COVID-19 School Reopening Plan
2020-2021 School Year

Jeanne M. Sullivan, M. Ed.
Executive Director
8/10/2020
A. Executive Summary
I. Description of BICO

Bi-County Collaborative (BICO) is an educational collaborative composed of nineteen member districts. BICO provides academic and therapeutic services to approximately 210 students from member and non-member districts. BICO has 36 classrooms located within host district schools and two public day school buildings. All of the students who attend Bi-County Collaborative have a disability, an individualized education program (IEP), and have been placed within the Collaborative by their educational team including their home district.

Bi-County Collaborative employs 157 teachers, paraprofessionals, nurses, and therapists. Our classroom ratios vary by program and are based on student need, but generally range from 1:1 to 1:2. During the remote learning period, all staff were engaged in providing academic experiences that aligned to the state standards and student IEPs through individual and small group virtual sessions. Our staff members also engaged families during this time to help them navigate this difficult period and provide supports and structures to keep students engaged.

II. Building Blocks to Reopening BICO

Initial Stages of Remote Learning

Beginning on March 16, 2020, BICO staff were providing remote learning experiences to students in their programs. During the initial remote learning period BICO staff were checking in with families, providing virtual lessons and engaging students. In the early stages of remote learning, students were provided with the required remote learning plans. Collaborative staff delivered technology and materials that students required for learning at home. This remote learning model continued to develop and emerge as we created schedules with families, realized that some students required 1:1 or very small groups, and worked with families to adapt our daily classroom practices to a virtual learning environment through the end of the school year.

Extended School Year / 12 Month Programs (Summer)

As the collaborative was not yet able to access all of the learning spaces used for the extended school year program, we developed a more rigorous schedule of remote learning for the extended school year and twelve month programs. Staff from each program collaborated to build a schedule that resembled what would take place in a typical school environment including small group instruction and individual learning time. The schedule also included therapies and enrichment activities in a virtual environment.

On July 1, 2020 Bi-County Collaborative clinicians began scheduling home services with families and returning to in person services from the remote services that had previously
been provided. Students who require and receive these services have them outlined on the service delivery grid of their IEP.

BICO Therapists (Speech, OT, PT, Teacher of Visually Impaired) began offering in person therapy services to our students participating in our 12 month intensive programs on July 20, 2020. Several of our families were eager to have their children participate in these services. There are some families who were not ready to have their children attend in person and continued to receive remote services. BICO Staff and students have a previously scheduled break from August 10th to August 14th and will resume with remote educational services and in person therapy services on August 17th.

Planning for the School Year

Over the past several months the BICO Leadership Team has been reviewing all of the data and guidance that has been provided from DESE regarding the return to school. The BICO Program Directors have been participating in our host district reopening committees in order to ensure that we are aware of the protocols and procedures that will be in place when we return.

Family Survey

BICO completed a survey of our families using Google Forms (Attachment A) from July 21-27. We had approximately 92 responses (note: 106 responses however 14 were duplicate responses). As demonstrated below we have approximately 77% of families who are ready for their students to return to school.

Given that CDC and DESE recommended protocols for safety are in place, how likely is it that you will send your child to school for in person instruction and services?

113 responses

![Pie chart showing 77% ready and 23% not ready]

Important to note that we have 23% of families who are not ready for a full return to school. Sample comments about why these families are not ready for their children to return to school include:
Safety, social distance challenges
- Restrainting of students doesn't allow for social distancing. The staff may apply restraint techniques, and put my child at risk. My family is at high risk for covid19, my child can get the virus, and spread it to other family members. My child understands social distancing, but is impulsive, and doesn't always adhere to it. My child doesn't like to wear a mask, and I can't see him wearing one for the bulk of the day.
- I feel that the new regulations that will need to be put into place will just cause more anxiety for my son who already has anxiety. He has told me he does not want to return to school having to wear a mask all day. I feel that everything is just still so unknown. No one even knows if the new regulations will even work or keep everyone safe.
- There does not yet appear to be a reasonable way to educate students in an enclosed setting at this point. I would recommend that BICO consider outdoor or open air classrooms. Perhaps utilizing a much larger and more open facility such as the ice rink next door. The rising likelihood that Covid is now airborne and spreading in enclosed spaces regardless of face to face contact makes it simply too risky to send _____ back to school. In addition to the risk to him and his teachers, the fact that he might carry the disease back to the family where we have several comorbidities makes it extremely unlikely that, given what we currently know, that we could reasonably send him back to an in person environment in September.
- Concerns are that cases of COVID-19 are just barely plateaued in MA. Concerns of starting and stopping new routines if cases begin to rise in our area or if there is exposure within the system she is attending as changes like that are very difficult for _______.
- We know that children with ID are more at risk for serious illness if this virus is contracted.... Nevermind _____’s various health conditions which put her at greater risk.
- _________ is a very social and physical child who needs hands on support in all areas. I am concerned she would not be receiving that support in a way that would be a benefit to her - rather most of the time spent enforcing social distancing guidelines. Also concerned as she will not allow any PPE in her presence. (She rips off my mask and smacks at me while I wear it.) I am concerned that overall it would be too distressing for her.
- I do not want to turn school into 'the hospital'. She does not understand.

Feasibility Study

The BICO Leadership Team has examined our classroom spaces, class sizes and staff to student ratios. With the information we have gathered, we have determined that we can design our learning spaces to accommodate the at least 3 feet required and possibly up to 6 feet of distance between student desks to bring our students back to school. We have also identified isolation spaces in each of our public day school locations and will collaborate with our host schools regarding these spaces in our public school locations.
Over the next several weeks we will continue to work with our host districts to ensure that we are following all building specific health and safety protocols for maneuvering through the building, use of outdoor spaces, etc... Our public day schools will continue to work to refine our spaces, travel patterns through the building and look for opportunities for outside learning spaces, etc...

As the windows in the Summit Public Day School located at Providence Highway, Walpole do not open, we have spoken with the HVAC Company to ensure that the ventilation system is operating appropriately, meets the Massachusetts requirements and that the filters are replaced on a regularly scheduled basis.

**Personal Protective Equipment (PPE) / Cleaning/Disinfecting Materials**

While staff and students are expected to wear their own masks to school each day, Bi-County Collaborative has purchased a supply of surgical masks. We have also purchased some clear vue masks that may be used with certain populations of students. In addition to having a supply of masks available, BICO will be providing a face shield and goggles and gloves to each staff member. We have a supply of disposable gowns for those that require them as well.

We have purchased a supply of hand sanitizer and EPA approved cleaning materials that will be available in all of our classroom locations. We have purchased and trained staff on the use of an electrostatic disinfectant sprayer that will be used in our Providence Highway location. As part of our reentry planning we will continue to collaborate with our host schools on cleaning and disinfecting protocols.

**Technology**

Bi-County Collaborative students were provided with Chromebooks during the spring remote learning period. The Chromebooks were collected at the end of the school year from those students who were not participating in the extended school year program. These devices will be redistributed to students at the beginning of the school year. The collaborative is working on a plan to purchase or lease additional devices so that we have some backup devices to replace ones that may be broken during the school year. As we move forward we will continue exploring options to help families who require access to wi-fi and who require support accessing remote learning or online learning platforms.

