <p>The school utilized the USPS and School Messenger to send mail, robo-calls/text messages to families. The school also utilizes social media to share information with the school community.</p> <p>Teachers and therapists communicate with families via email, telephone, and Google Classroom to provide insight on student engagement and progress.</p>
Assessment	<p>Staff allows ample time for students to re-adjust to the school setting. Before students are assessed, time will be spent focusing on socialization and creating a climate of safety, comfort, and routine.</p> <p>Student needs are assessed through data tracking, progress monitoring, and regular feedback from families.</p> <p>The New York State Alternate Assessment is administered virtually for those students who are eligible.</p>
Preschool	<p><b>Food service:</b></p> <ul style="list-style-type: none"> <li>• All meals are delivered and served in the classroom</li> <li>• Children are served by individual trays</li> <li>• Physical distancing spaces children accordingly and appropriately using the tables available in the rooms</li> <li>• Students are encouraged to develop their independence by disposing of their trays one at a time to avoid close proximity</li> </ul> <p><b>Toileting and Hygiene:</b></p> <ul style="list-style-type: none"> <li>• All preschool classrooms have a bathroom in the room.</li> </ul>

	<ul style="list-style-type: none"> <li>• According to prior practice, one child at a time will use the bathroom and use proper handwashing protocols with adult supervision</li> </ul> <p><b>Rest Time:</b></p> <ul style="list-style-type: none"> <li>• If nap time is taken, children will be spaced with their heads spaced (3) three feet apart (utilizing “head to toe” positioning”)</li> <li>• Mats will be sanitized following use</li> </ul> <p><b>Physical Distancing:</b></p> <ul style="list-style-type: none"> <li>• Centers that may include multiple students such as sensory materials, sand and water tables will not be used</li> <li>• Should a child require sensory materials, materials would be provided individually and stored separately</li> <li>• An activity requiring more than one child has an adult present to facilitate the activity and interactions</li> <li>• Placement of classroom furniture (shelves, dividers, etc) encourages physical distancing</li> </ul> <p><b>Cleaning and sanitizing:</b></p> <ul style="list-style-type: none"> <li>• Following the use of center materials, items are placed in “yuck bucket” to be sanitized</li> <li>• Disinfecting of furniture and materials occurs after use</li> <li>• Items which are difficult to clean are removed from the classroom and placed in storage (stuffed animals)</li> </ul> <p><b>Learning Experiences:</b></p> <ul style="list-style-type: none"> <li>• Individualizing learning opportunities to include: video-conferencing/Zoom sessions; packets of materials mailed home; pre-recorded lessons on Google Classroom; and use of “Go Bags” (materials kept at home)</li> <li>• Teachers encourage parents to provide “natural” learning experiences in the home (example: sorting; color identification while doing laundry)</li> <li>• Frequent communication occurs with parents to determine the best plan for each child and family</li> <li>• Plans are flexible and based on current and/or changing needs of the family</li> </ul>
In-Person Model	All students will attend school in the physical building for a full day on each scheduled school day with established precautions for maintaining health and safety. Physical distancing measures are in place and face



	<p>coverings are to be worn. Using this model, students are actively involved in the school learning environment. In addition, instructional programs, for the most part, will remain their current integrity.</p> <p>A parent may request their child only receive therapy services when scheduled to attend school in-person (e.g. parent transports their child to/from school for a 30-minute speech therapy session).</p> <p>A parent may request their child to receive instructional services remotely when scheduled to attend in-person.</p> <p>These requests will be reviewed on a case-by-cases basis between the parent, teacher, therapists, and principal.</p> <p>On June 4, the State Health Commissioner Howard Zucker released a letter he sent to the Director of the CDC regarding a potential change to the use of masks in school. In short, he indicated the state was aligning end of the school year mask guidance with the mask guidance previously released, which minimally includes:</p> <ul style="list-style-type: none"> <li>• Indoors, mask use will be strongly encouraged but not required for students, campers, and staff/teachers/counselors who are not fully vaccinated.</li> <li>• Outdoors, masks are not required; students, campers, and staff who are not fully vaccinated are “encouraged” to wear a mask in certain higher-risk circumstances.</li> <li>• Both indoors and outdoors, students, campers, and staff who are fully vaccinated do not need to wear masks.</li> <li>• Schools and camps may choose to implement stricter standards.</li> </ul> <p>While we wait for further information and guidance, all students and staff <u>must</u> continue to follow our current practice of wearing masks as we await a NYSDOH statement officially changing the mask guidance.</p>
<p>Hybrid Model</p> <p>See <i>Appendix H, I, L</i></p>	<p>Daily student in-person population would be reduced approximately 50%</p> <p>Remote learning will take place when students are not scheduled for in-person services. Current school day hours would remain.</p> <p><b><u>Mondays &amp; Tuesdays (Group A)</u></b></p> <p>Approximately 50% of a classroom cohort attends in person.</p> <p><b><u>Wednesdays (Group A &amp; B are Remote)</u></b></p>

	<p>Instruction is conducted virtually through online methods. Students will be provided with knowledge acquisition activities and teachers will produce video, assignments and activities for the days of remote instruction. Parent – teacher/therapists meetings conferences. Intensive sanitization and specialized cleaning will also occur on this day.</p> <p><b><u>Thursdays and Fridays (Group B)</u></b></p> <p>Approximately 50% of a classroom cohort attends in person.</p> <p><b>Note:</b> A parent may request their child only receive therapy services when scheduled to attend school in-person (e.g. parent transports their child to/from school for a 30-minute speech therapy session).</p> <p>A parent may request their child to receive instructional services remotely when scheduled to attend in-person.</p> <p>These requests will be reviewed on a case-by-cases basis between the parent, teacher, therapists, and principal.</p>
<p>Remote Instruction and Teletherapy</p>	<p>Students will not attend school in the physical building. Instruction is conducted virtually through online methods. Google classroom is used to plan, deliver, and manage the learning content for Hybrid/Remote instruction. Learning content may include documents, videos, learning activities, and assessments.</p> <p>Teletherapy is being defined as the use of electronic information and communication technologies to deliver therapy services to students at a distance. Medicaid covered services provided via Teletherapy (telephonic, video communications) include assessment, consultation, treatment, and education of a student. This methodology engages audio and/or video technology to connect providers with students, parents or other caregivers in ways that support the student’s learning and development.</p> <p>The school uses applications that allow for video chats, including Apple FaceTime, Facebook Messenger video chat, Google Hangouts video, Zoom, or Skype, to provide Teletherapy. However, Facebook Live, Twitch, TikTok, and similar video communication applications are public facing, and will not be used in the provision of Teletherapy.</p> <p>Also, see <i>Appendix G: Distance Learning Platform – Instructions for Family Access</i></p>

SPECIAL EDUCATION	
<p>Guaranteeing FAPE</p>	<p>Cantalician Center will implement the IEP developed by the student’s CPSE/CSE in the most appropriate way possible based on the established service delivery model. Additionally, special attention will be paid to students requiring intensive support or those who may benefit from tele-practice.</p> <p>Cantalician Center will utilize multiple modalities (e.g. phone calls, texts, letters, automated calls, social media, video conferencing and etc.) to ensure communication is clear, concise and up to date. Parents are essential stake holders in their child’s education and will be consulted, as appropriate, with regard to service provision. Communication with parents will be in their preferred language as requested by the parent.</p> <p>Due to the varied needs and abilities of the students enrolled, in-person services may be limited based on the ability to meet the necessary CDC guidelines. However, understanding in-person services are preferred over virtual, plans will be established to provide students with some in-person services. This may be in the form a hybrid/blended model (a combination of in-person and virtual). Plans will be established to re-evaluate the chosen model as guidelines are updated to provide in-person services as often as possible.</p> <p>This re-opening plan ensures access to the necessary accommodations, modifications, supplementary aids and services and technology (including assistive technology) to meet the unique disability related needs of students.</p>
<p>Collaboration and Planning</p>	<p>Cantalician Center will continue to utilize a one person contact with the appropriate CPSE/CSE contacts through their IEP Coordinator. This is position ensures all communication is disseminated efficiently to all necessary parties. This position will continue to work with instructional staff to develop and recommend IEP updates/changes to be presented at CPSE/CSE meetings. This position will utilize phone calls, e-mails, USPS and etc. to provide the necessary paperwork in a timely manner.</p> <p>Through collaboration of instructional and CPSE/CSE teams, which include the parent, conversations will center on how a student learns best and access to needed resources. If the school does not have the needed/ requested resources, the CPSE/CSE will be contacted for assistance.</p>

<p>Documentation</p>	<p>Related Services will continue to develop service delivery notes detailing each session with a student. These notes are available to parents upon request. Related Services and Classroom Teachers will complete Progress Reports based on a pre-determined schedule and in accordance with the student's IEP. These reports are sent to the parents quarterly or in accordance with the IEP. All parents will receive paper /electronic copies of Progress Reports, Progress Summaries, Transition Assessments and etc. as appropriate or requested. Documentation will be provided to the parent in their preferred language or mode of communication, as requested by the parent.</p>
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Budget	
Expenses and Revenue	<p>Cantalician Center’s annual budget has been adjusted to forecast, track and account for COVID-19 related expenses. Additional revenue sources include</p> <p>The Cantalician Center will work with /petition its NYED RSU accountant when seeking tuition reimbursement to meet the additional costs of providing services during the COVID-19 emergency.</p>
Enrollment	<p>Student enrollment will be maintained per Cantalician Center’s Preschool and School Age SED approval letter. The school will work with families on the type of service delivery model that maximizes student engagement in instruction and therapy.</p>

Appendix A

**Cantalician Center for Learning  
Standard Operating Procedure**

<b>TITLE:</b>	COVID-19 Guidance – Screening and Testing Requirements
<b>DOCUMENT OWNER:</b>	CC/QA Coordinator
<b>EFFECTIVE DATE:</b>	6/1/2020
<b>DATE OF LAST REVISION:</b>	6/15/2020; 6/26/2020; 7/15/2020; 7/20/2020; 7/28/2020

**Scope of Procedure:**

This procedure applies to all employees, visitors, and person receiving services.

The following guidance was used to create this procedure: *Reopening New York Forward Business Re-Opening Plan*.

- “Each re-opening business must develop a written Safety Plan outlining how its workplace will prevent the spread of COVID-19. A business may fill out this template to fulfill the requirement, or may develop its own Safety Plan. This plan does not need to be submitted to a state agency for approval but must be retained on the premises of the business and must made available to the New York State Department of Health (DOH) or local health or safety authorities in the event of an inspection. Business owners should refer to the State’s industry-specific guidance for more information on how to safely operate. For a list of regions and sectors that are authorized to re-open, as well as detailed guidance for each sector, please visit: [forward.ny.gov](http://forward.ny.gov).”
- These guidelines are minimum requirements only and any employer is free to provide additional precautions or increased restrictions. These guidelines are based on the best-known public health practices at the time of Phase II of the State’s reopening, and the documentation upon which these guidelines are based can and does change frequently. The Responsible Parties – as defined below – are accountable for adhering to all local, state and federal requirements relative to office-based work activities. The Responsible Parties are also accountable for staying current with any updates to these requirements, as well as incorporating same into any office-based work activities and/or Site Safety Plan.

The following guidance was used to create this procedure: *Interim Guidance Regarding the Reopening of Day Services Certified by the Office for People With Developmental Disabilities*.

- The program’s Safety Plan must describe procedures to operate the certified day program site or deliver day program service in accordance with the guidance document, Interim

Guidance Regarding the Reopening of Day Services Certified by the Office for People With Developmental Disabilities.

The following guidance was used to create this procedure: *Recovering, Rebuilding, and Renewing: The Spirit of New York's Schools – Reopening Guidance*.

- Focused on preventive actions, schools and districts will be required to perform health checks and screenings, per DOH guidance, and recognize signs and symptoms of illness in students and staff; develop plans to maximize social distancing; develop plans to manage and isolate ill persons until they can be sent home; instruct students and staff in proper hand and respiratory hygiene; require wearing appropriate face coverings; and develop cleaning and disinfection procedures for the school in accordance with CDC and DOH guidance.

**Procedures:**

1. *Responsible Parties must implement mandatory daily health screening practices of their employees and, where practicable, visitors, but such screening shall not be mandated for delivery personnel.*

*Screening practices may be performed remotely (e.g. by telephone or electronic survey), before the employee or visitor reports to the office, to the extent possible; or may be performed on site. Screening should be coordinated to prevent employees or visitors from intermingling in close contact with each other prior to completion of the screening.*

*At a minimum, screening is required for all employees or visitors and completed using a questionnaire that determines whether the employee has:*

- a) knowingly been in close or proximate contact in the past 14 days with anyone who has tested positive for COVID-19 or who has or had symptoms of COVID-19;*
  - b) tested positive for COVID-19 in the past 14 days; and/or*
  - c) has experienced any symptoms of COVID-19 in the past 14 days*
- All employees will have a COVID-19 Health Screen prior to beginning their workday. This health screen consists of a questionnaire and a temperature check. Any employees who typically work offsite or at another location, will be subject to the COVID health screening prior to gaining access to any Agency premises. Employees will be required to enter via the designated entrance for their site.
  - All visitors to a Cantalician worksite will have a COVID-19 Health Screen prior to gaining access to the premises for Agency purposes (maintenance of equipment, meetings, etc.) Visitors will be required to enter via the “designated visitor entrance”. This health screen consists of a questionnaire and a temperature check.
  - Due to the 6/24/2020 Executive Order, all employees and visitors will also be asked if they have recently traveled from a designated state with significant community spread in the last



14 days. The [designated states with significant community spread](#) will be conspicuously posted on the DOH website and will be updated weekly.

- All employees and visitors will be asked if anyone currently in their home is under quarantine or isolation.
- Employees will be able to print copies and complete the questionnaire prior to arrival or may have access to the questionnaire electronically.
  - A trained screener may ask the questions and enter the information into an electronic database.
- Employees with a chronic condition that may cause them to answer “yes” to symptoms of the questionnaire (e.g. coughing for asthma) will be asked to provide a medical note from their physician indicating as so. On days where they need to check off these symptoms for their chronic illness ONLY, they should be using the paper form where they can indicate as such without the electronic system flagging them.
- Hand hygiene stations are available at screening stations. All persons entering the site will be prompted to utilize them for hand hygiene upon entry.

### **For Employees**

Agency Representative/Designated Personnel:

1. Greet employee
2. Ensure employee has appropriate face mask, if not, one should be provided.
3. Obtain employee name and contact phone number
4. Read and document employee’s response(s) to the COVID-19 questionnaire
5. Take temperature and record whether it was below the established threshold on the COVID-19 questionnaire.
6. Employees who successfully complete health screen will report to their work area.
7. Employees whose health screen indicate potential exposure or symptoms will be excused from work for further medical follow-up.
  - Note: Temperatures of 100.4 degrees or higher will be immediately sent home. Employees will be instructed to consult their physician. Employees will be required to obtain a return to work clearance from their physician to include a COVID-19 test.
  - Employees testing positive will be required to quarantine for 14 days, and may return to work with a return to work note. (If employee is asymptomatic and position allows for teleworking, the division director may authorize continued work from home during the quarantine).

### **For Visitors**

- Visitors (essential) will have access to the questionnaire at the designated entrance.
  - A trained screener may also ask the questions and enter the information into an electronic database.

Agency Representative/Designated Personnel:

1. Greet Visitor.
2. Ensure visitor has appropriate face mask, if not, one is provided.
3. Obtain visitor name and contact phone number.
4. Read and document visitors' response to the COVID-19 questionnaire.
5. Take temperature and record whether it was below the established threshold on the COVID-19 questionnaire.
6. Visitors who successfully complete health screen will be allowed access to their designated area.
7. Visitors whose health screen indicate potential exposure or symptoms will be denied access to the building.
8. If a visitor indicates that they have recently traveled from a designated state with significant community spread in the last 14 days, they will be denied entry.
9. If a visitor indicates that anyone in their home is currently under quarantine or isolation, they will be denied entry.

Note: The health screen of the visitor must indicate a temperature below 100 F. In cases where a vendor representative is denied access, the responsible Agency party will contact the vendor and request alternate personnel or delay service provision as necessary.

Effective June 9, 2021, visitors to the Academic Campus are permitted for special events, tours, visits to classrooms, or other pertinent meetings related to their child's therapy or instructional services. Proper health screening is required.