Teachers of Bi-County Collaborative have been provided with laptop computers for use in instruction of students. In the spring of 2020 during the school closure, paraprofessionals were provided with Chromebooks to allow them to support teachers in providing instruction. As stated above, we will be exploring options to acquire additional backup devices should the need for them occur.
Training Staff

The Bi-County Collaborative has developed training protocols (Attachment C) that will be required of all staff prior to the return to school. In addition to these self-paced training modules, the collaborative will be following the state requirement of 10 days of training prior to the start of the school year. Training that will be provided during the 10 days before the start of school on September 14 will include, hands on appropriate use of PPE, managing our medically fragile students, recertification of CPI trained staff, practice of hands on restraint procedures, meetings to review host district protocols for health and safety as well as maneuvering the building and additional support and training on use of technology and software programs to support students who may continue to receive remote instruction or be participating in a hybrid model. In addition to direct training with staff we will be arranging conferences with school staff and families to check in on students as well as staggered school visits to tour our classroom spaces (provided this is allowed by our host schools).

Staff Meeting

A Collaborative wide staff meeting was held on Thursday, July 30 in order to address questions from our staff. Over 100 staff members participated in the meeting. During the meeting Dianne Crouteau, Nurse Leader, provided an overview of the health and safety protocols that have been developed to ensure that we are returning to school as safely as possible. These protocols are attached as Attachment B and will be added to the Bi-County Collaborative webpage. Ben Giuffrida, Program Director, gave an overview of our restraint protocols and efforts we will undertake to support students in de-escalation (breaks, prior to reaching the level of requiring restraint. Jeanne Sullivan, Executive Director, gave a general overview of BICO’s plan to continue to work with our host districts and within our public day schools to safely bring our students back to school in person for the 2020-2021 school year. For those families who are not yet ready to have their students return to school in person, our staff will partner with them and their sending district to provide remote-hybrid instruction and services in order to support the student while we gradually gain the trust and confidence of the family to have the student return to school.

III. Reopening BiCO for the 2020-2021 School Year

As an educational collaborative, servicing high need students with disabilities, Bi-County Collaborative is prioritizing an in person return to school for the 2020-2021 School Year. Our 21 programs are located within 11 host school districts and 2 public day school locations. In developing our return to school plans, it has been and will continue to be important for us to collaborate closely with our host districts to ensure our programs follow the protocols and procedures for the host school and district. While we plan to
return to school in person, we have developed plans for each of our programs to return in an in person model, a hybrid model and a remote learning model. Each of these plans for each of our programs is attached below. As we move forward and hear from families about their decisions for their child's return to school, we will work with the student’s family and home districts to individualize our classroom plans to address the unique needs of the student. In addition, should there be a need to move from an in person model to a more restrictive hybrid or remote learning model, we will be prepared to quickly move to the necessary model.

In all of our models attendance will be taken for students. Students will receive both synchronous and asynchronous models of instruction. Assignments will be completed by students with grading by classroom teachers. Teachers will be available for extra support as needed. Students will receive all services that are outlined within the student’s IEP regardless of the model of instruction.

As we move forward with in person instruction, students will have assigned seats/spaces that are spaced at a minimum of 3 feet apart (edge of seat to edge of seat, facing the same direction) in their classrooms. Students (unless they are unable to do so due to a medical, sensory or behavioral diagnosis) and staff will be required to wear masks at all times, except during mask breaks and when eating. During these times students and staff will be at a distance of 6 feet apart.

In terms of staffing, our goal will be to maintain cohorts of students and staff within our programs. As our therapy staff and counselors travel between programs we will be closely monitoring schedules and travel patterns. Therapists and counselors will be required to sign in on arrival to programs and sign out upon leaving a program. They will also be required to wash their hands on arrival and departure.

**Collaboration Efforts**

BICO Program Directors will continue to collaborate with the administration from our host schools and member districts to ensure that BICO programs in those locations are following all protocols set forth by the District.

BICO Lead Nurse will continue to collaborate with local boards of health, district level nurses and collaborative nurses statewide to ensure that all of our protocols are up to date and all staff are trained in any updated protocols.

BICO Executive Director and Director of Student Services will continue to collaborate with the BICO Board of Directors, BICO Operating Committee, sending school districts and families regarding student needs and access to the school setting.
B. Executive Director Letter to the Community
August 10, 2020

Dear BICO Community:

I hope you are all well and have been able to take some time this summer to enjoy the beautiful weather and time as a family. I am writing to provide you an update on our collaborative reopening of school plan.

As you know we have received guidance from The Department of Elementary and Secondary Education (DESE) directing that students identified as high need students with disabilities should return to school full time for the fall. Further, the guidance requires several criteria, protocols, and practices that must be in place to promote the highest level of safety possible. In addition to all of this guidance is a mandate from the Commissioner to roll back the number of student days to 170 from 180 to allow 10 days of additional training for teachers and school staff. This training is essential and must take place prior to the start of school. All BICO Staff will be expected onsite for these training days. More information with a specific schedule will be sent to staff prior to our August 31, Welcome Back Day.

As a result of all of the information gathered through our family survey, questions and input from our staff, Program Directors working with our host districts on their reopening plans, input from our member district special education leaders and our Board of Directors, we have determined that all Bi-County Collaborative programs will open in person on September 16, 2020. You will find the details of our reopening plan on our website at https://www.bicounty.org/. The posted plan contains all of our COVID-19 training information, our health and safety protocols as well as insight into our hybrid and remote learning plans if COVID-19 forces us to take steps back to another model.

While the Collaborative is following the guidance from the Department of Elementary and Secondary Education to reopen our programs in person, we understand that not all families are ready to have their children return to in person learning. Our staff will continue to work with you to provide instruction through a combination of direct instruction and self guided assignments provided through synchronous and asynchronous learning experiences. Student educational team will schedule time to talk individually with families about a plan for instruction.

I will be scheduling a virtual community meeting for the week of August 19, 2020 at 3:30 (meeting link to be sent by email) to share any updates we have, answer your questions and listen to your concerns, about the reopening of school. Program staff will be in touch with families after that meeting to discuss specific plans related to students.

Thank you for your patience as we have worked through this reopening planning. I truly appreciate the comments, feedback and suggestions you have provided. I hope you see you on August 19 and look forward to welcoming your child back to school on September 16, 2020.

Sincerely,
Jeanne M. Sullivan

Jeanne M. Sullivan, M. Ed.

The Bi-County Collaborative does not discriminate in admission to, access to, treatment in, or employment in its services, programs, and activities, on the basis of race, color, sex, gender identity, religion, national origin, sexual orientation, homelessness, disability, pregnancy or pregnancy-related conditions, age, veteran or military status, ancestry, or genetic information.
C. Program Specific In Person Learning Plans
Host District School Programs
In Person Learning Template

Program Name: TEAP  
Program Grade Level: K-3

Program Location:
Delaney Elementary School
120 Taunton St
Wrentham, MA  02093

Number of Students Served: 9  
Number of Full time Staff:
Admin: 1  
Teachers: 2  
Paraprofessionals: 4  
Number of Itinerant Staff: 4

Description of Program:
Therapeutic Elementary Alternative Programs (TEAP) educational and therapeutic services for students in grades K-3 whose social, emotional and/or academic delays and challenges inhibit their success in the general educational setting. Students may present with difficulties in the areas of language development, cognition, sensory integration, and social/behavioral skills related to Communication Impairment, Autism Spectrum Disorder, Attention Deficit Hyperactivity Disorder and/or Neurological Impairments.

A small staff to student ratio allows for personalized and individualized teaching. The program emphasizes the use of assistive and instructional technology and multi-sensory instruction to foster active engagement in academic, social, and emotional learning.

Students are supported through a variety of incentives and positive support plans, both individual and classroom based. Once students have demonstrated the ability to regulate behaviors within the smaller classroom setting, they may have the opportunity to mainstream into a general education classroom within the public school setting.

Proposed Daily Schedule:
Morning arrival hand washing and bathrooming routines  
Morning work skills review and assessment  
Sensory Break  
Reading  
Mindfulness  
hand washing and bathrooming routines  
Snack  
Math  
Individual Breaks  
ELA  
Sensory Break
hand washing and bathrooming routines
Lunch
Social Skills
Science or Social Studies (rotating days)
Sensory Break
Specials Art Health (rotating days)
hand washing and bathrooming routines

**Student Assessment/Screening timeline**
Fountas and Pinnell Benchmark Assessment Completed by the end of October
Before October 21st
Math Prerequisite Skills Assessment
Performance Assessment grades 3-5 (Think Central)
Performance tasks for K-2 in text book

**Sample Classroom Design: (pictures or drawing)**
"**Must maintain at least a 3 foot distance, students facing same direction.**

Classrooms will be capped at 8 students and no more than 3 staff per room. Students while seated at their desks will be between four and six feet apart. Teacher desks will be at the front of the room and at least 4 feet from the first row of student desks.

**Lunch and Snack Protocols:**
Students will eat snacks, breakfast and lunch in the classroom or outside, when appropriate. One staff will get lunches from the cafeteria and bring them to the classroom. Students will eat in classrooms 6 feet apart; they will wash their hands before eating. Tables and desks will be sanitized before and after. Staff will wear PPE for assisting with meals. Sharing of food between students is highly discouraged and they will not have the opportunity to heat up their food or have access to a refrigerator.
Restraint Protocols:
Bi-County Collaborative trains and prepares program staff to work with students with diverse needs. Through clinical consultation offered by clinical psychologists and psychiatrists, and the work of Board Certified Behavior Analysts (BCBAs), school adjustment counselors, therapists and special education teachers, our programs utilize positive behavior support plans, therapeutic interventions, and instructional strategies to respond to crisis situations.

Due to the nature of the disabilities of our students, they can become agitated, dis-regulated and sometimes out of control. Students may make threats, attempt to hurt themselves or others. The safety of all BICO students and staff is our utmost priority and all incidents are taken seriously. Staff follow Crisis Prevention Intervention procedures to support students in these situations.

When a student is acting in such a way as to present imminent danger to themselves or to others, BICO Program Staff implement Non-Violent Crisis Prevention Intervention strategies. BICO has staff who are certified trainers who provide training in Non-Violent Crisis Prevention Intervention (CPI) on an ongoing basis. For a complete description of BICO’s Crisis Prevention Intervention Policy and Procedures please see the Employee and Student Manual for Health and Safety posted on our website at www.bicounty.org.

Due to an overabundance of caution, as a result of Covid-19, we will continue to emphasize verbal de-escalation techniques to help our students when they become dysregulated. However, when such a time arises for physical interventions, staff will take all possible precautions to promote the safety and wellbeing of students and staff alike.

If a student is acting in an unsafe manner, and verbal interventions prove unsuccessful, staff will intervene. When intervening, staff will be wearing appropriate PPE to ensure the safety of all parties involved. The PPE will include: gloves, masks, face shields, and other appropriate PPE. If staff are unable to deescalate a student within a reasonable amount of time, an administrator will contact the parent/guardian and ask them to pick their child up from school.

Protocols and Use of PPE in Restraint:
- Gloves are to be made available for staff to carry.
- A staff member in each classroom should be designated daily as the initial point person—quick access to PPE
- Prior to any restraint, staff should ensure they are wearing gloves, masks, and face shields.
- Masks and face shields to be worn if there is a risk of bodily fluids e.g., from spitting and/or self-injurious behavior.
- Following physical contact with others during a restraint, remove and dispose of gloves immediately. Avoid touching your face and limit contact with hard surfaces before immediately washing hands and arms, if bare.
- Keep hands clear of the eyes, mouth, and nose of yourself and others during incidents of physical restraint.
- Consider changing clothes especially if you have come into physical contact through physical restraint. On arriving home, shower and change clothing prior to greeting other members of your household.
- Plastic aprons are not advised, they are easily ripped and may become a hazard, and also during a physical restraint they will offer little protection to body parts in contact with others.

Toileting / Changing Protocols:
Staff will use proper donning and doffing procedures for PPE
Hand Washing procedures will be followed by staff and student
Cleaning and Disinfecting Schedule (Include who is responsible):
All staff will clean and disinfect student work areas at the start and end of the day.
Teacher will be responsible for overseeing cleaning and disinfecting of the door handles, faucets and other frequently touched areas regularly throughout the day.
Each staff member will will clean and disinfect student work stations at the end of each session
Each Staff member will clean and disinfect sensory/ break areas after each use.
Staff will clean and disinfect the sink and toilet area after each use.
Check list will be posted with step by step instructions.

Sign In/Out Procedure:
Staff will sign in, in each classroom daily and sign out at the end of the day in the classroom.

Student Entry / Exit Procedure (Include - Use of sanitizer, handwashing, masks....)
Staff members (donning face masks) will embark/disembark students to/ from transportation individually and walk them to/from the classroom, maintaining six feet between other students at the drop off area, door, hallway and classroom adjusting the flow of students to allow for social distancing for both arrival and dismissal. Students that are able will don face masks except during mask breaks. Students will bring personal items (lunch box, backpack) to their personal work area. Students will not gather in a common area.
Upon dismissal, a staff member stationed at the pick up area will communicate which student will be dismissed from class; only one student at a time will be allowed out in six feet intervals.

Student / Staff Screening & Monitoring Process
All BICO staff, students, parents/guardians, and any individuals seeking entry into the program spaces must be directed to self-screen at home, prior to coming to the program each day.

(a) Self-screening shall include checking temperature (temperature of 100.0°F or above is considered a fever), and checking for symptoms including fever, cough, shortness of breath, gastrointestinal symptoms, abdominal pain, unexplained rash, new loss of taste/smell, muscle aches, or any other symptoms that feel like a cold/flu. Anyone with a fever of 100.0°F or above or any other signs of illness will not be permitted to enter the program.
(b) Parents and staff must sign written attestations daily regarding any household contacts with COVID-19, symptoms (e.g., fever, sore throat, cough, shortness of breath, loss of smell or taste, or diarrhea), or if they have given students medicine to lower a fever.
(c) Individuals who decline to complete the screening questionnaire will not be permitted to enter the program space.