### **For Service Recipients**

- Persons receiving services shall undergo the same process for screening.
  - If the agency is providing transportation, screening shall be done prior to the person entering the vehicle.
  - Supervisory level employees are responsible for oversight of the health screening protocol.
- 2. *Responsible Parties should coordinate with building managers to facilitate screening. Responsible Parties are responsible for screening their own employees and visitors, unless Responsible Parties and building management have agreed to an alternate arrangement to ensure screening is in effect.*

*Screening best practices include:*

*If space and building configuration allows, screen individuals at or near the building entrance to minimize the impact in case of an individual suspected or confirmed to have COVID-19; Allow for adequate social distancing while individuals queue for screening and/or building entry; Coordinate with building managers to identify individuals who have completed a remote screening; Use contactless thermal cameras in building entrances, in coordination with*

*building management, to identify potentially symptomatic visitors and direct them to a secondary screening area to complete a follow-on screening.*

- Trained agency personnel shall conduct health screenings.
  - Supervisory level employees or health care professionals are responsible for oversight of the health screening protocol.
- 3. *According to the CDC guidance on “[Symptoms of Coronavirus](#),” people with COVID-19 have had a wide range of symptoms reported, ranging from mild symptoms to severe illness. Symptoms of COVID-19 include, but are not limited to: cough, shortness of breath or difficulty breathing, fever, chills, muscle pain, sore throat, or new loss of taste or smell.*

*Responsible Parties should require employees to immediately disclose if and when their responses to any of the aforementioned questions changes, such as if they begin to experience symptoms, including during or outside of work hours. In addition to the screening questionnaire, daily temperature checks may also be conducted per U.S. Equal Employment Opportunity Commission or DOH guidelines. Responsible Parties are prohibited from keeping records of employee health data (e.g. temperature data)*

- Temperature checks shall be part of the health screen, but will not be maintained as part of the employee’s file, or the file of a person receiving services.
  - The questionnaire shall be designed to only record whether the person successfully passed the temperature check as per guidelines
- 4. *Responsible Parties must ensure that any personnel performing screening activities, including temperature checks, are appropriately protected from exposure to potentially infectious employees or visitors entering. Personnel performing screening activities should be trained by employer identified individuals who are familiar with CDC, DOH, and OSHA protocols.*
  - Employees providing the health screens shall receive training to do by so by qualified individuals (e.g. Nursing staff; Safety Officer).
  - All screeners shall have access to and utilize PPE while providing the screening – see procedures below

*Use of Barriers/Partition Controls for conducting temperature screenings (if applicable):*

- Employees should stand behind a physical barrier, such as a glass or plastic window or partition that can serve to protect the staff member’s face and mucous membranes from respiratory droplets that may be produced if the person being screened sneezes, coughs, or talks;
- Perform hand hygiene;
- Wash their hands with soap and water for 20 seconds. If soap and water are not available, use a hand sanitizer with at least 60% alcohol;

- Put on disposable gloves;
- Check the person's temperature, reaching around the partition or through the window;
- Make sure their face stays behind the barrier at all times during the screening;
- If performing a temperature check on multiple individuals, ensure that you use a clean pair of gloves for each person and clean the thermometer thoroughly between each check;
- If disposable or non-contact (temporal or infrared) thermometers are used and there was no physical contact with the person, you do not need to change gloves before the next check; and
- If non-contact thermometers are used, clean them with an alcohol wipe (or isopropyl alcohol on a cotton swab) between each student. You can reuse the same wipe if it remains wet.

*Use of Personal Protective Equipment when Barriers/Partition Controls are not available.*

- Upon arrival, employees should wash their hands and put on a facemask, eye protection (goggles or disposable face shield that fully covers the front and sides of the face), and a single pair of disposable gloves.
  - Take the person's temperature;
  - If performing a temperature check on multiple individuals, ensure that you use a clean pair of gloves for each person and clean the thermometer thoroughly between each check;
  - If disposable or non-contact (temporal or infrared) thermometers are used and there was no physical contact with an individual, you do not need to change gloves before the next check.
  - If a screener uses non-contact thermometers, clean them with an alcohol wipe (or isopropyl alcohol on a cotton swab) between each person. They can reuse the same wipe if it remains wet;
    - Use of an agency approved EPA product may be utilized and many be more appropriate in settings where alcohol-based products are not allowed (e.g. buses, agency vehicles).
  - After each screening, remove and discard gloves; and
  - Use an alcohol-based hand sanitizer that contains at least 60% alcohol or wash hands with soap and water for at least 20 seconds.
    - In settings where this may not be immediately available (e.g. in agency vehicles), employees may use hand sanitizing wipes until they are at a location where a hand hygiene station is available.
5. *An employee who screens positive for COVID-19 symptoms should not be allowed to enter and should be sent home with instructions to contact their healthcare provider for assessment and testing. Responsible Parties must immediately notify the local health department about any positive case. Responsible Parties should provide the employee with information on healthcare and testing resources.*
- If an employee's temperature is equal to or greater than 100.4 ° F, the employee shall be sent home immediately and asked to follow up with Human Resources.

- If greater than 100° F, but less than 100.4° F, take a second temperature reading after 15 minutes; if still **greater than 100° F**, the employee shall be sent home and asked to follow up with Human Resources.
- If an employee states they are currently experiencing, or have experienced in the past 14 days a fever (100°) or greater as measured by a thermometer), cough, or shortness of breath or difficulty breathing, they shall be sent home and asked to follow up with Human Resources.
- If an employee states they are currently experiencing, or have experienced in the past 14 days (2 or more symptoms), a sore throat, new loss of taste or smell, chills, head or muscle aches, or nausea/diarrhea/vomiting, the employee shall be sent home and asked to follow up with Human Resources.
- If the employee states they have received a Positive test result for COVID-19 within the past 14 days, they shall be sent home and asked to follow up with Human Resources.
- If an employee states that they have recently traveled from a designated state with significant community spread in the last 14 days, the employee shall be sent home and asked to follow up with Human Resources.

### **For Service Recipients**

The above process applies to persons receiving services as well.

- Individuals sent home from program shall consult with their healthcare practitioner prior to returning to the program;
6. *An employee who has responded that they have had close contact with a person who is confirmed or suspected of having COVID-19 may not be allowed to enter the site without abiding by the precautions outlined below and the Responsible Parties has documented the employee's or visitor's adherence to those precautions.*
    - Follow procedures of #11 below
  7. *Responsible Parties must review all employee and visitor responses collected by the screening process on a daily basis and maintain a record of such review. Responsible Parties must also identify a contact as the party for employees and visitors to inform if they later are experiencing COVID-19- related symptoms, as noted in the questionnaire.*
    - The screener shall review all responses.
    - The Coordinator of Nursing / Department Director / or Designee shall review all reports daily to identify any trends or concerns.
      - Reports from the Caseware system can be used for this review.
  8. *Responsible Parties must designate a site safety monitor whose responsibilities include continuous compliance with all aspects of the site safety plan.*
    - The Safety Officer and the Corporate Compliance and Quality Assurance Coordinator are responsible with oversight of the site safety plan.

9. *To the extent possible, Responsible Parties should maintain a log of every person, including employees and visitors, who may have close contact with other individuals at the worksite or area; excluding deliveries that are performed with appropriate PPE or through contactless means. Log should contain contact information, such that all contacts may be identified, traced and notified in the event an employee is diagnosed with COVID-19. Responsible Parties must cooperate with local health department contact tracing efforts.*
- Time sheets, questionnaires, calendars, assignment sheets, attendance sheets, databases, etc. serve as a log for employees and persons receiving services.
  - Questionnaires include contact information of visitors.

10. *Responsible Parties should designate a central point of contact, which may vary by activity, location, shift or day, responsible for receiving and attesting to having reviewed all employee questionnaires, with such contact also identified as the party for employees and visitors to inform if they later are experiencing COVID-19-related symptoms, as noted on the questionnaire.*
- The screener shall review all responses.
  - The Department Director / Coordinator of Nursing / or Designee will review all reports daily to identify any trends or concerns.

*When notified of a positive case of COVID-19, identified point of contact for occupying office spaces must notify the contacts for the building owner/operator of the positive cases and initiate the respective cleaning and disinfection procedures.*

- In the event of a positive case of COVID-19:
  - The Director of Employment Services shall notify Tri-Main ownership.
  - The Director of Community Services shall notify applicable building owners,
  - The Director of Human Resources would notify Facilities and applicable directors for agency-owned sites.

11. *Responsible Parties and employees should take the following actions related to COVID-19 symptoms and contact:*

*If an employee has COVID-19 symptoms AND EITHER tests positive for COVID-19 OR did not receive a test, the individual may only return after completing at least 14 days of self-quarantine. If an employee is critical to the operation or safety of an office, the Responsible Parties may consult the local health department where the building is located and the most up-to-date CDC and DOH standards on the minimum number of days to isolate before an individual is safely able to return to work with additional precautions to mitigate the risk of COVID-19 transmission.*

*If an employee does NOT have COVID-19 symptoms BUT tests positive for COVID-19, the individual may only return to work after completing at least 14 days of self-quarantine. If an*

*employee or visitor is critical to the operation or safety of a site, the Responsible Parties may consult the health department where the building is located and the most up-to-date CDC and DOH standards on the minimum number of days to isolate before an individual is safely able to return to work with additional precautions to mitigate the risk of COVID-19 transmission.*

*If an employee has had close contact with a person with COVID-19 AND is symptomatic, the individual should notify the Responsible Parties and follow the above protocol for a positive case. Even if symptoms are deemed not related to COVID-19, the individual must complete a 14-day quarantine after the contact.*

*If an employee has had close contact with a person with COVID-19 AND is NOT symptomatic, the individual must complete a 14-day self-quarantine. If the employee is critical to the operation or safety of an office AND is NOT symptomatic, the employee or visitor should notify the Responsible Parties and the health department where the building is located of their need to return to work. If approved to work, the employee must remain under quarantine at all times when not at work. The individual and employer must adhere to the following practices prior to and during their work shift, which should be documented:*

- 1) The employee or visitor must take their temperature before work to confirm they do not have a fever.*
- 2) Regular monitoring: If the employee or visitor does not have a fever or symptoms, they should self-monitor under the supervision of their employer's occupational health program.*
- 3) Wear a mask: The employee or visitor should wear a face mask at all times while in the workplace for 14 days after last exposure to a person with COVID-19. The employee or visitor may not share headsets or other objects used near the face.*
- 4) Social distance: The employee or visitor should continue social distancing practices, including maintaining, at least, six feet distance from others. The employee or visitor may not congregate in the break room or other crowded places (3ft. within the Academic Services).*
- 5) Clean and disinfect work spaces: Continue to clean and disinfect all areas such as offices, bathrooms, common areas, and shared electronic equipment routinely. Increase the frequency of cleaning and disinfection of high-touch surfaces.*
- 6) Responsible Parties should work with facility maintenance staff to increase air exchanges in the room or building.*

*If an employee is symptomatic upon arrival at work or becomes sick during the day, the employee or visitor must be separated and sent home immediately, following the above protocol for a positive case.*

Effective June 9, 2021, visitors to the Academic Campus are permitted for special events, tours, visits to classrooms, or other pertinent meetings related to their child's therapy or instructional services. Proper health screening is required.

- Human Resources shall be notified if any of the above conditions apply.
  - As necessary, the local health department hotline should be utilized for further questions and clarification.
- The [Erie County Department of Health COVID-19 Packet of Information](#) shall be sent to the employee electronically through the employee portal.
  - The appropriate guidelines and documents in the packets are expected to be followed and completed prior to the employee's return to work.
- Each site has a designated room or area to safely manage separation from people not exhibiting symptoms, until they depart.

**For Service Recipients**

- Persons receiving services shall undergo the same procedures for screening.
  - Individuals sent home from program shall consult with their healthcare practitioner prior to returning to the program;
  - If an individual has COVID-19 symptoms AND EITHER tests positive for COVID-19 OR did not receive a test, the individual may only return after completing at least 14 days of self-quarantine.
  - If the individual is still displaying symptoms after 14 days, a negative test will be required prior to their return.
- Persons receiving services cannot participate in services while they or a member of their household or certified residence is being quarantined or isolated.
- Medical documentation is requested and maintained which allows an individual who was COVID-19 positive to return to program site/services.



Appendix B

**Cantalician Center for Learning  
Standard Operating Procedure**

<b>TITLE:</b>	COVID-19 Guidance – Tracking and Tracing Requirements
<b>DOCUMENT OWNER:</b>	CC/QA Coordinator
<b>EFFECTIVE DATE:</b>	6/1/2020
<b>DATE OF LAST REVISION:</b>	6/15/2020; 7/14/2020

**Scope of Procedure:**

This procedure applies to all employees and persons receiving services.

The following guidance was used to create this procedure: Reopening New York Forward Business Re-Opening Plan:

“Each re-opening business must develop a written Safety Plan outlining how its workplace will prevent the spread of COVID-19. A business may fill out this template to fulfill the requirement, or may develop its own Safety Plan. This plan does not need to be submitted to a state agency for approval but must be retained on the premises of the business and must be made available to the New York State Department of Health (DOH) or local health or safety authorities in the event of an inspection. Business owners should refer to the State’s industry-specific guidance for more information on how to safely operate. For a list of regions and sectors that are authorized to re-open, as well as detailed guidance for each sector, please visit: [forward.ny.gov](http://forward.ny.gov).”

These guidelines are minimum requirements only and any employer is free to provide additional precautions or increased restrictions. These guidelines are based on the best-known public health practices at the time of Phase II of the State’s reopening, and the documentation upon which these guidelines are based can and does change frequently. The Responsible Parties – as defined below – are accountable for adhering to all local, state and federal requirements relative to office-based work activities. The Responsible Parties are also accountable for staying current with any updates to these requirements, as well as incorporating same into any office-based work activities and/or Site Safety Plan.

**Procedures:**

The following areas are from the Tracking and Tracing guidance section:

1. *Responsible Parties must notify the local health department and DOH immediately upon being informed of any positive COVID-19 test result by an employee.*
  - Human Resources is responsible with notifying the local health department.
  - The CC/QA Coordinator is responsible with notifying the Office for People With Developmental Disabilities (OPWDD) and/or the Justice Center for any employee who works at a site operated or certified by OPWDD.
  
2. *In the case of an employee or visitor testing positive, the Responsible Parties must cooperate with the local health department as required to trace all contacts in the workplace, and the local health department where the building is located must be notified of all individuals who entered the site dating back 48 hours before the employee or visitor first experienced COVID-19 symptoms or tested positive, whichever is earlier. Confidentiality must be maintained as required by federal and state law and regulations.*
  - Human Resources is responsible with cooperating with the local health department.
  
3. *Responsible Parties must ensure that in the case of an employee showing symptoms while in the workplace, the building managers are immediately notified with information on where the individual has been throughout the building and notify building management if the symptomatic employee tests positive.*
  - Human Resources obtains initial information from the employee or as part of the screening process.
  - In the event of a positive case of COVID-19:
    - The Director of Employment Services shall notify Tri-Main ownership.
    - The Director of Community Services shall notify applicable building owners,
    - The Director of Human Resources would notify Facilities and applicable directors for agency-owned sites.
  
4. *Local health departments will implement monitoring and movement restrictions of infected or exposed persons including home isolation or quarantine.*
  - Employees are expected to follow the directives of the local health department.
  
5. *Individuals who are alerted that they have come into close or proximate contact with a person with COVID-19, and have been alerted via tracing, tracking or other mechanism, are required to self-*

*report to their employer at the time of alert and shall not be permitted to remain or return to the building until they have completed quarantine, as described in Section III “Processes,” Subsection A “Screening and Testing.”*

- Employees are expected to notify Human Resources if they receive an alert or are contacted by the LHD.

## Appendix C

<b>TITLE:</b>	COVID-19 Guidance – Requirement of Face Coverings
<b>DOCUMENT OWNER:</b>	CC/QA Coordinator
<b>EFFECTIVE DATE:</b>	5/6/2020
<b>DATE OF LAST REVISION:</b>	6/15/2020; 7/15/2020

This procedure replaces 4/16/2020 Standard Operating Procedure: Executive Order 202.16 Requiring Face Coverings for Public and Private Employees Interacting with the Public During the COVID-19 Outbreak

**Scope of Procedure:**

This procedure applies to all employees, visitors, and person receiving services.

**Definitions:**

**Background:**

In December 2019, a new respiratory disease called the novel coronavirus (COVID-19) was detected. COVID-19 is caused by a virus (SARS-CoV-2) that is part of a large family of viruses called coronaviruses. Recently, community-wide transmission of COVID-19 has occurred in the United States, including New York where the number of both confirmed and suspected cases is increasing. To reduce the community-wide transmission of COVID-19, Governor Andrew M. Cuomo has taken aggressive action through Executive Order 202, as amended, to combat the spread of this infectious disease, reducing the density of people in areas of common congregation by closing the in-person operations of non-essential businesses and prohibiting all non-essential gatherings of individuals of any size for any reason.

**Executive Order 202.16, issued on April 12, 2020:**

For all essential businesses or entities, any employees who are present in the workplace shall be provided and shall wear face coverings when in direct contact with customers or members of the public. Businesses must provide, at their expense, such face coverings for their employees. This provision may be enforced by local governments or local law enforcement as if it were an order pursuant to section 12 or 12-b of the Public Health Law. This requirement shall be effective Wednesday, April 15 at 8 p.m.