Regular Monitoring: Staff must actively monitor students throughout the day for symptoms of any kind, including fever, cough, shortness of breath, diarrhea, nausea, and vomiting, abdominal pain, and unexplained rash. Students who appear ill or are exhibiting signs of illness must be referred to the nurse and be separated from the larger group and isolated until able to leave the facility. Program nurses have non-contact thermometers on site to check temperatures if a student is suspected of having a fever (temperature above 100°F).
**If any student or staff appears to have severe symptoms, the program nurse must call emergency services immediately. Before transferring to a medical facility, the nurse must notify the transfer team and medical facility if the individual is suspected to have COVID-19. Severe symptoms include the following: extreme difficulty breathing (i.e. not being able to speak without gasping for air), bluish lips or face, persistent pain or pressure in the chest, severe persistent dizziness or lightheadedness, new confusion or inability to rouse someone, or new seizure or seizures that won't stop.

Nursing Protocols for students who are ill (not experiencing symptoms):
If a student becomes ill with symptoms unrelated to COVID19, the nurse will assess per illness protocol. The student will then remain in the health office until:
1. The student is well enough to return to class.
2. The student will be dismissed to parent/guardian.

Nursing Protocols for students experiencing symptoms:
If a student becomes symptomatic, programs must follow the protocols below:
(1) Immediately isolate from other students and minimize exposure to staff.
(2) Whenever possible, cover the student’s nose and mouth with a mask or cloth face covering and accompany the student to the designated isolation room.
(3) A staff member must alert the program nurse. The nurse will then properly assess the student in the isolation room to determine if the student should remain in the isolation room with a staff member until a parent or guardian arrives for pickup.
(3) Contact the student’s parents and send home as soon as possible.
(4) Follow the program’s plan for the transportation of a student who has developed symptoms and who relies on program transportation.
(5) If the nurse determines the student is experiencing severe symptoms and is in need of emergency care, the nurse will immediately call 911 and remain with the student until EMS arrives.
(6) Custodial staff should wait 24 hours before cleaning and disinfecting to minimize potential for other employees being exposed to respiratory droplets. If waiting 24 hours is not feasible, wait as long as possible. During this waiting period, open outside doors and windows to increase air circulation in these areas. Custodial staff should follow the CDC cleaning and disinfection recommendations for cleaning the exposed locations.

Protocol if staff or student is diagnosed:
Sick students or employees who are COVID-19 positive or symptomatic and presumed to have COVID-19 must not return until they have met the criteria for discontinuing home isolation and have consulted with a health care provider. Program leaders will determine the date of symptom onset for the student/staff. Program leaders will identify if the student/staff attended/worked at the program while symptomatic or during the two days before symptoms began and also determine who had close contact with the student/staff at the program during those days (staff and other children).

(1) If the individual tests positive for COVID-19 but is asymptomatic, isolation may be discontinued when at least 14 days have passed from the date of the positive test, as long as the individual remains asymptomatic. For example, if the individual was tested on April 1, isolation may be discontinued on or after April 15.

Notifying Required Parties: In the event that a program experiences an exposure, BICO programs must notify the following parties.
(1) Staff members and families about exposure while maintaining strict confidentiality.
(2) Local board of health if a student or staff is COVID-19 positive (the BICO COVID19 point person will notify the local BOH while adhering to the Public Health Recommendations for Community-Related Exposure).

Proposed Transition Process (ex. Open house with staggered scheduled times for students, Virtual tours, pre-return meeting with student / teacher - (social story about mask wearing / handwashing, etc...) 1:1 Teacher / Parent Conference to check in on student status, discuss return to school, explain what the day will look like):
Parent letter sent with details of the date and time students will return
All protocols will be clearly communicated and parents will need to sign off that they have read and agree to them.
Teachers will offer phone calls, remote sessions and emails to answer any student specific questions.
Support material including social stories, videos and lessons will be available to address safety and sanitation precautions
(ex. Open house with staggered scheduled times for students, Virtual tours, pre-return meeting
Notification Process: In the event that one of our school locations/programs needs to move from one model to another we will notify:

**Families:** Program Director - Phone Call to families, email to listserv
Executive Director - Email / Letter

**Sending District Representatives:** Director of Student Services - Phone contact with follow up letter

**Staff:** Program Director - Email entire program, text to teachers and teachers to paras

**Technology Needs:**
1. Training staff on Planbook.com online platform
2. Continued training on google classroom

**Moving / Relocation Needs:**
Organize a staff moving/setup day to get classrooms ready for the return of students

**COVID-19 Response Team:**
- **Program Director:** Kristin Boni, Director of Student Services: Julie O'Connor, Lead Nurse: Dianne Croteau, Executive Director: Jeanne Sullivan
In Person Learning Template

Program Name: TEAP
Program Location: Millville
Millville Elementary School
122 Berthelette Way
Millville, MA 01529

Program Grade Level: K - 5
Number of Students Served: 8
Number of Full time Staff: 7
Number of Itinerant Staff: 4

Program Location: Plainville
Jackson Elementary
68 Messenger Street
Plainville, MA 02762

Number of Students Served: 3
Number of Full time Staff: 3
Number of Itinerant Staff: 4

Program Location: Plainville
Wood School
72 Messenger Street
Plainville, MA 02762

Number of Students Served: 5
Number of Full time Staff: 4
Number of Itinerant Staff: 4

Program Name: SLBP
Program Location: North Attleboro
Joseph W Martin School
37 Landry Ave.
North Attleboro, MA 02760

Number of Students Served: 10
Number of Full time Staff: 4
Number of Itinerant Staff: 3

Number of Students Served: 5
Number of Full time Staff: 3
Number of Itinerant Staff: 4

Number of Students Served: 7
Number of Full time Staff: 4
Number of Itinerant Staff: 4
Description of Program:

Therapeutic Elementary Alternative Programs (TEAP)/Specialized Language Based Program (SLBP) educational and therapeutic services for students in grades K-5 whose social, emotional and/or academic delays and challenges inhibit their success in the general educational setting. Students may present with difficulties in the areas of language development, cognition, sensory integration, and social/behavioral skills related to Communication Impairment, Autism Spectrum Disorder, Attention Deficit Hyperactivity Disorder and/or Neurological Impairments. The SLBP program incorporates learning that meets the specific needs of Language Based Learners, incorporating opportunities to practice learned skills repetitively while consistently teaching grade level standards.

A small staff to student ratio allows for personalized and individualized teaching. The program emphasizes the use of assistive and instructional technology and multi-sensory instruction to foster active engagement in academic, social, and emotional learning.

Students are supported through a variety of incentives and positive support plans, both individual and classroom based. Once students have demonstrated the ability to regulate behaviors within the smaller classroom setting, they may have the opportunity to mainstream into a general education classroom within the public school setting.