For Academic Services only: On June 4, the State Health Commissioner Howard Zucker released a letter he sent to the Director of the CDC regarding a potential change to the use of masks in school. In short, he indicated the state was aligning end of the school year mask guidance with the mask guidance previously released, which minimally includes:

- Indoors, mask use will be strongly encouraged but not required for students, campers, and staff/teachers/counselors who are not fully vaccinated.
- Outdoors, masks are not required; students, campers, and staff who are not fully vaccinated are “encouraged” to wear a mask in certain higher-risk circumstances.
- Both indoors and outdoors, students, campers, and staff who are fully vaccinated do not need to wear masks.
- Schools and camps may choose to implement stricter standards.

While we wait for further information and guidance, all students and staff must continue to follow our current practice of wearing masks as we await a NYSDOH statement officially changing the mask guidance.

### **Guidance for Executive Orders 202.16:**

Essential businesses, as well as state and local government agencies and authorities, must procure, fashion, or otherwise obtain face coverings and provide such coverings to employees who directly interact with the public during the course of their work at no-cost to the employee.

- Businesses are deemed essential by the Empire State Development Corporation (ESD), pursuant to the authority provided in Executive Order 202.6. Please visit the ESD website for specific information on essential businesses. For the purpose of this guidance, essential businesses shall also provide face coverings to contractors, including independent contractors.
- Face coverings include, but are not limited to, cloth (e.g. homemade sewn, quick cut, bandana), surgical masks, N-95 respirators, and face shields. Please visit the Centers for Disease Control and Prevention’s “Coronavirus Disease 2019 (COVID-19)” website for information on cloth

face covers and other types of personal protective equipment (PPE), as well as instructions on use and cleaning.

- Direct interaction with the public shall be determined by the employer, but, at a minimum, shall include any employee who is routinely within close contact (i.e. six feet or less) (*3ft. within the Academic Services*) with members of the public, including but not limited to customers or clients.
- Employees are allowed to use their own face coverings, but shall not be mandated to do so by their employer. Further, this guidance shall not prevent employees from wearing more protective coverings (e.g. surgical masks, N-95 respirators, or face shields) if the individual is already in possession of such PPE, or if the employer otherwise requires employees to wear more protective PPE due to the nature of their work (e.g. healthcare).
- Employees are required to wear face coverings when in direct contact with members of the public, except where doing so would inhibit or otherwise impair the employee's health. Employers are prohibited from requesting or requiring medical or other documentation from an employee who declines to wear a face covering due to a medical or other health condition that prevents such usage.
- Employees who are unable to wear face coverings and are susceptible to COVID-19 based on the "Matilda's Law" criteria (i.e. individuals who are 70 years of age or older, individuals with compromised immune systems, and individuals with underlying illnesses) should consult with their employer to consider reasonable accommodations, including but not limited to different PPE, alternate work location, or alternate work assignment with fewer interactions with the public. Employers should work with their employees to see if they can be accommodated to ensure the employee can continue to deliver essential services in the safest manner possible.
- If an employer is unable to procure, fashion, or otherwise obtain face coverings for their employees, they may consult with their local office of emergency management to determine if extra supplies exist within the municipality for this purpose and, if so, they may submit a request for face coverings. Please note that quantities are extremely limited and are prioritized for health care workers and first responders. Not being able to source face coverings does not relieve an employer's obligation to provide such face coverings to their employees.
- Nothing in this guidance shall supersede the respiratory protection equipment requirements set forth by the United States Department of Labor's Occupational Safety and Health Administration (OSHA).

**Executive Order 202.17, issued on April 15, 2020:**

Effective at 8 p.m. on Friday, April 17, 2020 any individual who is over age two and able to medically tolerate a face-covering shall be required to cover their nose and mouth with a mask or cloth face-covering when in a public place and unable to maintain, or when not maintaining, social distance.

**Executive Order 202.18, issued on April 16, 2020:**



Any person utilizing public or private transportation carriers or other for-hire vehicles, who is over age two and able to medically tolerate a face covering, shall wear a mask or face covering over the nose and mouth during any such trip; any person who is operating such public or private transport, shall likewise wear a face covering or mask which covers the nose and mouth while there are any passengers in such vehicle. This directive shall take effect in the same manner as Executive Order 202.17, at 8 p.m. on Friday, April 17, 2020.

**Guidance for Executive Orders 202.17 and 02.18:**

Individuals must procure, fashion, or otherwise obtain face coverings and wear such coverings when they are in a public and are:

- Within six feet of distance from other individuals; or
- In a situation or setting where they are unable to maintain six feet of distance from other individuals; or (*3ft. within the Academic Services*)
- In a public or private transportation carrier or for-hire vehicle.

Face coverings include, but are not limited to, cloth (e.g. homemade sewn, quick cut, bandana), surgical masks, N-95 respirators, and face shields. Please visit the Centers for Disease Control and Prevention’s “Coronavirus Disease 2019 (COVID-19)” website for information on cloth face covers and other types of personal protective equipment (PPE), as well as instructions on use, cleaning, and disposal. Please note that the most protective PPE (e.g. N-95 respirators) remains a critical need for health care workers and first responders and, therefore, should be prioritized for those settings.

Individuals are required to wear a face covering in the abovementioned situations and settings, provided that they are older than two (2) years of age and able to medically tolerate a covering.

If a face covering would inhibit or otherwise impair an individual’s health or if an individual is not older than two (2) years of age, an individual is not required to wear or use such a covering.

Further, essential business operators and enforcement authorities are prohibited from requesting or requiring medical or other documentation from an individual who declines to wear a face covering due to a medical or other health condition that prevents such usage.

Nothing in Executive Order 202.17 or 202.18 shall remove the obligation of essential businesses, as well as state and local government agencies and authorities, to procure, fashion, or otherwise obtain

face coverings and provide such coverings to employees who directly interact with the public during the course of their work at no-cost to the employee, pursuant to Executive Order 202.16.

The following guidance was also used to create this procedure: Interim Guidance Regarding the Reopening of Day Services Certified by the Office for People With Developmental Disabilities.

- The program’s Safety Plan must describe procedures to operate the certified day program site or deliver day program service in accordance with the guidance document, Interim Guidance Regarding the Reopening of Day Services Certified by the Office for People With Developmental Disabilities.

For Academic Services only: On June 4, the State Health Commissioner Howard Zucker released a letter he sent to the Director of the CDC regarding a potential change to the use of masks in school. In short, he indicated the state was aligning end of the school year mask guidance with the mask guidance previously released, which minimally includes:

- Indoors, mask use will be strongly encouraged but not required for students, campers, and staff/teachers/counselors who are not fully vaccinated.
- Outdoors, masks are not required; students, campers, and staff who are not fully vaccinated are “encouraged” to wear a mask in certain higher-risk circumstances.
- Both indoors and outdoors, students, campers, and staff who are fully vaccinated do not need to wear masks.
- Schools and camps may choose to implement stricter standards.

While we wait for further information and guidance, all students and staff must continue to follow our current practice of wearing masks as we await a NYSDOH statement officially changing the mask guidance.

**Operational Procedure:**

1. All employees are expected to follow Department of Health Interim Guidance based on the Executive Orders 202.16, 202.16, and 202.18, included any related updates or extensions to these orders.
2. Each department of the agency is responsible with determining their direct interaction with the public, customers, and clients, who they are routinely within close contact (i.e. six feet or less) with. This is the minimum standard according to the Executive Orders. (*3ft. within the Academic Services*)
3. Regardless of whether there is direct interaction with the public, customers, and clients, who they are routinely within close contact (i.e. six feet or less) (*3ft. within the Academic Services*) –

this is the minimum standard according to the Executive Orders, all employees must wear a face covering in the workplace or when performing their job responsibilities in the community. Employees may remove their face covering when they are alone and in a closed off work area (e.g. office) but must place the face covering back on if another person enters that work area or when leaving that closed work area.

- In large conference rooms or spaces (e.g. Training Room 14; gym; employees break room), masks may be removed for eating / drinking / presenting as long as the employees are not moving around and the a minimum social distance of 3 feet is maintained).
4. Department leadership is responsible with contacting their employees to determine their need for a face covering and coordinating the procurement to the employee prior to them working, performing any responsibilities, or providing services to customers or service recipients, at the worksite or in community. This should be tracked to avoid unnecessary waste and depletion.
  5. Department leadership is responsible with implementing strategies to help ensure that all employees and visitors entering the worksite are wearing a face covering. Face coverings should be available at all locations. Disposable face coverings should be available for visitors. Department leadership is responsible with coordinating the replenishment and distribution of supplies (e.g. contacting the finance department for procurement; contacting the facilities department for supply delivery).
  6. Employees must contact their supervisor if they are in need of a replacement mask.
  7. Employees must notify Human Resources in the event wearing a face covering would inhibit or impair their health.
  8. Employees must notify Human Resources if they are unable to wear face coverings and are susceptible to COVID-19 based on the “Matilda’s Law” criteria.
  9. Face coverings shall be worn and cared for in accordance with CDC guidelines:

### How to Wear a Cloth Face Covering

Cloth face coverings should

- fit snugly but comfortably against the side of the face
- be secured with ties or ear loops
- include multiple layers of fabric
- allow for breathing without restriction
- be able to be laundered and machine dried without damage or change to shape



CDC on Homemade Cloth Face Coverings

CDC also advises the use of simple cloth face coverings to slow the spread of the virus and help people who may have the virus and do not know it from transmitting it to others. Cloth face coverings fashioned from household items or made at home from common materials at low cost can be used as an additional, voluntary public health measure. They should be routinely washed depending on the frequency of use. A washing machine should suffice in properly washing a face covering. Individuals should be careful not to touch their eyes, nose, and mouth when removing their face covering and wash hands immediately after removing.

Cloth face coverings should not be placed on young children under age 2, anyone who has trouble breathing, or is unconscious, incapacitated or otherwise unable to remove the mask without assistance.

The cloth face coverings recommended are not surgical masks or N-95 respirators. Those are critical supplies that must continue to be reserved for healthcare workers and other medical first responders, as recommended by current CDC guidance.

**OPWDD:**

Persons receiving services must wear face coverings, if they can medically tolerate one whenever social distancing cannot be achieved.

- This would include any underlying diagnosis where mask-wearing is contraindicated or for any disability which prohibits the person receiving services from keeping a mask on.
- If a person receiving services cannot medically tolerate wearing a face covering, they should still be able to access programming / community inclusion, but the treatment team should consider how most safely accommodate the risk and document.
  - Examples: Increased social distancing, transport separately, lower risk / outdoor activities)

Appendix D

<b>TITLE:</b>	Interim Guidance – Purchasing of COVID-19 Personal Protective Equipment and Supplies
<b>DOCUMENT OWNER:</b>	CC/QA Coordinator
<b>EFFECTIVE DATE:</b>	5/18/2020
<b>DATE OF LAST REVISION:</b>	6/1/2020

**Scope of Procedure:**

This procedure applies to all employees at the Cantalician for Learning (CCL).

**Definitions:**

Personal Protective Equipment (PPE): used to protect the user and others in vicinity of the user from harm.

- Face coverings/masks, face shields, disposable gloves, gowns, other protective clothing

COVID-19 Supplies

- Hand sanitizer, cleaning solutions/disinfectants, disinfectant wipes, etc.
- Signage
- Other equipment and supplies for COVID-19 solutions
- Other major expenses for COVID-19 solutions

Medical Equipment consists of items which are primarily and customarily used to serve a medical purpose.

- Thermometers and other health monitoring devices
- Other medical supplies used in a clinical setting
- Includes durable medical equipment, such as oxygen/nebulizers

**Procedures:**

1. All COVID-19 PPE and supply orders must be reviewed by the Safety Committee / Safety Sub-Committee prior to purchase.
  - This is to help ensure a cost effective strategy for purchasing.
  - This is also to ensure that employees are using approved PPE and supplies.
2. Each department should discuss and plan for their COVID-19 PPE and supply needs
3. The designated employee from their department completes the master spreadsheet in the safety Committee folder on the agency's shared network.
  - Where applicable, be specific with amounts, item numbers, distributors, websites, etc.
4. The Safety Committee reviews and approves supply orders from the master spreadsheet.
5. The Facilities Manager completes all purchase orders for PPE and COVID-19 supplies and forwards to the Accounts Payable Specialist for ordering. The Coordinator of Nursing completes all purchase orders for all medical equipment and supplies and forwards to the Accounts Payable Specialist – this may be in conjunction with the Facilities Manager.
  - The account number on the purchase order is 5136 (COVID-19 PPE and Supplies)
  - All purchases for Community Services and the Academic Campus should go under the cost center 8300 (Facilities)
  - All purchases for Employment Services should go under cost center 7950 (Employment Services)
6. The master spreadsheet should reflect items orders and when they are received.
7. The Facilities Manager tracks the distribution of PPE and other COVID-19 supplies so that they are applied to the appropriate cost center.
8. The Opportunities and Development Coordinator will apply for available grants specific to handling of the COVID-19 emergency (e.g. FEMA).



Appendix E

**Cantalician Center for Learning  
Standard Operating Procedure**

<b>TITLE:</b>	COVID-19 Guidance – Physical Distancing
<b>DOCUMENT OWNER:</b>	CC/QA Coordinator
<b>EFFECTIVE DATE:</b>	6/1/2020
<b>DATE OF LAST REVISION:</b>	6/15/2020; 7/16/2020

**Scope of Procedure:**

This procedure applies to all employees, visitors, and person receiving services.

The following guidance was used to create this procedure: Reopening New York Forward Business Re-Opening Plan; Interim Guidance Regarding the Reopening of Day Services Certified by the Office for People With Developmental Disabilities

- “Each re-opening business must develop a written Safety Plan outlining how its workplace will prevent the spread of COVID-19. A business may fill out this template to fulfill the requirement, or may develop its own Safety Plan. This plan does not need to be submitted to a state agency for approval but must be retained on the premises of the business and must be made available to the New York State Department of Health (DOH) or local health or safety authorities in the event of an inspection. Business owners should refer to the State’s industry-specific guidance for more information on how to safely operate. For a list of regions and sectors that are authorized to re-open, as well as detailed guidance for each sector, please visit: [forward.ny.gov](http://forward.ny.gov).”
- These guidelines are minimum requirements only and any employer is free to provide additional precautions or increased restrictions. These guidelines are based on the best-known public health practices at the time of Phase II of the State’s reopening, and the documentation upon which these guidelines are based can and does change frequently. The Responsible Parties – as defined below – are accountable for adhering to all local, state and federal requirements relative to office-based work activities. The Responsible Parties are also accountable for staying current with any updates to these requirements, as well as incorporating same into any office-based work activities and/or Site Safety Plan.

The following guidance was used to create this procedure: Interim Guidance Regarding the Reopening of Day Services Certified by the Office for People With Developmental Disabilities.

- The program’s Safety Plan must describe procedures to operate the certified day program site or deliver day program service in accordance with the guidance document, Interim Guidance Regarding the Reopening of Day Services Certified by the Office for People With Developmental Disabilities.

### **Procedures:**

The following areas are from the Physical Distancing guidance section:

6. *Limit the total number of occupants at any given time to no more than 50% of the maximum occupancy for a particular area as set by the certificate of occupancy.*
  - All employees are expected to follow the following procedure which addresses capacity of all spaces and areas in the building: COVID-19 Guidance – Room and Space Capacity.
7. *A distance of at least 6 ft. must be maintained amongst all individuals at all times, unless safety of the core activity requires a shorter distance (3ft. within the Academic Services). Responsible Parties should consider closing any common indoor or outdoor seating areas (e.g. reception areas) within their office space. To the extent that such spaces remain open, Responsible Parties must modify seating areas arrangements (e.g. chairs, tables) to ensure that individuals are at least six feet apart in all directions (e.g. side-to-side and when facing one another) (3ft. within the Academic Services).*
  - All employees are expected to adhere to 6 ft. social distancing requirements while working (3ft. within the Academic Services).
  - In the event there is a core activity that requires a shorter distance, employees will already be wearing a face covering as per COVID-19 Guidance – Employee Use of Face Coverings.
  - All seating arrangements in conference rooms, training rooms, offices, lunch rooms, program rooms, outdoor areas, etc. must be modified as to adhere to 6 ft. social distancing in all directions (3ft. within the Academic Services).
  - There should be support and education to persons receiving services with learning physical distancing/use of markers, patterns of movement, and other program strategies.
  - Programs will maintain a staffing plan to prevent employees from needing to “float” between different rooms or different groups of individuals, unless such rotation is necessary to safely support individuals due to unforeseen circumstances (e.g. staff absence). Group Speech session may commence effective June 1.
    - Unless there are unforeseen circumstances, employees will remain assigned to their respective groups within their respective programs. Group Speech session may commence effective June 1.