Proposed Daily Schedule:

<table>
<thead>
<tr>
<th>Time</th>
<th>Morning Work</th>
<th>Morning Work</th>
<th>Morning Work</th>
<th>Morning Work</th>
<th>Morning Work</th>
</tr>
</thead>
<tbody>
<tr>
<td>8:30-9:00</td>
<td>Morning Work</td>
<td>Morning Work</td>
<td>Morning Work</td>
<td>Morning Work</td>
<td>Morning Work</td>
</tr>
<tr>
<td>9:00-9:30</td>
<td>Morning Meeting skills review</td>
<td>Morning Meeting skills review</td>
<td>Morning Meeting skills review</td>
<td>Morning Meeting skills review</td>
<td>Morning Meeting skills review</td>
</tr>
<tr>
<td>9:30 - 10:30</td>
<td>Reading Block</td>
<td>Reading Block</td>
<td>Reading Block</td>
<td>Reading Block</td>
<td>Reading Block</td>
</tr>
<tr>
<td>10:30 - 11:30</td>
<td>Math</td>
<td>Math</td>
<td>Math</td>
<td>Math</td>
<td>Math</td>
</tr>
<tr>
<td>11:30-12:30</td>
<td>Lunch/ Mask Breaks/individual activities</td>
<td>Lunch/ Mask Breaks/individual activities</td>
<td>Lunch/ Mask Breaks/individual activities</td>
<td>Lunch/ Mask Breaks/individual activities</td>
<td>Lunch/ Mask Breaks/individual activities</td>
</tr>
<tr>
<td>12:30 - 1:00</td>
<td>Social Skills</td>
<td>Social Skills</td>
<td>Social Skills</td>
<td>Social Skills</td>
<td>Social Skills</td>
</tr>
<tr>
<td>1:00 - 1:30</td>
<td>ELA</td>
<td>ELA</td>
<td>ELA</td>
<td>ELA</td>
<td>ELA</td>
</tr>
<tr>
<td>1:30-2:00</td>
<td>Mask break / individual activity</td>
<td>Mask break / individual activity</td>
<td>Mask break / individual activity</td>
<td>Mask break / individual activity</td>
<td>Mask break / individual activity</td>
</tr>
<tr>
<td>2:00:2:30</td>
<td>Science</td>
<td>Social Studies</td>
<td>Science</td>
<td>Social Studies</td>
<td>Lab</td>
</tr>
<tr>
<td>2:30 - 2:55</td>
<td>Mindfulness</td>
<td>Mindfulness</td>
<td>Mindfulness</td>
<td>Mindfulness</td>
<td>Mindfulness</td>
</tr>
</tbody>
</table>

*Individual therapies are scheduled throughout each student’s day dependent on IEP service delivery. Mask Breaks will be offered at least hourly to students and staff while maintaining at least 6 feet of distance. Outdoor breaks will be offered, weather permitting.
Student Assessment/Screening timeline
Fountas and Pinnell Benchmark Assessment Completed by the end of October
Before October 21st
Math Prerequisite Skills Assessment
Performance Assessment grades 3-5 (Think Central)

Sample Classroom Design: (pictures or drawing)

Teacher’s Desk

Bookshelves

Blackboard

Bookshelves

Square Desk

Rectangle Desk

Rectangle Desk

Rectangle Desk

Rectangle Desk

Rectangle Desk

Maximum class size will be determined by square footage in order to maintain 6 feet between student desks. Teacher desks will be at the front of the room and at least 4 feet from the first row of student desks.

Lunch and Snack Protocols:
BICO Programs must follow the food safety guidelines below.

1. Whenever possible, student’s snacks must be pre-packaged or ready to serve in individual portions to minimize handling and preparation.
2. To minimize potential spread of infection and to promote physical distancing, cafeterias and group dining rooms must be avoided.
3. Multiple students shall not use the same serving or eating utensils.
4. Sinks used for food preparation must not be used for any other purposes.
5. Staff must ensure students wash hands prior to and immediately after eating.
6. Staff must wash their hands before preparing food and after helping students to eat.
7. Tables, chairs, and trays used for meals need to be cleaned and sanitized before and after use.
8. All food contact surfaces, equipment, and utensils used for the preparation, packaging, or handling of food products must be washed, rinsed, and sanitized before each use. Additionally, programs must frequently clean non-food contact surfaces, such as doorknobs, tabletops, and chairs. Use sanitizers approved by the EPA for use against COVID-19 and for food-contact surfaces.
(9) When disinfecting for coronavirus, EPA recommends following the product label use directions for enveloped viruses, as indicated by the approved emerging viral pathogen claim on the master label.

(10) Staff must be prepared to provide hands-on assistance to students with special needs for activities of daily living such as feeding. To protect themselves, staff who care for students requiring hands-on assistance for routine care activities, including feeding, and other direct contact activities must wear a long-sleeved, button down, oversized shirt over their clothing and wear long hair up or tied back during all activities requiring direct contact with a student. Staff must change outer clothing if body fluids from the student are present. Staff must change the student’s clothing if body fluids are present. Soiled clothing must be placed in a plastic bag until it can be sent home with the child to be washed.

Restraint Protocols:
Bi-County Collaborative trains and prepares program staff to work with students with diverse needs. Through clinical consultation offered by clinical psychologists and psychiatrists, and the work of Board Certified Behavior Analysts (BCBAs), school adjustment counselors, therapists and special education teachers, our programs utilize positive behavior support plans, therapeutic interventions, and instructional strategies to respond to crisis situations.

Due to the nature of the disabilities of our students, they can become agitated, dis-regulated and sometimes out of control. Students may make threats, attempt to hurt themselves or others. The safety of all BICO students and staff is our utmost priority and all incidents are taken seriously. Staff follow Crisis Prevention Intervention procedures to support students in these situations.

When a student is acting in such a way as to present imminent danger to themselves or to others, BICO Program Staff implement Non-Violent Crisis Prevention Intervention strategies. BICO has staff who are certified trainers who provide training in Non-Violent Crisis Prevention Intervention (CPI) on an ongoing basis. For a complete description of BICO’s Crisis Prevention Intervention Policy and Procedures please see the Employee and Student Manual for Health and Safety posted on our website at www.bicounty.org.

Due to an overabundance of caution, as a result of Covid-19, we will continue to emphasize verbal de-escalation techniques to help our students when they become dysregulated. However, when such a time arises for physical interventions, staff will take all possible precautions to promote the safety and well-being of students and staff alike.

If a student is acting in an unsafe manner, and verbal interventions prove unsuccessful, staff will intervene. When intervening, staff will be wearing appropriate PPE to ensure the safety of all parties involved. The PPE will include: gloves, masks, face shields, and other appropriate PPE. If staff are unable to de-escalate a student within a reasonable amount of time, an administrator will contact the parent/guardian and ask them to pick their child up from school.

Protocols and Use of PPE in Restraint:
- Gloves are to be made available for staff to carry.
- A staff member in each classroom should be designated daily as the initial point person—quick access to PPE.
- Prior to any restraint, staff should ensure they are wearing gloves, masks, and face shields.
- Masks and face shields to be worn if there is a risk of bodily fluids e.g., from spitting and/or self-injurious behavior.
- Following physical contact with others during a restraint, remove and dispose of gloves immediately. Avoid touching your face and limit contact with hard surfaces before immediately washing hands and arms, if bare.
- Keep hands clear of the eyes, mouth, and nose of yourself and others during incidents of physical restraint.
- Consider changing clothes especially if you have come into physical contact through physical restraint. On arriving home, shower and change clothing prior to greeting other members of your household.
- Plastic aprons are not advised, they are easily ripped and may become a hazard, and also during a physical restraint they will offer little protection to body parts in contact with others.
- Used PPE disposable PPE will be discarded in a trash barrel with a lid, located in a designated for doffing the used equipment.

**Toileting / Changing Protocols:**

Students will follow the protocols set forth by the public school while accessing the school bathroom. Hand Washing procedures will be followed by all staff and students.

**Handwashing:**

Scrub your palms, between your fingers, the backs of your hands and under your fingernails for at least 20 seconds. Dry your hands with a paper towel. Use the same paper towel to turn off the water and, if using the restroom, open the door.

**Toilet/ Restrooms:**

Sanitized and wiped down after utilizing the restroom following use.
One (1) person in the restroom at a time.
The host school's custodial staff will be cleaning and sanitizing the restrooms per their health and safety protocols.

**Cleaning and Disinfecting Schedule (Include who is responsible):**

All staff will clean and disinfect student work areas at the start and end of the day
Teacher will be responsible for overseeing cleaning and disinfecting of the door handles, faucets and other frequently touched areas regularly throughout the day.
Each staff member will clean and disinfect student work stations at the end of each session
Each Staff member will clean and disinfect sensory/break areas after each use.
Staff will clean and disinfect the sink and toilet area after each use.
Check list will be posted with step by step instructions

**Sign In/Out Procedure:**

**Staff/ Visitors:**

- Signs are posted on the front door and main office.
- Staff and visitors will sign in and out in the main office before and after entering the program.

**Students**

- Student attendance will be completed by classroom staff.
- When a parent needs to pick up their child early from school, we are requesting a phone call prior to arriving so that we are prepared to dismiss in an efficient and safe manner

**Student Entry / Exit Procedure (Include - Use of sanitizer, handwashing, masks....)**

Staff members (donning face masks) will embark/dismount students to/from transportation individually and walk them to/from the classroom, maintaining six feet between other students at the drop off area, door, hallway, and classroom adjusting the flow of students to allow for social distancing for both arrival and dismissal. Students that are able will don face masks except during mask breaks. Students will bring personal items (lunch box, backpack) to their personal work area.
Students will not gather in a common area.
Upon dismissal, a staff member stationed at the pick up area will communicate which student will be dismissed from class; only one student at a time will be allowed out in six feet intervals.
Student / Staff Screening & Monitoring Process
All BICO staff, students, parents/guardians, and any individuals seeking entry into the program spaces must be directed to self-screen at home, prior to coming to the program each day.
(a) Self-screening shall include checking temperature (temperature of 100.0°F or above is considered a fever), and checking for symptoms including fever, cough, shortness of breath, gastrointestinal symptoms, abdominal pain, unexplained rash, new loss of taste/smell, muscle aches, or any other symptoms that feel like a cold/flu. Anyone with a fever of 100.0°F or above or any other signs of illness will not be permitted to enter the program.
(b) Parents and staff must sign written attestations daily regarding any household contacts with COVID-19, symptoms (e.g., fever, sore throat, cough, shortness of breath, loss of smell or taste, or diarrhea), or if they have given students medicine to lower a fever.
(c) Individuals who decline to complete the screening questionnaire will not be permitted to enter the program space.

Regular Monitoring: Staff must actively monitor students throughout the day for symptoms of any kind, including fever, cough, shortness of breath, diarrhea, nausea, and vomiting, abdominal pain, and unexplained rash. Students who appear ill or are exhibiting signs of illness must be referred to the nurse and be separated from the larger group and isolated until able to leave the facility. Program nurses have non-contact thermometers on site to check temperatures if a student is suspected of having a fever (temperature above 100°F).

**If any student or staff appears to have severe symptoms, the program nurse must call emergency services immediately. Before transferring to a medical facility, the nurse must notify the transfer team and medical facility if the individual is suspected to have COVID-19. Severe symptoms include the following: extreme difficulty breathing (i.e., not being able to speak without gasping for air), bluish lips or face, persistent pain or pressure in the chest, severe persistent dizziness or lightheadedness, new confusion or inability to rouse someone, or new seizure or seizures that won't stop.**

Nursing Protocols for students who are ill (not experiencing symptoms):
If a student becomes ill with symptoms unrelated to COVID19, the nurse will assess per illness protocol. The student will then remain in the health office until:
1. The student is well enough to return to class.
2. The student will be dismissed to parent/guardian.

Nursing Protocols for students experiencing symptoms:
If a student becomes symptomatic, programs must follow the protocols below:
(1) Immediately isolate from other students and minimize exposure to staff.
(2) Whenever possible, cover the student's nose and mouth with a mask or cloth face covering and accompany the student to the designated isolation room.
(3) A staff member must alert the program nurse. The nurse will then properly assess the student in the isolation room to determine if the student should remain in the isolation room with a staff member until a parent or guardian arrives for pickup.
(3) Contact the student’s parents and send home as soon as possible.
(4) Follow the program’s plan for the transportation of a student who has developed symptoms and who relies on program transportation.
(5) If the nurse determines the student is experiencing severe symptoms and is in need of emergency care, the nurse will immediately call 911 and remain with the student until EMS arrives.
(6) Custodial staff should wait 24 hours before cleaning and disinfecting to minimize potential for other employees being exposed to respiratory droplets. If waiting 24 hours is not feasible, wait as long as possible. During this waiting period, open outside doors and windows to increase air circulation in these areas. Custodial staff should follow the CDC cleaning and disinfection recommendations for cleaning the exposed locations.
Protocol if staff or student is diagnosed:
Sick students or employees who are COVID-19 positive or symptomatic and presumed to have COVID-19 must not return until they have met the criteria for discontinuing home isolation and have consulted with a health care provider. Program leaders will determine the date of symptom onset for the student/staff. Program leaders will identify if the student/staff attended/worked at the program while symptomatic or during the two days before symptoms began and also determine who had close contact with the student/staff at the program during those days (staff and other children).
(1) If the individual tests positive for COVID-19 but is asymptomatic, isolation may be discontinued when at least 14 days have passed from the date of the positive test, as long as the individual remains asymptomatic. For example, if the individual was tested on April 1, isolation may be discontinued on or after April 15.

Notifying Required Parties: In the event that a program experiences an exposure, BICO programs must notify the following parties.
(1) Staff members and families about exposure while maintaining strict confidentiality.
(2) Local board of health if a student or staff is COVID-19 positive (the BICO COVID19 point person will notify the local BOH while adhering to the Public Health Recommendations for Community-Related Exposure).

Proposed Transition Process:
Parent letter sent with details of the date and time students will return
All protocols will be clearly communicated and parents will need to sign off that they have read and agree to them.
Teachers will offer phone calls, remote sessions and emails to answer any student specific questions.
Support material including social stories, videos and lessons will be available to address safety and sanitation precautions
(ex. Open house with staggered scheduled times for students, Virtual tours, pre-return meeting)

Notification Process: In the event that one of our school locations/programs needs to move from one model to another we will notify:

- **Families**: Program Director - Phone Call to families, email to listserv
  Executive Director - Email / Letter
- **Sending District Representatives**: Director of Student Services - Phone contact with follow up letter
- **Staff**: Program Director - Email entire program, text to teachers and teachers to paras

Technology Needs:
Chromebooks and instructional materials were delivered to students upon the initial closure in March to families that needed them to access the curriculum and virtual classes and therapy sessions. Students will continue to keep these at home in the circumstance that we need to revert back to remote learning.