8. *Any time workers or visitors must come within 6 ft. of another person, acceptable face coverings must be worn (ensuring that mouth and nose are covered). Individuals must be prepared to don a face covering if another person unexpectedly comes within 6 ft (3ft. within the Academic Services).*
  - As per COVID-19 Guidance – Employee Use of Face Coverings, all employees are required to wear a face covering while working, unless they are alone in a closed off area (e.g. office).
  - Persons receiving services must wear face coverings, if they can medically tolerate one whenever social distancing cannot be achieved.
    - This would include any underlying diagnosis where mask-wearing is contraindicated or for any disability which prohibits the person receiving services from keeping a mask on.
    - If a person receiving services cannot medically tolerate wearing a face covering, they should still be able to access programming / community inclusion, but the treatment team should consider how most safely accommodate the risk and document.
      - Examples: Increased social distancing, transport separately, lower risk / outdoor activities)
9. *Responsible Parties may modify or reconfigure the use and/or restrict the number of workstations, employee seating areas, and desks, so that employees are at least six feet apart (3ft. within the Academic Services) in all directions (e.g. side-to-side and when facing one another) and are not sharing workstations without cleaning and disinfection between use. When distancing is not feasible between workstations, Responsible Parties must provide and require the use of face coverings or physical barriers (e.g. plastic shielding walls, in lieu of face coverings in areas where they would not affect air flow, heating, cooling or ventilation).*
  - Temporary relocations and/or alternating schedules will be utilized for those employees who share an office or other confined space.
  - Employees are expected to clean and disinfect their workstation, seating area, desks, program areas, etc. after at the end of their shift or sooner if another person will be using that work space. See COVID-19 Guidance – Hygiene and Cleaning.
  - As per COVID-19 Guidance – Employee Use of Face Coverings, all employees are required to wear a face covering while working, unless they are alone in a closed area (e.g. office).
10. *Prohibit the use of tightly confined spaces (e.g. elevators) by more than one individual at time, unless all individuals are wearing face coverings. If occupied by more than one person, keep occupancy under 50% of maximum capacity. Responsible Parties should increase ventilation with outdoor air to the greatest extent possible (e.g., opening windows and doors in individual office rooms), while maintaining safety protocols. Responsible Parties should take additional measures to prevent congregation in elevator waiting areas and limit density in elevators, by enabling the use of stairs.*
  - All employees are expected to follow the following procedure which addresses capacity of all spaces and areas that are used: COVID-19 Guidance – Room and Space Capacity.
  - As possible, employees should increase ventilation by opening up windows.
  - As per COVID-19 Guidance – Employee Use of Face Coverings, all employees are required to wear a face covering while working, unless they are alone in a closed area (e.g. office).

11. *Responsible Parties must put in place practices for adequate social distancing in small areas, such as restrooms and break rooms, and should develop signage and systems (e.g. flagging when occupied) to restrict occupancy when social distancing cannot be maintained in such areas.*
  - All employees are expected to follow the following procedure which addresses capacity of all spaces and areas in the building: COVID-19 Guidance – Room and Space Capacity.
  
12. *Responsible Parties should put in place measures to reduce bi-directional foot traffic using tape or signs with arrows in narrow aisles, hallways, or spaces, and post signage and distance markers denoting spaces of six feet (3ft. within the Academic Services) in all commonly used areas and any areas in which lines are commonly formed or people may congregate (e.g. copy rooms, kitchens, reception desks, health screening stations).*
  - Social distancing markers and signage shall be placed common areas such as health screening stations, copy machines, receptionist areas, kitchenette and break room areas, etc.
    - All employees are expected to adhere to these markers and signs.
  
13. *Limit in person gatherings as much as possible and use tele or video conferencing whenever possible. Essential in person gatherings (e.g. meetings) should be held in open, well ventilated spaces with appropriate social distancing among participants.*
  - Employees shall not exceed room capacity or change the seating configurations of the room. As possible, teleconferencing, videoconferencing, and teleworking, shall be used to help minimize the amount of employees onsite.
  - Each department is responsible with having a plan that incorporates these methods where applicable or possible.
  
14. *Responsible Parties should stagger schedules for employees to observe social distancing for any gathering (e.g. coffee breaks, meals, and shift starts/stops). Responsible Parties must take measures to reduce interpersonal contact and congregation, through methods such as: adjusting workplace hours; reducing in-office workforce to accommodate social distancing guidelines; shifting design (e.g. A/B teams, staggered arrival/departure times to reduce congestion in lobbies and elevators); and/or o avoiding multiple teams working in one area by staggering scheduled tasks and using signs to indicate occupied areas*
  - Each department is responsible with having a plan that incorporates such schedule changes that allow for social distancing.
  
15. *Responsible Parties should create polices which encourage employees to work from home when feasible. Responsible Parties may choose to develop return-to-office tiers or waves for employees based on factors such as function, safe transportation, and ability to work remotely, as noted in Section II “People,” Subsection C “Phased Reopening.”*
  - A phased re-entry will be implemented for applicable employees.

16. *Responsible Parties should close non-essential amenities and communal areas which promote gathering or are high-touch (e.g. vending machines, communal coffee machines).*

- Vending machines and traditional coffee pots will not be accessible.
- Keurig hot beverage machines may be used if employees are adhering to 6ft. social distancing and are disposing of used K-Cups and wiping down buttons (3ft. within the Academic Services).
- Beverage vending machines are considered to be essential.

17. *Shared workstations (e.g. “hot-desks”) must be cleaned and disinfected between users.*

- All offices, cubicles, and other workstations, should have cleaning and disinfectant supplies available. Employees should look for sanitation kits in communal spaces and for their personal areas.
- Employees are expected to clean these areas and other commonly touched items in that area prior to any other person using. Employees should refer to COVID-19 Guidance – Hygiene and Cleaning.

18. *Reduce interpersonal contact and congregation through various methods (e.g. adjusting workplace hours, limiting in person presence to necessary staff, shifting design, reducing on site workforce, staggering arrival/departure times to reduce congestion in lobbies/elevators).*

- The agency is using a phased re-entry plan for necessary staff.
- Additionally, each department is responsible with having a plan that incorporates the use of teleconferencing, videoconferencing, and teleworking. This plan should include the use of staggered arrival and departure times where possible.

19. *Responsible Parties should limit on-site interactions (e.g. designate an egress for employees leaving their shifts and a separate ingress for employees starting their shifts) and movements (e.g. employees should remain near their workstations as often as possible).*

- All employees shall enter through the designated main entrance.
- When individuals receiving services are onsite, employees shall utilize alternative exits in order to maintain a social distance.

20. *Responsible Parties must establish designated areas for pickups and deliveries, limiting contact to the extent possible.*

- Academic Campus / Admin:
  - The front lobby vestibule of the 2049 admin building is the designated area for deliveries.
  - When possible, packages can be left in the front vestibule for drop off and pick up.
  - If a receptionist is not available, there should be a contact number posted in the vestibule.
- 2039:
  - The front lobby vestibule of the 2049 admin building is the designated area for deliveries.
- Tri-Main:
  - The reception area and the loading door are the designated areas for pickups and deliveries.

- Contact numbers are posted.

*21. Non-essential common areas (e.g. gyms, pools, game rooms) must remain closed.*

- Non-essential common areas of the admin building at 2049 George Urban Blvd (fitness room, gym) will remain closed until authorized under the NY Forward phased re-opening guidance. The fitness room at the AC will open on June 1 for therapy only.
- This is not applicable to the 2039 location.
- Tri-Main ownership shall determine non-essential areas and business that must remain closed.

Effective June 1, the fitness room is open for therapy only use.

**OPWDD:**

- Each OPWDD service division will have a reduction of total number of individuals served at one time, in order to reduce congestion and facilitate easier social distancing.
  - Phased re-entry plan is utilized, along with continued use of virtual trainings or training in their residence.
  - Planned group size will be limited to no more than fifteen (15) individuals who receive services. The restriction on group size does not include employees/staff.
  - Planned group size will be limited to no more than fifteen (15) individuals who receive services.
    - The restriction on group size does not include employees/staff.
  - The group ( $\leq 15$ ) of individuals receiving services and staff working with them will remain as static as possible unless unforeseen circumstances dictate the need.
  - To the greatest extent possible, different stable groups of individuals and staff will have no or minimal contact with one another and will not utilize common spaces at the same time.
    - For Day Habilitation Services, the Certified Site and Without Walls group sites will avoid group activities.
    - For Community Prevocational Services, which has a larger open space, cohorts of individuals can be divided amongst the space, but each cohort will be kept separate while maintaining a social distance.

## Appendix F



<b>TITLE:</b>	COVID-19 Guidance – Hygiene and Cleaning Guidelines
<b>DOCUMENT OWNER:</b>	CC/QA Coordinator
<b>EFFECTIVE DATE:</b>	5/26/2020
<b>DATE OF LAST REVISION:</b>	6/15/2020

**Scope of Procedure:**

This procedure applies to all employees.

The following guidance was used to create this procedure: Reopening New York Forward Business Re-Opening Plan:

“Each re-opening business must develop a written Safety Plan outlining how its workplace will prevent the spread of COVID-19. A business may fill out this template to fulfill the requirement, or may develop its own Safety Plan. This plan does not need to be submitted to a state agency for approval but must be retained on the premises of the business and must be made available to the New York State Department of Health (DOH) or local health or safety authorities in the event of an inspection. Business owners should refer to the State’s industry-specific guidance for more information on how to safely operate. For a list of regions and sectors that are authorized to re-open, as well as detailed guidance for each sector, please visit: [forward.ny.gov](http://forward.ny.gov).”

These guidelines are minimum requirements only and any employer is free to provide additional precautions or increased restrictions. These guidelines are based on the best-known public health practices at the time of Phase II of the State’s reopening, and the documentation upon which these guidelines are based can and does change frequently. The Responsible Parties – as defined below – are accountable for adhering to all local, state and federal requirements relative to office-based work activities. The Responsible Parties are also accountable for staying current with any updates to these requirements, as well as incorporating same into any office-based work activities and/or Site Safety Plan.

**Procedures:**

The following areas are from the Hygiene and Cleaning guidance section:

1. *Responsible Parties must ensure adherence to hygiene and cleaning and disinfection requirements as advised by the CDC and DOH, including “Guidance for Cleaning and Disinfection of Public and Private Facilities for COVID-19,” and the “[STOP THE SPREAD](#)” poster, as applicable. Responsible Parties must maintain logs that include the date, time, and scope of cleaning and disinfection.*
  - Employees will follow [CDC Guidance for Cleaning and Disinfecting](#) (outlined below):
    - Develop Your Plan
      - DETERMINE WHAT NEEDS TO BE CLEANED.  
Areas unoccupied for 7 or more days need only routine cleaning. Maintain existing cleaning practices for outdoor areas.
      - DETERMINE HOW AREAS WILL BE DISINFECTED.  
Consider the type of surface and how often the surface is touched. Prioritize disinfecting frequently touched surfaces.
      - CONSIDER THE RESOURCES AND EQUIPMENT NEEDED.
      - Keep in mind the availability of cleaning products and personal protective equipment (PPE) appropriate for cleaners and disinfectants.
    - Implement
      - CLEAN VISIBLY DIRTY SURFACES WITH SOAP AND WATER prior to disinfection.
      - USE THE APPROPRIATE CLEANING OR DISINFECTANT PRODUCT.  
Use an EPA-approved disinfectant against COVID-19, and read the label to make sure it meets your needs.
      - ALWAYS FOLLOW THE DIRECTIONS ON THE LABEL.  
The label will include safety information and application instructions. Keep disinfectants out of the reach of children.
    - Maintain and Revise
      - CONTINUE ROUTINE CLEANING AND DISINFECTION.  
Continue or revise your plan based upon appropriate disinfectant and PPE availability. Dirty surfaces should be cleaned with soap and water prior to disinfection. Routinely disinfect frequently touched surfaces at least daily.
      - MAINTAIN SAFE PRACTICES such as frequent handwashing, using cloth face coverings, and staying home if you are sick.
      - CONTINUE PRACTICES THAT REDUCE THE POTENTIAL FOR EXPOSURE.  
Maintain social distancing, staying six feet away from others. Reduce sharing of common spaces and frequently touched objects (*3ft. within the Academic Services*).
  - Employees will follow [Department of Health Interim Guidance for Cleaning and Disinfection of Public and Private Facilities for COVID-19](#) (outlined below).

- Hand Hygiene: Signage with handwashing procedures should be posted in prominent locations promoting hand hygiene.
  - Regular hand washing with soap and water for at least 20 seconds should be done: Before and after eating; After sneezing, coughing, or nose blowing; After using the restroom; Before handling food; After touching or cleaning surfaces that may be contaminated; After using shared equipment and supplies like electronic equipment such as keyboards, mice and phones.If soap and water are not available, use an alcohol-based hand sanitizer that contains at least 60% alcohol.
- Respiratory Hygiene:
  - Covering coughs and sneezes with tissues or the corner of elbow.
  - Disposing of soiled tissues immediately after use.
- Routine Cleaning: As part of standard infection control practices, routine cleaning should be rigorous and ongoing, and time should be allocated for individuals to routinely clean. Surfaces touched most frequently should be prioritized for routine cleaning because these surfaces can be reservoirs for germs and an exposure pathway for transmission to people through contact with these surfaces.
  - Examples of priority areas for routine cleaning include: • High contact surfaces that are touched by many different people, such as light switches, handrails and doorknobs/handles. • Dust- and wet-mopping or auto-scrubbing floors. • Vacuuming of entryways and high traffic areas. • Removing trash. • Cleaning restrooms. • Wiping heat and air conditioner vents. • Spot cleaning walls. • Spot cleaning carpets. • Dusting horizontal surfaces and light fixtures. • Cleaning spills. • Regular cleaning and laundering of linens.Identify and routinely clean and disinfect high-risk locations even before a confirmed case of COVID-19 occurs.
  - Examples of high-risk locations include: Dining Areas • Clean and disinfect counters, tables, and chairs regularly (at least once daily). Other Frequently Touched Surfaces • Clean and disinfect frequently touched surfaces on a periodic schedule as operational considerations allow, which may range from at least daily to up to 72 hours.
- Cleaning and Disinfection: Cleaning removes germs, dirt and impurities from surfaces or objects. Disinfecting kills germs on surfaces or objects. Individuals should use any protective equipment (e.g. gloves) as recommended on product labels. Carefully read and follow all label instructions for safe and effective use.
  - Step 1: Cleaning: Always clean surfaces prior to use of disinfectants in order to reduce soil and remove germs. Dirt and other materials on surfaces can reduce the effectiveness of disinfectants. Clean surfaces using water and soap or detergent to reduce soil and remove germs.
  - Step 2: Disinfection: Cleaning of soiled areas must be completed prior to disinfection to ensure the effectiveness of the disinfectant product.
    - If commercial products are unavailable, it is also acceptable to use a fresh 2% chlorine bleach solution (approximately 1 tablespoon of

- bleach in 1 quart of water). Prepare the bleach solution daily or as needed.
- Label directions must be followed when using disinfectants to ensure the target viruses are effectively killed. This includes adequate contact times (i.e., the amount of time a disinfectant should remain on surfaces to be effective), which may vary between five and ten minutes after application. Disinfectants that come in a wipe form will also list effective contact times on their label.
  - For disinfectants that come in concentrated forms, it is important to carefully follow instructions for making the diluted concentration needed to effectively kill the target virus. This information can be found on the product label.
  - Step 3: Disposal: Place all used gloves and other disposable items in a bag that can be tied closed before disposing of them with other waste. Wash hands with soap and water for at least 20 seconds immediately after removing gloves or use an alcohol-based hand sanitizer if soap and water are not available. Soap and water should be used if hands are visibly soiled.
  - Procedures and Training:
    - If a laboratory confirmed case of COVID-19 was in a facility, perform cleaning and disinfection of all surfaces throughout the area. Cleaning and disinfection should be conducted by individuals who have been trained to use products in a safe and effective manner. Training should be ongoing to ensure procedures for safe and effective use of all products are followed. Training assures that individuals are reminded to read and follow use and safety instructions on product labels. It should also identify the location of all personal protective equipment (e.g., gloves) that should be used.
  - The following CDC poster provides information on cleaning and disinfecting the facility and shall be posted at the site in the usual posting locations.  
[Cleaning and Disinfecting Your Facility: Everyday Steps, Steps When Someone is Sick, and Considerations for Employers](#)
  - All employees will receive training on:
    - COVID-19 – Facts and Myths;
    - CDC/DOH cleaning guidelines;
    - hand hygiene;
    - respiratory hygiene;
    - routine cleaning;
    - cleaning and disinfections;
    - how to use products in a safe and effective manner; and
    - location of personal protective equipment.

Training shall be documented and records should be retained as per the agency's records retentions policy.