COVID-19 Response Team: Program Director: Kristin Boni; Pamela Ludwig, Director of Student Services: Julie O’Connor, Lead Nurse: Dianne Croteau, Executive Director: Jeanne Sullivan
Program Grade Level: 5-8
Program Name: TEP 1

Program Location:
Ahern Middle School
111 Mechanic St.
Foxboro, MA  02035

Number of Students Served: 5
Number of Full time Staff: 3
Number of Itinerant Staff: 3 (alternating)

Description of Program:
The Therapeutic Education Program (TEP) serves middle school aged students who present with neurological, social, communication and learning challenges.

The program provides a highly structured environment designed to assist students in learning academic content, perspective-taking skills, problem-solving skills, self-control, coping strategies, and acceptable social behaviors. Goals for students include the development of organizational skills, self-advocacy skills, confidence, and relationship building with peers and adults as well as preparation for success at the high school level. Throughout the program, emphasis is placed on students developing self-respect and becoming responsible learners who contribute to their class and school community in positive ways.

Although the program provides specialized instructional approaches for academics, socialization, and behavior, the curriculum remains rigorous for each student. The program is aligned with the MA Common Core Standards. Modifications and accommodations are designed to match each individual student’s learning style and profile to ensure success accessing the curriculum. Depending on the level of skills development, students participate in the MCAS Assessment with or without accommodations, or the MCAS Alternate Assessment.

The teaching team at TEP strives to develop close working relationships with their students and encourages team-building activities. Since parents or guardians are considered partners in the educational process, trusting and supportive relationships are fostered between the student, school staff and parent/guardian.

RELATED SERVICES: Speech and language, physical and occupational therapy and counseling are available as needed.
Proposed Daily Schedule:
8:15-2:40
Homeroom
Student News
Math
Break/snack
English
Science
Lunch
History
Reading
Social Skills
Classroom Jobs
Dismissal

*Specials- Art and physical education will be offered weekly to all students
*Individual Therapies are scheduled throughout each student's day dependent on IEP service delivery
*Mask breaks will be provided at least hourly to students and staff, while maintaining a distance of 6ft during these times.
*Outdoor breaks will be offered daily to our staff and students, weather permitting.

Student Assessment/Screening timeline
Staff and therapists will assess any regression on IEP goals since the students began in remote learning. They will collect and analyze data in order to determine current performance level on all goals and develop a plan to increase functioning above baseline.

Sample Classroom Design: (pictures or drawing)
Lunch and Snack Protocols:
For students who are ordering lunches, staff will obtain the lunches from the cafeteria and bring them to the classroom. Students will eat in classrooms 6 feet apart. Sharing of food between students is highly discouraged and they will not have the opportunity to heat up their food or have access to a refrigerator. They will wash their hands before and after eating. Tables and desks will be sanitized before and after. BICO Programs must follow the food safety guidelines below.

(1) Whenever possible, student’s snacks must be pre-packaged or ready to serve in individual portions to minimize handling and preparation.
(2) To minimize potential spread of infection and to promote physical distancing, cafeterias and group dining rooms must be avoided.
(3) Multiple students shall not use the same serving or eating utensils.
(4) Sinks used for food preparation must not be used for any other purposes.
(5) Staff must ensure students wash hands prior to and immediately after eating.
(6) Staff must wash their hands before preparing food and after helping students to eat. (7) Tables, chairs, and trays used for meals need to be cleaned and sanitized before and after use.
(8) All food contact surfaces, equipment, and utensils used for the preparation, packaging, or handling of food products must be washed, rinsed, and sanitized before each use. Additionally, programs must frequently clean non-food contact surfaces, such as doorknobs, tabletops, and chairs. Use sanitizers approved by the EPA for use against COVID-19 and for food-contact surfaces.
(9) When disinfecting for coronavirus, EPA recommends following the product label use directions for enveloped viruses, as indicated by the approved emerging viral pathogen claim on the master label.
(10) Staff must be prepared to provide hands-on assistance to students with special needs for activities of daily living such as feeding. To protect themselves, staff who care for students requiring hands-on assistance for routine care activities, including feeding, and other direct contact activities must wear a long-sleeved, button down, oversized shirt over their clothing and wear long hair up or tied back during all activities requiring direct contact with a student. Staff must change outer clothing if body fluids from the student are present. Staff must change the student’s clothing if body fluids are present. Soiled clothing must be placed in a plastic bag until it can be sent home with the child to be washed.

Restraint Protocols:
Bi-County Collaborative trains and prepares program staff to work with students with diverse needs. Through clinical consultation offered by clinical psychologists and psychiatrists, and the work of Board Certified Behavior Analysts (BCBAs), school adjustment counselors, therapists and special education teachers, our programs utilize positive behavior support plans, therapeutic interventions, and instructional strategies to respond to crisis situations.

Due to the nature of the disabilities of our students, they can become agitated, dis-regulated and sometimes out of control. Students may make threats, attempt to hurt themselves or others. The safety of all BICO students and staff is our utmost priority and all incidents are taken seriously. Staff follow Crisis Prevention Intervention procedures to support students in these situations.

When a student is acting in such a way as to present imminent danger to themselves or to others, BICO Program Staff implement Non-Violent Crisis Prevention Intervention strategies. BICO has staff who are certified trainers who provide training in Non-Violent Crisis Prevention Intervention (CPI) on an ongoing basis. For a complete description of BICO’s Crisis Prevention Intervention Policy and Procedures please see the Employee and Student Manual for Health and Safety posted on our website at www.bicounty.org.
Due to an overabundance of caution, as a result of Covid-19, we will continue to emphasize verbal escalation techniques to help our students when they become dysregulated. However, when such a time arises for physical interventions, staff will take all possible precautions to promote the safety and wellbeing of students and staff alike.

If a student is acting in an unsafe manner, and verbal interventions prove unsuccessful, staff will intervene. When intervening, staff will be wearing appropriate PPE to ensure the safety of all parties involved. The PPE will include: gloves, masks, face shields, and other appropriate PPE. If staff are unable to deescalate a student within a reasonable amount of time, an administrator will contact the parent/guardian and ask them to pick their child up from school.

Protocols and Use of PPE in Restraint:
- Gloves are to be made available for staff to carry.
- A staff member in each classroom should be designated daily as the initial point person--quick access to PPE.
- Prior to any restraint, staff should ensure they are wearing gloves, masks, and face shields.
- Masks and face shields to be worn if there is a risk of bodily fluids e.g., from spitting and/or self-injurious behaviour.
- Following physical contacts with others during a restraint, remove and dispose of gloves immediately. Avoid touching your face and limit contact with hard surfaces before immediately washing hands and arms, if bare.
- Keep hands clear of the eyes, mouth and nose of yourself and others during incidents of physical restraint.
- Consider changing clothes especially if you have come in to physical contact through physical restraint. On arriving home, shower and change clothing prior to greeting other members of your household.
- Plastic aprons are not advised, they are easily ripped and may become a hazard, and also during a physical restraint they will offer little protection to body parts in contact with others.

Bathroom and Hygiene Protocols:
Students will follow the protocols set forth by the public school while accessing the school bathroom. Hand Washing procedures will be followed by all staff and students.

Handwashing:
- Scrub your palms, between your fingers, the backs of your hands and under your fingernails for at least 20 seconds. Dry your hands with a paper towel. Use the same paper towel to turn off the water and, if using the restroom, open the door.