2. *Responsible Parties must provide and maintain hand hygiene stations on in the office, as follows:*

*For handwashing: soap, running warm water, disposable paper towels, and a lined garbage can.*

*For hand sanitizing: an alcohol-based hand sanitizer containing at least 60% alcohol for areas where handwashing facilities may not be available or practical.*

*Make hand sanitizer available throughout common areas in the office.*

- *It should be placed in convenient locations, such as at entrances, exits, and reception desks. Touch-free hand sanitizer dispensers should be installed where possible.*
  - *Responsible Parties should place signage near hand sanitizer stations indicating that visibly soiled hands should be washed with soap and water; hand sanitizer is not effective on visibly soiled hands.*
  - *Place receptacles around the building for disposal of soiled items, including PPE*
- Hand hygiene / handwashing stations are located at restrooms, kitchen/kitchenette, and lunch room areas.
  - Hand sanitizing stations (wall-mounted and pump bottles) are located at building entrances/exits, conference/training rooms, copy machine locations, program rooms, and other identified locations.
  - There will be signage near hand sanitizing stations indicating that visibly soiled hands should be washed with soap and water.



- Hand sanitizer pumps shall also be located throughout the building.
- Trash receptacles shall be located in prominent locations for employees to dispose of any soiled items, including PPE.

3. *Responsible Parties must provide appropriate cleaning/disinfection supplies for shared and frequently touched surfaces and encourage their employees (or cleaning staffs) to use these supplies following manufacturer's instructions for use before and after use of these surfaces, followed by hand hygiene.*

- Employees shall have cleaning/disinfecting supplies available in their work area and will receive training on routine cleaning with use on shared and frequently touched surfaces.
  - This includes supplies for all program vans. These supplies should be stored at the site and brought into each vehicle when being used – they should be brought back in after use. (Extreme temperatures can impact the effectiveness of sanitizers and disinfectants.

*To reduce high-touch surfaces, Responsible Parties should install touch-free amenities such as water fountains, trash-cans, and hand-dryers.*

- Touch-free water fountains have been available where possible.
- Trash receptacles with open lids or that allow for touch-free disposal where possible.
- Automatic paper towel dispensers are available at hand hygiene / handwashing stations.

4. *Responsible Parties must conduct regular cleaning and disinfection of the building and more frequent cleaning and disinfection for high risk areas used by many individuals and for frequently touched surfaces. Cleaning and disinfection must be rigorous and ongoing and should occur at least after each shift, daily, or more frequently as needed. Please refer to DOH's "Interim Guidance for Cleaning and Disinfection of Public and Private Facilities for COVID-19" for detailed instructions on how to clean and disinfect facilities.*

*Responsible Parties must ensure regular cleaning and disinfecting of restrooms. Restrooms should be cleaned and disinfected more often depending on frequency of use. Responsible Parties must ensure distancing rules are adhered to by using signage, occupied markers, or other methods to reduce restroom capacity where feasible*

*Responsible Parties must ensure that materials and tools are regularly cleaned and disinfected using registered disinfectants, including at least as often as employees or visitors change workstations or move to a new set of materials. Refer to the Department of Environmental Conservation (DEC) list of products registered in New York State and identified by the EPA as effective against COVID-19.*

*If cleaning or disinfection products or the act of cleaning and disinfecting causes safety hazards or degrades the material or machinery, Responsible Parties must put in place hand hygiene stations between use and/or supply disposable gloves and/or limitations on the number of employees using such machinery.*

*Responsible Parties must provide for the cleaning and disinfection of exposed areas in the event an individual is confirmed to have COVID-19, with such cleaning and disinfection to include, at a minimum, all heavy transit areas and high-touch surfaces (e.g. touchscreens, printers, keypads, telephones, hand rails, door handles).*

- Virex II 256 is a registered EPA product that is used for regular cleaning and disinfecting.

List N: Products with Emerging Viral Pathogens AND Human Coronavirus claims for use against SARS-CoV-2				
EPA Registration Number	Active Ingredient(s)	Product Name	To kill SARS-CoV-2 (COVID-19), follow disinfection directions for the following virus(es)	Contact Time (in minutes)
70627-24	Quaternary ammonium	Virex™ II / 256	Adenovirus Type 2	10

- A detailed cleaning and disinfection checklist shall be utilized daily for each shift and will address objects/areas that require regular cleaning and disinfection and object/areas that require frequent cleaning and disinfection. This documentation should be retained as per the agency’s records retentions policy.
    - This shall include a checklist for cleaning and disinfecting agency vehicles after use.
  - Designated staff each shift will be responsible for this documentation.
  - Cleaning and disinfecting supplies and hand hygiene stations are available at heavy transit locations.
  - Occupancy capacity signs shall be placed outside of communal bathrooms.
5. *Cleaning and disinfecting of the site, shared surfaces, and other areas, as well as equipment and tools, should be performed using Department of Environmental Conservation (DEC) products identified by the Environmental Protection Agency (EPA) as effective against COVID-19.*
- The Director, in conjunction with the Facilities Manager and Safety Officer, has identified approved products that are effective against COVID-19.
6. *CDC guidelines on “Cleaning and Disinfecting Your Facility” if someone is suspected or confirmed to have COVID-19 are as follows:*
- *Close off areas used by the person who is sick suspected or confirmed to have COVID-19. Responsible Parties do not necessarily need to close operations, if they can close off the affected areas.*
  - *Shared building spaces used by the person suspected or confirmed to have COVID-19 (e.g. elevators, lobbies, building entrances) must also be shut down and cleaned*

*and disinfected in coordination with the building manager (For more information, see, "Interim COVID-19 Guidance for Commercial Building Management").*

- *Open outside doors and windows to increase air circulation in the area.*
  - *Wait 24 hours before you clean or and disinfect. If 24 hours is not feasible, wait as long as possible.*
  - *Clean and disinfect all areas used by the person suspected or confirmed to have COVID-19 who is sick, such as offices, bathrooms, common areas, and shared equipment.*
  - *Once the area has been appropriately cleaned and disinfected, it can be reopened for use. ▪ Employees without close contact with the person suspected or confirmed to have COVID-19 can return to the work area immediately after cleaning and disinfection. ▪ Per CDC contact tracing guidance, close contact is defined as being within six feet for at least 15 minutes. When the extent of contact with the person suspected or confirmed to have COVID-19 is not clear, the local health department should be consulted for guidance. Persons who have had close contact will undergo a 14-day quarantine (3ft. within the Academic Services).*
  - *If more than seven days have passed since the person who is suspected or confirmed to have COVID-19 visited or used the facility, additional cleaning and disinfection is not necessary, but routine cleaning and disinfection should continue.*
- This procedure shall be followed for any suspected or confirmed cases of COVID-19 by designated staff.
  - The agency shall follow direction from local health department as applicable.

7. *Prohibit shared food and beverages (e.g. buffet-style meals).*

- Employees are expected to bring in or purchase foods/beverages that are solely for their consumption. These items should be clearly labeled as appropriate with the employee's name.



## Appendix G

## **Cantalician Center for Learning**

### **Distance Learning Platform – Instructions for family access**

#### **Set-up Gmail account**

If you do not have a Gmail account, you will need one to access the online learning platform.

1. [www.gmail.com](http://www.gmail.com)
2. Click Create an account
3. The **sign-up** form will appear. Follow the directions by entering the required information.
4. Next, enter your **phone number** to verify your account. Google uses a two-step verification process for your security.
5. You will receive a text message from Google with a **verification code**. **Enter the code** to complete the account verification.
6. Next, you will see a form to enter some of your personal information, like your name and birthday.
7. Review **Google's Terms of Service and Privacy Policy**, then click **I agree**.
8. Your account will be created.

Once you have a Gmail account you will use that email and password to access Google Classroom

#### **Access to Cantalician Center's Google Classroom**

1. Download Google Classroom in google play/app store or access on the web at [www.classroom.google.com](http://www.classroom.google.com)
2. On either web or app, press + sign and join class
3. Enter in code (listed below) per your child's grade/age level and additional services you'd like access to (choose as many as you need).

<b>Grade Level</b>	<b>Class Code</b>
Preschool (Ages 3-5)	wnpahir
K-Grade 2 (Ages 8-10)	foisgcu
Grade 3- Grade 5 (Ages 8-10)	3xpseep
Grade 6- Grade 8 (Ages 11-13)	hkpvwu7
High School (Ages 14-21)	dier7u2
Behavior/ Counseling (all ages)	7nb3of4
Physical Education (all ages)	namh2yr
The Arts (all ages)	Ze3nngh
Extra Resources (all ages)	7m243zc

4. Log on daily to see content posted by your classroom teachers/ therapist teams (new "assignments" will be posted in the classroom tab). Each group above will be listed as separate class in your google classroom (OT, Speech and PT services will be posting in each grade/age level).

## Appendix H

<b>HYBRID MODEL #1 DETAILS</b>	
Overview	<p>Daily student in-person population would be reduced approximately 50%.</p> <p>Remote learning will take place when students are not scheduled for in-person services. Current school day hours would remain.</p> <p><b><u>Mondays &amp; Tuesdays (Group A)</u></b></p> <p>Approximately 50% of a classroom cohort attends in person.</p> <p><b><u>Wednesdays (Group A &amp; B are Remote)</u></b></p> <p>Instruction is conducted remotely through online methods. Students will be provided with knowledge acquisition activities and teachers will produce video, assignments and activities for the days of remote instruction. Parent – teacher/therapists meetings conferences. Intensive sanitization and specialized cleaning will also occur on this day.</p> <p><b><u>Thursdays and Fridays (Group B)</u></b></p> <p>Approximately 50% of a classroom cohort attends in person.</p>
Methodology	<p>Groupings are determined by the first initial of the student’s last name.</p> <ul style="list-style-type: none"> <li>• Each classroom roster is alphabetized</li> <li>• The first 50% of the classroom roster will make up Group A</li> <li>• The last 50% of the classroom roster will make up Group B</li> </ul>
Effective Dates	<p><b><u>September 9 - 11</u></b></p> <p>Remote instruction for ALL students on preparing them for returning to the building with a focus on: safety precautions, hygiene, physical distancing, wearing a mask, their classroom design and schedule, and social-emotional content.</p> <p><b><u>September 14 – October 9</u></b></p> <p>Hybrid Model #1</p> <p><b><u>October 12 – June 25</u></b></p> <p>The instructional model for the remainder of the school year or in-part will be determined during the week of <b>October 5</b>. Factors in determining future instructional models include regional COVID infection rate, phase, and Governor orders.</p>

<p>Communication</p>	<p>Parents will receive a robo-call notifying them of the child’s group and a reminder on which days their child will receive in-person and/or remote instruction.</p> <p>For those parents who do not confirm receipt of the robo-call will receive notification from the child’s teacher.</p> <p>Parents will receive written correspondence stating the child’s group.</p> <p>Parents will receive a robo-call and/or written correspondence if and when their child’s instructional model changes.</p>
<p>Frequently Asked Questions</p>	<p><b>Can my child attend school on days when they are not scheduled?</b></p> <p>No. The hybrid model is established to reduce the overall classroom and building capacity by 50%.</p> <p><b>When days my child is scheduled to learn remotely at home, can I bring them to school for a scheduled therapy session?</b></p> <p>No. The hybrid model is established to reduce the overall classroom and building capacity by 50%. Therapy delivery will continue remotely with your child while they are at home.</p> <p><b>Can I switch my child’s grouping?</b></p> <p>No. By adding your child to the other group it will not maintain 50 % classroom and building capacity.</p> <p><b>Will my child receive a school lunch when scheduled to learn remotely from home?</b></p> <p>Yes. Contact your child’s teachers for arrangement.</p> <p><b>My child forgot something in their classroom. Can we pick it up?</b></p> <p>Yes. Call the receptionist with your request.</p> <p><b>Will the bus pick-up and drop-off my child on days when they are scheduled for in-person services?</b></p> <p>For school aged students, the school will inform your home school district of your child’s schedule. They may contact you with more information.</p>

	<p>For preschool age students, the County has informed the school that bussing will be available on a limited basis. The County has encouraged parent transportation with reimbursement. Stay tuned for more information.</p>
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## Appendix I

<b>HYBRID MODEL #2 DETAILS</b>	
Overview	<p>Daily student in-person population would be 100% four days per week.</p> <p>Remote learning will take place when students are not scheduled for in-person services. Current school day hours would remain.</p> <p><b><u>Mondays, Tuesdays, Thursdays, and Fridays</u></b></p> <p>100% of a classroom cohort attends in person.</p> <p><b><u>Wednesdays</u></b></p> <p>Instruction is conducted remotely through online methods to all students. They will be provided with knowledge acquisition activities and teachers will produce video, assignments and activities for the days of remote instruction. Parent – teacher/therapists meetings conferences. Intensive sanitization and specialized cleaning will also occur on this day.</p>
Methodology	100% of a classroom cohort attends in person.
Effective Dates	<p><b><u>October 12 – June 25</u></b></p> <p>The instructional model for the remainder of the school year or in-part.</p> <p>Factors in determining future instructional models include regional COVID infection rate, phase, and Governor orders.</p>
Communication	<p>Parents will receive a robo-call and/or written correspondence when their child’s instructional model is <b>Hybrid #2</b>.</p> <p>For those parents who do not confirm receipt of the robo-call will receive notification from the child’s teacher.</p>
Frequently Asked Questions	<p><b>Can my child attend school on Wednesdays?</b></p> <p>No. This day is set aside for intensive sanitation and specialized cleaning, parent-teacher/therapist(s) conferences, remote instruction, and knowledge acquisition activities.</p> <p><b>On Wednesdays, can I bring my child to school for a scheduled therapy session?</b></p> <p>No. This day is set aside for intensive sanitation and specialized cleaning, parent-teacher/therapist(s) conferences, remote instruction, and knowledge acquisition activities.</p> <p><b>Will my child receive a school lunch on Wednesday?</b></p>



	<p>Yes. Contact your child’s teachers for arrangement.</p> <p><b>My child forgot something in their classroom. Can we pick it up on a Wednesday?</b></p> <p>Yes. Call the receptionist with your request.</p> <p><b>Will the bus pick-up and drop-off my child on days when they are scheduled for in-person services?</b></p> <p>For school aged students, the school will inform your home school district of your child’s schedule. They may contact you with more information.</p> <p>For preschool age students, the County has informed the school that bussing will be available on a limited basis. The County has encouraged parent transportation with reimbursement.</p>
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## Appendix J

<b>PARENT MEETINGS</b>	
Purpose	<p>To provide a comprehensive overview of the school’s reopening plans for the start of the 2020-21 instructional year and to answer parents’ questions.</p> <p>The topics open for discussion are: the instructional model being implemented, plans for remote learning, and plans for testing &amp; contact tracing.</p> <p>All meetings are the same in content and presentation. Parents are encouraged to attend at least one.</p> <p>Supporting documents include Appendix H, I and K.</p>
Parent Meetings Dates and Times	<p>Friday, August 14 at 10:00am</p> <p>Or</p> <p>Monday, August 17 at 7:00pm</p> <p>Or</p> <p>Tuesday August 18 at 2:00pm</p>
Zoom Link and Phone Information	<p>Join Zoom Meeting  <a href="https://us02web.zoom.us/j/84589423585?pwd=YkpNMzhad0pGM0paRXZZa1hhMFFjdz09">https://us02web.zoom.us/j/84589423585?pwd=YkpNMzhad0pGM0paRXZZa1hhMFFjdz09</a></p> <p>Meeting ID: 845 8942 3585            Passcode: CCL2020            One tap mobile            +19292056099,,84589423585#,,,,,0#,,4249547# US (New York)</p> <p>Dial by your location            +1 929 205 6099 US (New York)</p> <p>Meeting ID: 845 8942 3585            Passcode: 4249547</p> <p>Find your local number: <a href="https://us02web.zoom.us/j/84589423585?pwd=YkpNMzhad0pGM0paRXZZa1hhMFFjdz09">https://us02web.zoom.us/j/84589423585?pwd=YkpNMzhad0pGM0paRXZZa1hhMFFjdz09</a></p>
Questions	<p>For parents who cannot attend one of the three scheduled meetings, you are encouraged to email your questions to <a href="mailto:CovidResponse@Cantalician.org">CovidResponse@Cantalician.org</a>.</p>

Appendix K

<b>TESTING AND CONTACT TRACING PROTOCOL SUMMARY</b>	
Testing Protocol	<p>CCL does not perform COVID-19 testing as it is not approved to perform this function.</p> <p>Decisions regarding COVID-19 testing for students and staff members will be determined by a healthcare provider (i.e. physician, hospital, clinic, etc.) or the local health department.</p> <p>CCL administrators will cooperate with and follow all instructions given by the local health department.</p>
Contact Tracing Protocol	<p>Health screenings, including daily temperature checks and completion of a screening questionnaire, are required for staff, contractors, vendors, and visitors. If a student or staff member has a fever or other symptoms of COVID-19, they will be required to follow up with a health care provider.</p> <p>If a student or staff member reports having tested positive for COVID-19, school administrators will notify the local health department and follow their instructions.</p> <p>Contact tracing is a public health function performed by the local health departments to trace all persons who had contact with a confirmed case of COVID-19. CCL will cooperate with state and local health departments with their contact tracing efforts. CCL will keep accurate attendance records of students and staff members, ensure student schedules are up to date, and keep a visitor’s log. This will help the local health department determine if someone came into contact with a confirmed case of COVID-19.</p> <p style="text-align: center;">Effective June 9, 2021, visitors to the Academic Campus are permitted for special events, tours, visits to classrooms, or other pertinent meetings related to their child’s therapy or instructional services. Proper health screening is required.</p>

Appendix L

<b>In-person Therapy options during at Home Learning Days</b>	
Purpose	While recognizing all health, safety and therapeutic needs of our students, the therapy departments have explored the possibility of more in-person therapy services to students during their at Home Learning days on either Monday, Tuesday, Thursday or Friday (which ever are applicable). Wednesdays are to remain all virtual for every student here at Cantalician to allow for proper cleaning of facilities in order to ensure continued health and safety of our students and staff. Scheduling to provide back to back therapy services will be a priority but also depends upon the student's tolerance and provider schedules. IEP mandates will not be exceeded for the week in order to provide in-person services during an at Home Learning Day (i.e. a Student who has a 2 times weekly mandate for Physical Therapy on their IEP and is seen on Monday and Tuesday during their regularly scheduled in-person days would not be eligible to come in for additional Physical Therapy during at Home Learning Days). Interest in this option does not guarantee Cantalician's ability to accommodate, as many factors are considered in order to make the final decision; however, the agency will work hard to meet as many needs as possible during this time.
Session Days and Times	Therapy times and service days may need to be adjusted to meet student, family and scheduling considerations. Specific schedules will be worked out between the therapists, the therapy department heads and the families. Transportation to and from school on these days will be made by the family except in certain circumstances where a student's district may be able to provide transportation on a case by case basis.
Contact Person	Sue Ruska Phone #: 901-8776 Email: sruska@cantalician.org
Questions	For further questions regarding this service please be sure to talk with your current therapists or call Sue Ruska (contact information listed above).

## Appendix M



**Cantalician Center for Learning  
COVID-19 Testing Plan  
For January 2021**

As of 1/6/2021

Academic Campus Employees	237
SA and PSK Students Attending In-Person	192
PSK - Integrated Students	18
School-Aged Students in Child Care	6
<b>Total</b>	<b>453</b>

Week 1: 1/11/21 – 1/15/21

Week 2: 1/19/21 – 1/22/21

Week 3: 1/25/21 – 1/30/21

Week 4: 2/1/21 – 2/5/21

20% of School Community for monthly testing: 91

- Weekly Testing #: 23

30% of School Community: 136

- Weekly Testing #: 33

Note: These numbers will be reviewed and revised monthly to determine the appropriate numbers for subsequent months.

**Testing**

Testing will be conducted weekly at the CCL Academic Campus from a random sample of the school community:

- The total sample for each week of the month will be selected the week prior to the 1<sup>st</sup> testing of the monthly period. Employees and student guardians will be notified and scheduled accordingly.
  - Any employee or student selected with an exemption for testing will be placed back into the school community pool and another selection will be made in its place (e.g. medical exemption to not receive the test)
- The BinaxNOW COVID–19 rapid antigen test will be used for detecting active infections of COVID-19.
  - Test results are ready after 15 minutes.
- Consent forms will be provided to staff and students to complete prior to testing and will be required in order to receive a COVID-19 test by a CCL-trained employee.
- Testing events will be done on Mondays (for employees) and Wednesday (for students)
  - Parents will be required to bring their child to the school.
- There be 2-4 locations in the gymnasium designated for COVID-19 testing
- Symptomatic employees who have been referred to a health care provider may not participate with these testing procedures.

**Mondays: Agency Employees**

- Notification will be made to the selected employees by the previous Wednesday.
  - The selected employee will schedule their time for testing with the Nursing Department (or designee) at the Academic Campus for the following Monday.

- Tests will be scheduled in the morning and according to the employee's schedule.
- Once they have been selected and notified, employees also have the option to go to an alternative testing site on their own time and at their own cost.
  - The employee will need to schedule their appointment prior to Monday and communicate the date and time of the appointment with the Nursing department (or designee).
  - The employee will be required to communicate and submit their testing results to the Nursing Department (or designee) immediately after receipt.

Wednesdays: Students

- Notification will be made to the guardian of the selected student by the previous Friday.
  - The guardian will schedule their time for testing with the Nursing Department (or designee) at the Academic Campus for the following Wednesday.
- Once they have been selected and notified, the guardian of the student will also have the option to go to an alternative testing site on their own.
  - The guardian of the student will need to schedule their appointment prior to Wednesday and communicate the date and time of the appointment with the Nursing department (or designee).
  - The guardian of the student will be required to communicate and submit their testing results to the Nursing Department (or designee) immediately after receipt.

Note: Employees and students will not be tested again until 95% of the identified school community has participated. Depending on the cluster zone designation, an employee may not need to be retested for 3-5 months.

**Day of Testing at the Academic Campus:**

1. Employees and students/guardians will be directed to the gym upon arrival for their scheduled COVID-19 test.
2. As necessary, a consent form will be signed prior to testing and will be required in order to receive a COVID-19 test by a CCL-trained employee.
3. Employees and students will be given a copy of the [BinaxNOW Fact Sheet For Patients](#) and a copy of the [COVID-19 Quarantine vs. Isolation](#) basic information sheet.
4. Following the test:
  - Employees will be asked to return to their cars and wait 15 minutes for results.
    - Nursing staff (or designee) will call them in 15 minutes with the results.
    - There will be a designated area for employees to wait if they do not have a vehicle to wait in.
  - Students and guardians will be asked to return home.
    - Nursing staff (or designee) will provide a follow up call to them with the results.
5. If a test result is positive:
  - A copy of the [Standing Orders for Isolation for Erie County](#) will be reviewed with and provided to the employee or guardian of the student electronically or via mail.
    - This will also be posted on the CCL website.

- ECDOH has asked CCL to convey a priority message - that if someone has a positive test, that they need to go home immediately and ISOLATE, and their household needs to QUARANTINE.
  - This crucial to breaking the chain of disease transmission in the community.
- 6. Results will be uploaded to the Electronic Clinical Laboratory Reporting System (ECLRS) once all tests have been administered and read for the day.
  - ECDOH contact tracers will be in touch with individuals who have a positive test result or their parent/guardian. That will take time, depending on how quickly test results are uploaded to the Electronic Clinical Laboratory Reporting System (ECLRS).
- 7. Results will also be recorded on the daily New York State School Survey reporting form.
- 8. The Erie County Department of Health (ECDOH) will be using the following criteria to determine if a school should be recommended to close due to COVID-19 cases:

Within a given school building, if a combination of on- and off-site diagnostic COVID tests conducted within a 7-day rolling timeframe yields a number of positive cases that represents 3% or more of all in-person students and staff members, ECDOH will first engage in a conversation with the district and/or school building representative to further investigate the source(s) of the positive cases. If, after conversation and careful analysis, ECDOH determines that the cases pose a significant risk to the school building, then ECDOH will recommend a 14-day closure of the affected school building.

- Criteria applied per building, not per district
- Both on-site and off-site diagnostic COVID test results will be considered
- Diagnostic COVID tests conducted within a 7-day rolling timeframe:
  - If the number of positives represents 3% or more of all in-person students and staff members (e.g., in a building of 1,000 that would be 30 or more people testing positive per 7-day rolling timeframe);
- Then, ECDOH will investigate and consider the source(s) of the cases (e.g., household, community, school);
- And, recommend a 14-day closure of the affected building, if determined necessary

3% of School Community: 13 (as of 1/6/21)



**Cantalician Center for Learning  
Standard Operating Procedure**

<b>TITLE:</b>	COVID-19 Guidance – Academic Campus – COVID-19 Testing
<b>DOCUMENT OWNER:</b>	CC/QA Coordinator
<b>EFFECTIVE DATE:</b>	12/16/2020
<b>DATE OF LAST REVISION:</b>	1/7/2021

**Attachments / Links**

Attachment A: COVID-19 Testing Plan

Attachment B: [BinaxNOW Fact Sheet For Patients](#)

Attachment C: [COVID-19 Quarantine vs. Isolation](#)

Attachment D: School Community COVID-19 Testing Consent Forms

Attachment E: [Guidance for P-12 Schools and Higher Education when a student or staff member has COVID-19 symptoms or a positive COVID-19 test \(Erie County – Mark C. Poloncarz\) - revised 12/11/2020.](#)

Attachment F: [Standing Orders for Isolation for Erie County](#)

BinaxNOW Training Website: <https://www.globalpointofcare.abbott/en/support/product-installation-training/navica-brand/navica-binaxnow-ag-training.html>

**Scope of Procedure:**

This procedure applies to all employees and students at the Academic Campus.

The following guidance was used to create this procedure:

- [Interim Guidance on COVID-19 Testing Requirements for Public and Non-Public Schools Located in Areas Designated as “Red” or “Orange” Cluster Zones Under the New York State Cluster Action Initiative \(Updated December 4, 2020, Originally Issued November 3, 2020\)](#)
- Erie County Department of Health LSL Agreement
- Recommended Criteria and Process for p-12 School Closure – Rev. January 7, 2021

**Background:**

Governor Andrew M. Cuomo implemented the cluster action initiative to address COVID-19 hot spots as they occur. This science-based approach focuses on addressing clusters of cases and aims to prevent further community-wide transmission of the virus, and includes new rules and restrictions directly targeted to areas with the highest concentration of COVID-19 cases and surrounding communities. The initiative divides clusters and the areas around them into three categories – the cluster itself (red zone), a warning zone (orange zone), and a precautionary zone (yellow zone). Areas can also become a zone based upon metrics established by New York State Department of Health (DOH).

New York State recognizes that safely keeping pre-kindergarten through grade 12 schools open for in-person instruction is critical to student success and parent stability. In alignment with international and national experts, the State is committed to allowing schools to remain open as long as a school's

infection rate is under control and remains under the infection rate of the community at large, particularly for younger students (i.e., Pre-K to Grade 8).

Under the authority of Executive Order 202.79, schools in red and orange zones must adhere to strict health guidelines, as detailed herein, to keep schools in focus areas safely open to in-person instruction. The guidelines require daily symptom and exposure screening, as well as testing of in-person students, faculty and staff.

**Procedures:**

**Note:** Although schools can remain open if they are in a “yellow zone,” there is a mandatory testing requirement to keep schools open. The current guidance requires 20% of the in-person population to be tested over the two-week period immediately following the announcement of a yellow zone designation.

If after the first two weeks:

- The results of testing reveal that the positivity rate among the 20% tested is lower than the yellow zone’s current 7-day positivity rate, the school can stop testing.
- The results of testing reveal that the positivity rate among the 20% tested is higher than the yellow zone’s current 7-day positivity rate, the school will be required to continue testing 20% of in-person students, teachers and staff every two weeks, until it is lower than the surrounding areas.

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**Interim Guidance on COVID-19 Testing Requirements for Public and Non-Public Schools Located in Areas Designated as “Red” or “Orange” Cluster Zones Under the New York State Cluster Action Initiative**  
(Updated December 4, 2020, Originally Issued November 3, 2020)

**For Schools Located in a Geographic Area Designated as a Red or Orange Zone**

There is no longer a requirement for schools located in red or orange zones to close to in-person instruction. Schools in these zones may remain open for in-person instruction, subject to strict adherence to this guidance and any directives issued by DOH.

Schools in red and orange zones must complete an attestation on the school survey, in addition to required dashboard reporting, that the school is complying with the testing requirements below.

**Schools in an Orange Zone**

For schools located in a geographic area designated as an Orange Zone, a total of 20% of in-person students, faculty and staff must be tested for COVID-19 over the one month period following the zone designation. The numbers tested should be proportionately spread across the month with 10% the maximum/minimum to be tested biweekly.

**Schools in a Red Zone**

For schools located in a geographic area designated as a Red Zone, a total of 30% of in person students, faculty and staff must be tested for COVID-19 over the one month period following the zone designation. The numbers tested should be proportionately spread across the month with 15% the maximum/minimum to be tested biweekly.

**Schools in either an Orange or Red Zone**

If the random sampling generates 9 or more positive cases in any school, or if for a sample size of more than 300 weekly tests, achieves a positivity rate of 2% or higher (6 cases or more depending on

sample size) in New York City, or 3% (9 or more cases depending on sample size) outside of New York City, of one such discrete sample, then the school will be required to close.

In addition, all schools in orange or red zones are required to continue to adhere to all existing State-issued requirements, including completion of the daily school survey. Schools must also:

- Ensure face coverings are worn by students, faculty, and staff, in accordance with Department of Health's (DOH) Interim Guidance for In-Person Instruction at Pre-K to Grade 12 Schools, particularly since orange and red zones reflect higher rates of COVID-19 community infection, or any local department of health order regarding the use of face coverings in this setting.
  - Face coverings provide protection to the wearers and individuals around wearers by placing an effective barrier over the nose and mouth that prevents spread of COVID-19 through respiratory droplets. The use of face coverings is particularly important when social distancing of at least six feet is unable to be maintained as close contact remains the main method of transmission, according to the Centers for Disease Control and Prevention (CDC).
- The school should ensure that it provides the opportunity to be tested on school grounds, or otherwise support testing and/or accept test results from healthcare providers.
  - If the school does not hold a testing event or provide on grounds testing, test results provided to the school must be received within 7 days from the date of specimen collection and specimen collection must be after the date that geographic area in which the school is located was designated an orange or red zone.
  - If at any point the geographic area in which the school is located is designated as a yellow zone, the yellow zone biweekly testing requirement of 20% of the in-person population (i.e., students, faculty and staff) applies immediately, and such school shall only be required to test 20% beginning that week, in accordance with DOH's Interim Guidance on Mandatory COVID-19 Testing in Public and Non-Public Schools Located in Areas Designated as "Yellow Zones" Under the New York State Cluster Action Initiative.

Students who are participating in hybrid learning or in all-virtual learning, and who are attending an OCFS-licensed/registered or enrolled legally exempt group child program located within a school during school hours, are subject to the testing requirements and must be included in the school's random testing protocols. Additionally, the testing requirement applies to Pre-K classes that are taking place on a school site.

Members of the school community who test positive for COVID-19 must isolate, according to established DOH guidance. Further, schools must notify health authorities immediately upon being informed of any positive test results by an individual within school facilities or on school grounds, including students, faculty, and staff, pursuant to DOH guidance. Partnerships between schools and local health departments are critical to effective implementation of COVID-19 protocols in this educational setting. Specifically, schools must support all contact tracing efforts from health authorities and such tracing must be promptly performed to ensure that contacts to newly identified positive individuals are quarantined, according to established DOH guidance.

### **Testing Options**

To ensure that students, faculty and staff have been tested for COVID-19, schools have the following options:



- Schools can accept written test results from healthcare providers;
- Schools can have students, faculty, and/or staff go to a test site run by New York State to have specimens collected for testing;
- Schools can establish partnerships with other entities who are authorized to perform testing to have their students, faculty, and staff tested;
- Schools that currently have a limited service laboratory (LSL) registration can add COVID-19 antigen testing to their existing LSL registration, request to receive rapid tests from the state and perform testing on their students, faculty, and staff, or
- Schools can become approved to perform testing by obtaining an LSL registration and once approval is granted, request to receive rapid tests from the state and perform testing on their students, faculty, and staff. For schools that do not have an LSL, Local Health Departments (LHDs) are required to allow schools to operate under their LSL for the purposes of conducting weekly testing. If the LHD does not have an operational LSL or is unable to support the school in conducting testing, the LHD must work with the school to identify community partners with an LSL. See Guidance.
- Schools can utilize pooled testing. However, pooled testing must be conducted by a laboratory that is approved to conduct diagnostic pooled testing so that individuals receive their test results and they can be reported to the state.

New York State is providing schools through local health departments with rapid test kits upon request. Schools must provide trained personnel, with necessary laboratory permits, to conduct the tests.

Questions on amending or obtaining an LSL and requests for test kits should be sent to [Covid19rapidtest@health.ny.gov](mailto:Covid19rapidtest@health.ny.gov).

#### **Data and Reporting**

Consistent with existing requirements, any testing conducted through schools, in partnership with other health care entities, must also be reported separately through the school dashboard survey and to ECLRS, including all rapid point-of-care testing.

#### **Failure to Meet these Requirements by Schools in Geographic Area Designated as a Red or Orange Zone**

Schools that do not meet the reopening requirements set forth in this guidance must remain in remote/distanced learning until such time as the requirements are met.

Reopened schools that fail to comply with these requirements may be subject to Public Health Law Section 16 orders, or other fines and penalties.

Notwithstanding a school's compliance with the testing requirements, New York State and DOH reserve the right to keep any school closed if there is determined to be a threat to public health or extenuating circumstances exist.

#### **Agency Procedures:**

1. The CC/QA Coordinator (or designee) completes the attestation on the school survey, in addition to other required dashboard reporting, that the school is complying with testing requirements.

2. The agency has developed a testing plan that addresses the requirements for the school to return or continue in-person instruction under an orange or red zone designation. (Refer to Attachment A).
3. CCL has implemented procedures in compliance with [Guidance for P-12 Schools and Higher Education when a student or staff member has COVID-19 symptoms or a positive COVID-19 test \(Erie County – Mark C. Poloncarz\) - revised 12/11/2020.](#)

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### **Use of the Erie County Department of Health (ECDOH) Limited Service License (LSL) for schools in Erie County That Will Conduct NYS-Mandated School COVID-19 Testing to Continue or Resume In-Person Education (12/1/2020)**

Schools that access the ECDOH LSL will agree to develop, implement and maintain certain responsibilities, including:

- Documentation that the School medical director will act as the ordering physician for COVID-19 testing as well as the director of the School rapid testing program.
- A plan to test School students, teachers, and staff for COVID-19 in percentage and interval(s) consistent with New York State mandates for in-person education as updated periodically.
- A plan to order rapid COVID-19 test kits directly from the New York State Department of Health.
- Training for all staff to perform said tests and demonstration of competency relative to the implementation of the School's rapid testing program. Staff may include employees of the School, third parties retained by the School to perform testing, or volunteers (such as volunteer fire personnel).
- A site safety plan which adequately addresses the safety concerns surrounding a school rapid testing program and further conforms to standard industry practice and procedure or the standard as provided by New York State for school testing.
- An adequate number of certified staff available to the school to collect nasal samples. Staff may include employees of the School, paid third parties retained by the School to perform testing, or volunteers (such as volunteer fire personnel).
- An adequate school stockpile of personal protective equipment for certified collection staff. In order to ensure proper protection for all staff collecting nasal samples, the School should use eye protection and n95 masks for personal protection. An n95 fit testing program must be implemented and documented.
- A secure and temperature-controlled test material storage plan.
- A quality control program in a standard at least equal to or greater than the standard required by New York State.
- A plan for COVID-19 testing registration and consent for both minors and adults.
- A plan to confidentially provide COVID-19 test results to those tested by School.
- A HIPAA compliance training program for School staff.

- A HIPAA compliant plan to securely store medical records.
- A plan to remove students or staff from school after a positive COVID-19 test result and provide students' guardians or staff with a copy of ECDOH Isolation orders ([www.erie.gov/covid19/ig](http://www.erie.gov/covid19/ig)).
- A plan for schools to securely enter COVID-19 test result data into the NYSDOH Electronic Clinical Laboratory Reporting System (ECLRS).
- A plan for schools to dispose of medical waste.

### Agency Procedures:

#### **Medical Director**

CCL has an Agreement with Healthworks and Dr. Stuart Dorfman to serve as the school's medical director, for the purposes of development and implementation of a COVID-19 testing program for CCL students, staff, and teachers.

#### **School Testing Plan**

Refer to Attachment A for CCL's plan to test students, teachers, and staff for COVID-19 in percentage and interval(s) consistent with New York State mandates for in-person education as updated periodically.

- Employees and students will be given a copy of the [BinaxNOW Fact Sheet For Patients](#) (Attachment B) and a copy of the [COVID-19 Quarantine vs. Isolation](#) (Attachment C) basic information sheet.

#### **Ordering of BinaxNOW Rapid Testing Kits**

The COVID-19 Rapid Request Form has been completed and sent to the New York Department of Health and to the contact at Erie County's Department of Health to order the BinaxNOW COVID-19 rapid test kits from Erie County.

- Initial testing kits have been ordered and received according to approximated weekly and monthly testing numbers required for the designated zone.
- Additional kits can be requested by contacting Gregory Gill at Erie County:
  - [Gregory.gill@erie.gov](mailto:Gregory.gill@erie.gov); 716-253-4863

#### **Training**

Training has been completed by designated staff to perform BinaxNOW testing with demonstration of competency relative to the implementation of CCL's rapid testing program.

- Required training for the BinaxNOW testing can be located on the [Abbott Global Point of Care](#) website.
- Training conducted by the agency's medical director, which included additional BinaxNOW training and demonstration of competency of administration of the test.

Additionally, as per Agreement with Healthworks and Cantalician Center:

Healthworks, including Drs. Mark Costanza, Stuart Dorfman, and/or Kimberly Oddo, shall provide training, supplemental to the on-line video training from the DOH, to all School nurses and others relative to the use of the Abbott BinaxNOW™ COVID-19 Ag Card Point of Care SARS-CoV-2 Diagnostic Test. Such training shall occur under the supervision of the School's Medical Director, Dr. Stuart Dorfman, and will include proper use of personal protective equipment ("PPE", including an

N95 respirator), proper storage of test kits, a review of the procedures covered in the video training, a demonstration of the actual test, proper interpretation of results, recording and reporting of all results with the state and county DOH, as well as any other operating procedures which may be required under regulations pertaining to limited service laboratories (LSL) licensure.

- All appropriate personnel have undergone this training.

#### **Site Safety Plan**

CCL's Safety Plan has been reviewed and revised by the agency's Safety Officer and adequately addresses the safety concerns surrounding a school rapid testing program and further conforms to standard industry practice and procedure or the standard as provided by New York State for school testing.

#### **Certified Staff to Collect Samples**

Four (4) nursing department employees have been certified to collect the nasal swab samples staff at the school testing events.

- As necessary, other designated agency staff will undergo training and certification.

#### **Personal Protective Equipment**

CCL has an adequate amount of personal protective equipment for certified collection staff to use.

- Disposable gloves, lab coats, face shields/goggles, and n95 masks will be used to ensure protection while collecting nasal samples.
- Trained staff have undergone an n95 fit testing program in accordance with the agency's safety plan.

#### **Storage Plan**

A locked cabinet in the school nursing office is being utilized for BinaxNOW test kit storage.

- The nursing office meets the required storage conditions.

#### **Quality Control**

CCL follows the quality control frequency requirements and quality control test procedures according to the [BinaxNOW Abbott Global Point of Care Training](#). Quality control is run once with each new shipment received and once for each new operator.

- The BinaxNOW COVID-19 Ag Product Insert card is available for reference on the BinaxNOW Abbott Global Point of Care Training website and at the nursing station.

#### **Procedural Controls:**

- A. The pink-to-purple line at the "Control" position is an internal procedural control. If the test flows and the reagents work, this line will always appear.
- B. The clearing of background color from the result window is a negative background control. The background color in the window should be light pink to white within 15 minutes. Background color should not hinder reading of the test.

#### **External Positive and Negative Controls:**

Good laboratory practice suggests the use of positive and negative controls to ensure that test reagents are working and that the test is correctly performed. BinaxNOW COVID-19 Ag Card kits contain a Positive Control Swab and Sterile Swabs that can be used as a Negative Control Swab. These swabs will monitor the entire assay. If the correct control results are not obtained, do not perform patient tests

or report patient results. Contact Technical Support during normal business hours before testing patient specimens.

#### **Testing Registration and Consent**

Consent forms have been developed for students/guardians and the employee. A plan for COVID-19 testing registration for the school community has been developed. Refer to Attachment D for a copy of the consent forms for students/guardians and employees

- An online form has been available on the agency's website for students/guardians.
- Employees may complete their forms and send back via email or may complete at the Academic Campus starting the week of 1/4/2021.
- Following random sample selections, the nursing department and human resources department are responsible with registering/scheduling and obtaining consent prior to test administration.

#### **Providing COVID-19 Test Results**

Designated employees from Human Resources, the Compliance Department, or the Nursing Department are responsible for reporting test results to employees or to student guardians from a private confidential location (e.g. Nursing Office, Human Resources office).

#### **HIPAA Compliance Training**

All agency employees receive HIPAA Compliance training at agency orientation and on an annual basis.

#### **Storage of Medical Records**

All medical information for students are kept in the secured Nursing office at the Academic Campus. All employee information is kept on the confidential Human Resources network and in the employee's secured confidential personnel file. Access to these areas are limited to authorized employees only.

#### **Isolation Orders**

If a test result is positive, a copy of the [Standing Orders for Isolation for Erie County](#) will be reviewed with and provided to the employee or guardian of the student electronically or via mail.

- This will also be posted on the CCL website.

ECDOH has also asked CCL to convey a priority message that if someone has a positive test, that they need to go home immediately and ISOLATE, and their household needs to QUARANTINE.

Additionally, CCL will follow [Guidance for P-12 Schools and Higher Education When a Student or Staff Member Has COVID-19 Symptoms or a Positive COVID-19 Test Erie County – Mark C. Poloncarz](#), updated 12/11/2020, which addresses removal of students or staff from school after a positive COVID-19 test result.

#### **Securely Entering COVID-19 Test Result Data into the NYSDOH Electronic Clinical Laboratory Reporting System (ECLRS)**

Designated employees from Human Resources, the Compliance Department, or the Nursing Department are responsible for reporting test results to ECLRS and on the school survey dashboard.

#### **Disposal of Medical Waste**

Biohazard containers are utilized for disposal of medical waste from the BinaxNOW testing:

**Cantalician Center for Learning  
COVID-19 Testing Plan  
For January 2021**

As of 1/6/2021

Academic Campus Employees	237
SA and PSK Students Attending In-Person	192
PSK - Integrated Students	18
School-Aged Students in Child Care	6
Total	453

Week 1: 1/11/21 – 1/15/21Week 2: 1/19/21 – 1/22/21Week 3: 1/25/21 – 1/30/21Week 4: 2/1/21 – 2/5/21

20% of School Community for monthly testing: 91

- Weekly Testing #: 23

30% of School Community: 136

- Weekly Testing #: 33

Note: These numbers will be reviewed and revised monthly to determine the appropriate numbers for subsequent months.

**Testing**

Testing will be conducted weekly at the CCL Academic Campus from a random sample of the entire school community.

- The total sample for each week of the month will be selected the week prior to the 1<sup>st</sup> testing of the monthly period. Employees and student guardians will be notified and scheduled accordingly.
  - Any employee or student selected with an exemption for testing will be placed back into the school community pool and another selection will be made in its place (e.g. medical exemption to not receive the test)
- The BinaxNOW COVID–19 rapid antigen test will be used for detecting active infections of COVID-19. Test results are indicated after 15 minutes.
- Consent forms will be provided to staff and students to complete prior to testing and will be required in order to receive a COVID-19 test by a CCL-trained employee.
- Testing events will be done on Mondays (for employees) and Wednesday (for students)
  - Parents will be required to bring their child to the school.
- There be 2-4 locations in the gymnasium designated for COVID-19 testing
- Anyone from the school community who has been referred to a health care provider for COVID-19 symptoms, or is currently under isolation or quarantine orders, may not participate with these testing procedures.

Mondays (or first weekday following a holiday) Agency Employees

- Notification will be made to the selected employees by the previous Wednesday.

- The selected employee will schedule their time for testing with the Nursing Department (or designee) at the Academic Campus for the following Monday.
  - Tests will be scheduled in the morning and according to the employee's schedule.
  - If the test is scheduled later than their normal start time, the employee
- Once they have been selected and notified, employees also have the option to go to an alternative testing site on their own time and at their own cost.
  - The employee will need to schedule their appointment prior to Monday (or first day of the week following a holiday) and communicate the date and time of the appointment with the Nursing department (or designee).
  - The employee will be required to communicate and submit their testing results to the Nursing Department (or designee) immediately after receipt.

#### Wednesdays: Students

- Notification will be made to the guardian of the selected student by the previous Friday.
  - The guardian will schedule their time for testing with the Nursing Department (or designee) at the Academic Campus for the following Wednesday.
- Once they have been selected and notified, the guardian of the student will also have the option to go to an alternative testing site on their own.
  - The guardian of the student will need to schedule their appointment prior to Wednesday and communicate the date and time of the appointment with the Nursing department (or designee).
  - The guardian of the student will be required to communicate and submit their testing results to the Nursing Department (or designee) immediately after receipt.

Note: Employees and students will not be tested again until 95% of the identified school community has participated. Depending on the cluster zone designation, an employee may not need to be retested for 3-5 months.

#### Day of Testing at the Academic Campus:

1. Employees and students/guardians will be directed to the gym upon arrival for their scheduled COVID-19 test.
2. As necessary, a consent form will be signed prior to testing and will be required in order to receive a COVID-19 test by a CCL-trained employee.
3. Employees and students will be given a copy of the [BinaxNOW Fact Sheet For Patients](#) and a copy of the [COVID-19 Quarantine vs. Isolation](#) basic information sheet.
4. Following the test:
  - Employees will be asked to return to their cars and wait 15 minutes for results.
    - Nursing staff (or designee) will call them in 15 minutes with the results.
    - There will be a designated area for employees to wait if they do not have a vehicle to wait in.
  - Students and guardians will be asked to return home.
    - Nursing staff (or designee) will provide a follow up call to them with the results.
5. If a test result is positive:
  - A copy of the [Standing Orders for Isolation for Erie County](#) will be reviewed with and provided to the employee or guardian of the student electronically or via mail.
    - This will also be posted on the CCL website.

- ECDOH has asked CCL to convey a priority message - that if someone has a positive test, that they need to go home immediately and ISOLATE, and their household needs to QUARANTINE.
  - This crucial to breaking the chain of disease transmission in the community.
- 6. Results will be uploaded to the Electronic Clinical Laboratory Reporting System (ECLRS) once all tests have been administered and read for the day.
  - ECDOH contact tracers will be in touch with individuals who have a positive test result or their parent/guardian. That will take time, depending on how quickly test results are uploaded to the Electronic Clinical Laboratory Reporting System (ECLRS).
- 7. Results will also be recorded on the daily New York State School Survey reporting form.

The Erie County Department of Health (ECDOH) will be using the following criteria to determine if a school should be recommended to close due to COVID-19 cases:

Within a given school building, if a combination of on- and off-site diagnostic COVID tests conducted within a 7-day rolling timeframe yields a number of positive cases that represents 3% or more of all in-person students and staff members, ECDOH will first engage in a conversation with the district and/or school building representative to further investigate the source(s) of the positive cases. If, after conversation and careful analysis, ECDOH determines that the cases pose a significant risk to the school building, then ECDOH will recommend a 14-day closure of the affected school building.

- Criteria applied per building, not per district
- Both on-site and off-site diagnostic COVID test results will be considered
- Diagnostic COVID tests conducted within a 7-day rolling timeframe:
  - If the number of positives represents 3% or more of all in-person students and staff members (e.g., in a building of 1,000 that would be 30 or more people testing positive per 7-day rolling timeframe);
- Then, ECDOH will investigate and consider the source(s) of the cases (e.g., household, community, school);
- And, recommend a 14-day closure of the affected building, if determined necessary

3% of School Community: 13 (as of 1/6/21)



<p><b>FACT SHEET FOR PATIENTS</b>                  Abbott Diagnostics Scarborough, Inc.                  BinaxNOW™ COVID-19 Ag Card</p>	<p>August 26, 2020</p>	<p>Coronavirus                  Disease 2019                  (COVID-19)</p>
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You are being given this Fact Sheet because your sample(s) was tested for the Coronavirus Disease 2019 (COVID-19) using the BinaxNOW COVID-19 Ag Card.

This Fact Sheet contains information to help you understand the risks and benefits of using this test for the diagnosis of COVID-19. After reading this Fact Sheet, if you have questions or would like to discuss the information provided, please talk to your healthcare provider.

**For the most up to date information on COVID-19 please visit the CDC Coronavirus Disease 2019 (COVID-19) webpage:**  
<https://www.cdc.gov/COVID19>

**What is COVID-19?**

COVID-19 is caused by the SARS-CoV-2 virus which is a new virus in humans causing a contagious respiratory illness. COVID-19 can present with a mild to severe illness, although some people infected with COVID-19 may have no symptoms at all. Older adults and people of any age who have underlying medical conditions have a higher risk of severe illness from COVID-19. Serious outcomes of COVID-19 include hospitalization and death. The SARS-CoV-2 virus can be spread to others not just while one is sick, but even before a person shows signs or symptoms of being sick (e.g., fever, coughing, difficulty breathing, etc.). A full list of symptoms of COVID-19 can be found at the following link: <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>.

**What is the BinaxNOW COVID-19 Ag Card?**

The BinaxNOW COVID-19 Ag Card is a type of test called an antigen test. Antigen tests are designed to detect proteins from the virus that causes COVID-19 in respiratory specimens, for example nasal swabs.

**Why was my sample tested?**

You were tested because your healthcare provider believes you may have been exposed to the virus that causes COVID-19 based on your signs and symptoms (e.g., fever, cough, difficulty breathing), and/or other risk factors and you are within the first seven days of the onset of symptoms.

**What are the known and potential risks and benefits of the test?**

Potential risks include:

- Possible discomfort or other complications that can happen during sample collection.
- Possible incorrect test result (see below for more information).

Potential benefits include:

- The results, along with other information, can help your healthcare provider make informed recommendations about your care.
- The results of this test may help limit the spread of COVID-19 to your family and others in your community.

**What does it mean if I have a positive test result?**

If you have a positive test result, it is very likely that you have COVID-19. Therefore, it is also likely that you may be placed in isolation to avoid spreading the virus to others. There is a very small chance that this test can give a positive result that is wrong (a false positive result). Your healthcare provider will work with you to determine how best to care for you based on your test result(s) along with your medical history, and your symptoms.

**What does it mean if I have a negative test result?**

A negative test result means that proteins from the virus that causes COVID-19 were not found in your sample.

- **Where can I go for updates and more information?** The most up-to-date information on COVID-19 is available at the CDC General webpage: <https://www.cdc.gov/COVID19>. In addition, please also contact your healthcare provider with any questions/concerns.

<p><b>FACT SHEET FOR PATIENTS</b>                  Abbott Diagnostics Scarborough, Inc.                  BinaxNOW™ COVID-19 Ag Card</p>	<p>August 26, 2020</p>	<p>Coronavirus                  Disease 2019                  (COVID-19)</p>
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It is possible for this test to give a negative result that is incorrect (false negative) in some people with COVID-19. This means that you could possibly still have COVID-19 even though the test is negative. If your test result is negative, your healthcare provider will consider the test result together with all other aspects of your medical history (such as symptoms, possible exposures, and geographical location of places you have recently traveled) in deciding how to care for you. The amount of antigen in a sample may decrease the longer you have symptoms of infection. Specimens collected after you have had symptoms for more than seven days may be more likely to be negative compared to a molecular assay.

It is important that you work with your healthcare provider to help you understand the next steps you should take.

**What are the differences between antigen tests and other COVID-19 tests?**

There are different kinds of tests for COVID-19. Molecular tests (also known as PCR tests) detect genetic material from the virus. Antigen tests detect proteins from the virus. Antigen tests are very specific for the virus, but are not as sensitive as molecular tests. This means that a positive result is highly accurate, but a negative result does not rule out infection.

If your test result is negative, you should discuss with your healthcare provider whether an additional molecular test would help with your care, and when you should discontinue home isolation. If you will not have an additional test to determine if you are contagious, the CDC currently recommends that you should stay home until three things have happened:

- You have had no fever for at least 24 hours (that is one full day of no fever without the use of medicine that reduces fevers)

AND

- Other symptoms have improved (for example, when your cough or shortness of breath has improved)

AND

- At least 10 days have passed since your symptoms first appeared.

For more information, the CDC has provided guidelines on how to prevent the spread of COVID-19 if you are sick: <https://www.cdc.gov/coronavirus/2019-ncov/downloads/sick-with-2019-nCoV-fact-sheet.pdf>.

**Is this test FDA-approved or cleared?**

No. This test is not yet approved or cleared by the United States FDA. When there are no FDA-approved or cleared tests available, and other criteria are met, FDA can make tests available under an emergency access mechanism called an Emergency Use Authorization (EUA). The EUA for this test is supported by the Secretary of Health and Human Service's (HHS's) declaration that circumstances exist to justify the emergency use of *in vitro* diagnostics for the detection and/or diagnosis of the virus that causes COVID-19. This EUA will remain in effect (meaning this test can be used) for the duration of the COVID-19 declaration justifying emergency of IVDs, unless it is terminated or revoked by FDA (after which the test may no longer be used).

**What are the approved alternatives?**

There are no approved available alternative tests. FDA has issued EUAs for other tests that can be found at: <https://www.fda.gov/emergency-preparedness-and-response/mcm-legal-regulatory-and-policy-framework/emergency-use-authorization#2019-ncov>.

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- **Where can I go for updates and more information?** The most up-to-date information on COVID-19 is available at the CDC General webpage: <https://www.cdc.gov/COVID19>. In addition, please also contact your healthcare provider with any questions/concerns.
-

# COVID-19: Quarantine vs. Isolation

**QUARANTINE** keeps someone who was in close contact with someone who has COVID-19 away from others.



**If you had close contact with a person who has COVID-19**



• Stay home until 14 days after your last contact.



• Check your temperature twice a day and watch for symptoms of COVID-19.



• If possible, stay away from people who are at higher-risk for getting very sick from COVID-19.



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**ISOLATION** keeps someone who is sick or tested positive for COVID-19 without symptoms away from others, even in their own home.



**If you are sick and think or know you have COVID-19**



- Stay home until after
  - At least 10 days since symptoms first appeared **and**
  - At least 24 hours with no fever without fever-reducing medication **and**
  - Symptoms have improved



**If you tested positive for COVID-19 but do not have symptoms**



- Stay home until after
  - 10 days have passed since your positive test



If you live with others, stay in a specific “sick room” or area and away from other people or animals, including pets. Use a separate bathroom, if available.

[cdc.gov/coronavirus](https://www.cdc.gov/coronavirus)



**BINAXNOW COVID-19 TESTING CONSENT  
SCHOOL COMMUNITY EMPLOYEES**

The Cantalician Center for Learning (CCL) is presently designated as part of a micro-cluster during the COVID-19 pandemic. CCL is now required to test a designated percentage of the school community in order to continue in-person instruction. Please review this entire document, select one of the 3 options and sign below, and return to Human Resources.

**Option 1:**

I consent to allow a CCL school nurse, or other trained staff, to administer a BinaxNOW Covid-19 rapid test.

I understand that all testing data will be shared with the Department of Health. I understand that I will receive the results of this test from either a designated agency employee or the local Department of Health. I understand that I will need to follow all isolation and contact tracing requirements from the Department of Health if my test is positive.

**Option 2:**

I elect to obtain a COVID-19 test by an outside source of my choice following CCL's request. I understand I will need to schedule this test on my own time and that I am responsible for any costs or co-pays. I understand I will need to provide proof of testing and documentation of results to CCL. I understand that I will need to follow all isolation and contact tracing requirements from the Department of Health if my child tests positive.

**Option 3:**

I do not provide consent to COVID-19 testing. I understand that testing is a condition of employment and this may affect my employment status with CCL.

Please select one of the options above and complete the information below. You may change your option at any time by completing a new form. This consent will remain in effect during the entire pandemic period unless specifically modified or revoked in writing.

**Please print:**

Employee's Name:	Title:	DOB:
Email:	Phone Number:	
Signature:	Date:	



**COVID-19 school testing consent**

The Cantalician Center for Learning (CCL) is presently designated as part of a micro-cluster during the COVID-19 pandemic. CCL is now required to test a percentage of the school community to provide in-person instruction. Please review this entire document, select one of the 3 options and sign below.

**Option 1:**

**I consent to allow a CCL school nurse, or other trained staff, to administer a BinaxNOW Covid-19 rapid test to my child.** I understand that I will need to bring my child in for testing to the school. I understand that this test may be administered at school when I will not be present. I understand that all testing data will be shared with the Department of Health. I understand that I will receive the results of this test from either a school employee or the local Department of Health. I understand that this test is minimally invasive and not painful, but my child may find it to be unpleasant. I understand that test administration may not be successful, and staff will cease administration efforts if my child actively resists the test or demonstrates maladaptive behaviors. I understand that if the school testing attempt is unsuccessful, my child may need to move to remote instruction. I understand that I will need to follow all isolation and contact tracing requirements from the Department of Health if my child tests positive.

**Option 2:**

**I do not want CCL to administer a BinaxNOW Covid-19 rapid test to my child. Instead, I will have my child tested for COVID-19 by an outside source following CCL's request.** I understand I will need to provide proof of testing and documentation of results to CCK. I understand that my child may need to move to remote instruction. I fail to have my child tested. I understand that I will need to follow all isolation and contact tracing requirements from the Department of Health if my child tests positive.

**Option 3:**

**I do not provide consent for my child to receive COVID testing at school and do not plan to have my child tested elsewhere.** I understand that my child may need to return to remote instruction only.

Please select one of the options above and complete the information below. You may change your option at any time by completing a new form. This consent will remain in effect during the entire pandemic period unless specifically modified or revoked in writing.

**Please print:**

Child Name:	Date of Birth:	Classroom #:
Parent/Guardian Name:	Phone Number:	
Parent/Guardian Signature:	Date:	



COUNTY OF ERIE  
MARK C. POLONCARZ  
COUNTY EXECUTIVE

GALE R. BURSTEIN, MD, MPH  
COMMISSIONER OF HEALTH

**Guidance for P-12 Schools and Higher Education when a student or staff member has COVID-19 symptoms or a positive COVID-19 test**

**What to do when a student or staff member develops COVID-19 symptoms**

If the student/staff is at school when symptoms begin, the student/staff should immediately be sent home or to their school residence. The student/staff should be placed in isolation at home or at their school residence in their own room with their own bathroom.

One of the three following criteria must be met before the student/staff can return to school:

1. A note from the student/staff's medical care provider with an alternative diagnosis is provided OR
2. The result of a negative diagnostic COVID-19 test is provided OR
3. There have been at least ten days since the onset of COVID-19 symptoms.

ECDOH offers free diagnostic testing to symptomatic Erie County residents and close contacts of confirmed cases. Other local testing sites are listed at [www.erie.gov/covidtestsites](http://www.erie.gov/covidtestsites).

**What to do when a student tests positive for COVID-19**

The student/staff should be placed in isolation in their own room with their own bathroom. All the following criteria must be met before the student/staff can return to school:

*continued*

1. At least ten days after COVID-19 symptom onset or ten days from their first positive test if asymptomatic AND
2. Fever-free for at least 72 consecutive hours without the use of fever-reducing medication

AND

3. Respiratory symptoms are improving.

**What to do with classmates or staff members in contact with a confirmed COVID-19 case**

Protective measures, such as maintaining six feet of physical distance and masking while in the classroom, are practices aimed at reducing the risk of infection. However, having these practices in place does not mean that a classroom is exempt from quarantine in the event of a positive COVID-19 case. Duration of exposure impacts risk.

Even with protective practices, the following quarantine rules apply:

1. Household contacts and close contacts are placed in quarantine for 14 days. A close contact is defined by NYSDOH as an individual who has been within 6 feet of a positive COVID-19 case for 10 consecutive minutes or more during a time the case was infectious.
2. Contact tracers may make recommendations for quarantine based on other factors, including duration, proximity and presence of symptoms.
3. Persons under quarantine who develop symptoms should be tested for COVID-19. If the test result is positive, the student or staff member will be placed in isolation. If test result is negative, the student or staff member will continue in quarantine for the full 14 days.

Questions regarding this guidance can be direct to the Erie County Department of Health, Office of Epidemiology and Disease Surveillance, School Program at (716) 858-7697 during normal business hours.

Rev. 9/18/2020 to include department letterhead, no changes to text

Rev. 9/21/2020 to clarify that NYSDOH guidance for placing household contacts and close contacts under quarantine applies to cases in the school environment.

Rev. 12/11/2020 to remove 60-minute quarantine criteria.



COUNTY OF ERIE

MARK POLONCARZ

COUNTY EXECUTIVE

GALE R. BURSTEIN, MD, MPH, FAAP  
COMMISSIONER OF HEALTH

**GO TO [ERIE.GOV/COVID19](https://erie.gov/covid19) FOR THE COMMISSIONER'S ISOLATION ORDER**

**THE COMMISSIONER'S ISOLATION ORDER APPLIES TO YOU AND REQUIRES THAT YOU ISOLATE YOURSELF IF:**

- *YOU CURRENTLY HAVE COVID-19 SYMPTOMS AND ARE WAITING FOR YOUR COVID-19 TEST RESULT*
- OR**
- *YOU DEVELOP COVID-19 SYMPTOMS BEFORE YOU RECEIVE YOUR COVID-19 TEST RESULT*
- OR**
- *YOUR COVID-19 TEST RESULT INDICATES THAT YOU ARE POSITIVE FOR COVID-19. IF YOUR TEST RESULT IS POSITIVE, YOU MUST REMAIN ISOLATED UNTIL YOU MEET THE NEW YORK STATE DEPARTMENT OF HEALTH CRITERIA FOR RELEASE FROM ISOLATION.*

**YOU DO NOT NEED TO ISOLATE YOURSELF IF:**

- *YOU CURRENTLY DO NOT HAVE COVID-19 SYMPTOMS AND ARE WAITING FOR YOUR COVID-19 TEST RESULT*
- OR**
- *YOUR COVID-19 TEST RESULT INDICATES THAT YOU ARE NEGATIVE FOR COVID-19. IF YOUR TEST RESULT IS NEGATIVE, DISREGARD THE STANDING COMMISSIONER'S ORDER.*

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STATE OF NEW YORK  
ERIE COUNTY DEPARTMENT OF HEALTH

**In re: 2019-Novel Coronavirus (COVID-19)**  
**STANDING COMMISSIONER'S ORDER**  
**FOR ISOLATION OF LAB CONFIRMED COVID-19**

Pursuant to Section 2100 of the Public Health Law

WHEREAS, on January 30, 2020 the World Health Organization designated the COVID-19 outbreak as a Public Health Emergency of International Concern, advising that further cases may appear in any country; and

WHEREAS, on January 31, 2020, Health and Human Services Secretary Alex M. Azar II declared a public health emergency for the entire United States to aid the nation's healthcare community in responding to COVID-19; and

WHEREAS, as of March 7, 2020, Andrew Cuomo, the Governor of the State of New York, declared a State of Emergency by Executive Order 202 as a result of the spread of COVID-19 in the State of New York; and

WHEREAS, as of March 13, 2020, Donald Trump, the President of the United States of America, declared a National Emergency as a result of the spread of COVID-19 in the United States; and

WHEREAS, as of March 15, 2020, Mark C. Poloncarz, the Chief Executive of the County of Erie, declared a State of Emergency as a result of the spread of COVID-19 in the County of Erie; and

WHEREAS, Section 2100 of the Public Health Law mandates that all local health officers, being Commissioners of Health and Public Health Directors, as the case may be, of County Health Departments, guard against the introduction of such communicable diseases as are designated in the

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State Sanitary Code, by the exercise of proper and vigilant medical inspection and control of all persons and things infected with or exposed to such diseases; and

WHEREAS, the New York State Department of Health has issued "2019 Novel Coronavirus (COVID-19) Interim Containment Guidance: Precautionary Quarantine, Mandatory Quarantine and Mandatory Isolation Applicable to all Local Health Departments (LHD)" found at [https://coronavirus.health.ny.gov/system/files/documents/2020/03/quarantine\\_guidance\\_0.pdf](https://coronavirus.health.ny.gov/system/files/documents/2020/03/quarantine_guidance_0.pdf);

and

WHEREAS the NYSDOH Guidance requires that any person who has tested positive for COVID-19 be isolated; and

WHEREAS, as of October 1, 2020, the County of Erie has over 11,000 individuals who have had laboratory confirmed COVID-19 infections; and

WHEREAS, it is expected that the number of persons infected will continue to increase; and

WHEREAS, given the volume of positive test results and the critical need to protect the public health.

NOW, THEREFORE, by virtue of the authority vested in me by section 2100 of the Public Health Law of the State of New York, as Commissioner of the Erie County Department of Health, I do hereby:

**ORDER** that, any person experiencing symptoms consistent with COVID-19 at the time he/she is tested for COVID-19 utilizing a diagnostic test is required to remain isolated at an individual place of residence during the time between the specimen collection and the delivery of test results. Any person who receives a negative result may end isolation at that time.

**ORDER** that, any person who has tested positive for COVID-19 through a clinical laboratory diagnostic test is required to remain isolated at an individual's place of residence until such time as that individual meets their appropriate process for discontinuation of isolation. The discontinuation of isolation regardless of whether the individual is symptomatic or asymptomatic, is (1) the completion of at least 10 days of isolation from the

onset of symptoms (if symptomatic) or 10 days of isolation after the first positive test (if asymptomatic and have remained asymptomatic), and (2) 72 hours with no fever without the use of fever-reducing medications, and (3) the improvement of respiratory symptoms.

**FURTHER, I DO HEREBY ORDER** that, any person who collects a specimen from an individual for the purpose of testing for COVID-19 utilizing a diagnostic test must provide such individual with a copy of this Standing Order.

**FURTHER, I DO HEREBY ORDER** that, any person who collects a specimen from an individual for the purpose of testing for COVID-19 must verify such individual's current telephone number and address, and collect such individual's gender, race, ethnicity, occupation, employer, and employers contact information in order to help improve the accuracy within the New York State Electronic Clinical Laboratory Reporting System for those results which are reportable therein and assist with contact tracing.

**FURTHER, I DO HEREBY** order that, any doctor, hospital, or other medical provider or facility operating within the County of Erie shall provide a copy of this Standing Order to any person who has a positive diagnostic test for COVID-19 upon delivery of the results of the positive test, or shall inform said person of this Standing Order and direct the individual to the website for the Erie County Department of Health to obtain a copy. Documentation shall be maintained that this provision has been complied with, and shall be provided to the Erie County Department of Health upon request;

**FURTHER, I DO HEREBY ORDER** that, every doctor, hospital, or other medical provider or facility operating within the County of Erie shall conspicuously place a copy of this Standing Order in their place of business, where it may be viewed by any persons seeking treatment or testing;

**FURTHER, I DO HEREBY ORDER** that, every doctor, hospital, or other medical provider or facility operating within the County of Erie shall post this Standing Order to the home page of their web site;