Toilet/ Restrooms:
- Sanitized and wiped down after utilizing the restroom following use.
- One (1) person in the restroom at a time.
- The host school’s custodial staff will be cleaning and sanitizing the restrooms per their health and safety protocols.

Cleaning and Disinfecting Schedule (Include who is responsible):
All staff will clean and disinfect student work areas at the start and end of the day.
Teacher will be responsible for overseeing cleaning and disinfecting of the door handles, faucets and other frequently touched areas regularly throughout the day.
Each staff member will will clean and disinfect student work stations at the end of each session.
Each Staff member will clean and disinfect sensory/ break areas after each use.
Staff will clean and disinfect the sink and toilet area after each use.
Check list will be posted with step by step instructions.
School custodial staff will clean each classroom at the end of each school day.
Sign In/Out Procedure:
Staff will sign in upon arrival and sign out at the end of the day in the classroom.

Student Entry / Exit Procedure (Include - Use of sanitizer, handwashing, masks...)
Bico students arrive and dismiss from school at different times than the public school we are housed in. We will follow entry and exit protocols set forth by the public school. In addition, staff and students will be wearing masks and keeping six feet apart from each other during these procedures. Staff and students will use hand sanitizer upon entry and prior to dismissal from the school building.

Student / Staff Screening & Monitoring Process (See BICO Screening Instrument)
All BICO staff, students, parents/guardians, and any individuals seeking entry into the program spaces must be directed to self-screen at home, prior to coming to the program each day.
(a) Self-screening shall include checking temperature (temperature of 100.0°F or above is considered a fever), and checking for symptoms including fever, cough, shortness of breath, gastrointestinal symptoms, abdominal pain, unexplained rash, new loss of taste/smell, muscle aches, or any other symptoms that feel like a cold/flu. Anyone with a fever of 100.0°F or above or any other signs of illness will not be permitted to enter the program.
(b) Parents and staff must sign written attestations daily regarding any household contacts with COVID-19, symptoms (e.g., fever, sore throat, cough, shortness of breath, loss of smell or taste, or diarrhea), or if they have given students medicine to lower a fever.
(c) Individuals who decline to complete the screening questionnaire will not be permitted to enter the program space.

B. Regular Monitoring: Staff must actively monitor students throughout the day for symptoms of any kind, including fever, cough, shortness of breath, diarrhea, nausea, and vomiting, abdominal pain, and unexplained rash. Students who appear ill or are exhibiting signs of illness must be referred to the nurse and be separated from the larger group and isolated until able to leave the facility. Program nurses have non-contact thermometers on site to check temperatures if a student is suspected of having a fever (temperature above 100°F).

**If any student or staff appears to have severe symptoms, the program nurse must call emergency services immediately.** Before transferring to a medical facility, the nurse must notify the transfer team and medical facility if the individual is suspected to have COVID-19. Severe symptoms include the following: extreme difficulty breathing (i.e., not being able to speak without gasping for air), bluish lips or face, persistent pain or pressure in the chest, severe persistent dizziness or lightheadedness, new confusion or inability to rouse someone, or new seizure or seizures that won’t stop.

Nursing Protocols for students who are ill (not experiencing symptoms)
If a student becomes ill with symptoms unrelated to Covid-19, the nurse will assess per illness protocol. The student will then remain in the health office until:
1. The student is well enough to return to class.
2. The student will be dismissed to parent/guardian.

Nursing Protocols for students experiencing symptoms:
**Include Quarantine Space & notification of family**
If a student becomes symptomatic, programs must follow the protocols below:
1. Immediately isolate from other students and minimize exposure to staff.
2. Whenever possible, cover the student's nose and mouth with a mask or cloth face covering and accompany the student to the designated isolation room.
3. A staff member must alert the program nurse. The nurse will then properly assess the student in the isolation room to determine if the student should remain in the isolation room with a staff member until a parent or guardian arrives for pickup.
4. Contact the student's parents and send home as soon as possible.
(4) Follow the program’s plan for the transportation of a student who has developed symptoms and who relies on program transportation.

(5) If the nurse determines the student is experiencing severe symptoms and is in need of emergency care, the nurse will immediately call 911 and remain with the student until EMS arrives.

(6) Custodial staff should wait 24 hours before cleaning and disinfecting to minimize potential for other employees being exposed to respiratory droplets. If waiting 24 hours is not feasible, wait as long as possible. During this waiting period, open outside doors and windows to increase air circulation in these areas. Custodial staff should follow the CDC cleaning and disinfection recommendations for cleaning the exposed locations.

Protocol if staff or student is diagnosed.
Sick students or employees who are COVID-19 positive or symptomatic and presumed to have COVID-19 must not return until they have met the criteria for discontinuing home isolation and have consulted with a health care provider. Program leaders will determine the date of symptom onset for the student/staff. Program leaders will identify if the student/staff attended/worked at the program while symptomatic or during the two days before symptoms began and also determine who had close contact with the student/staff at the program during those days (staff and other children).

(1) If the individual tests positive for COVID-19 but is asymptomatic, isolation may be discontinued when at least 14 days have passed from the date of the positive test, as long as the individual remains asymptomatic. For example, if the individual was tested on April 1, isolation may be discontinued on or after April 15.

E. Notifying Required Parties: In the event that a program experiences an exposure, BICO programs must notify the following parties.

(1) Staff members and families about exposure while maintaining strict confidentiality.

(2) Local board of health if a student or staff is COVID-19 positive (the BICO COVID19 point person will notify the local BOH while adhering to the Public Health Recommendations for Community-Related Exposure).

Proposed Transition Process (ex. Open house with staggered scheduled times for students, Virtual tours, pre-return meeting with student / teacher - (social story about mask wearing / handwashing, etc...) 1:1 Teacher / Parent Conference to check in on student status, discuss return to school, explain what the day will look like):

A parent letter will be sent with details of the date and time students will return. All protocols will be clearly communicated and parents will need to sign off that they have read and agree to them. Teachers will offer phone calls, remote sessions and emails to answer any student specific questions. Support material will be available to address safety and sanitation precautions

Open House:
- A staggered schedule will be prepared to minimize the number of people in the building
- If preferred, staff will offer video conferencing with parents and students
- Staff and visitors will be wearing appropriate PPE to ensure the safety of all parties involved. The PPE will include: gloves, masks, face shields, and other appropriate PPE.
- Following visits, high touch surfaces will be sanitized.
Notification Process: In the event that one of our school locations/programs needs to move from one model to another we will notify:

**Families:** Program Director - Phone Call  
Executive Director - Email / Letter

**Sending District Representatives:** Director of Student Services - Phone contact with follow up letter

**Staff:** Program Director - Email

**Technology Needs:**
Chromebooks and instructional materials were delivered to students upon the initial closure in March to families that needed them to access the curriculum and virtual classes and therapy sessions. Students are expected to return to school with their Chromebooks. In the event that we have to revert back to remote learning, accommodations will be made to deliver Chromebooks to students who will need them at home.

**COVID-19 Response Team:** Program Director: Laurie Cunningham, Director of Student Services: Julie O'Connor, Lead Nurse: Dianne Croteau, Executive Director: Jeanne Sullivan
Bi-County Collaborative
Making It Possible

In Person Learning Template

Program Name: TEP 2
Program Grade Level: 5-8

Program Location:
Ahern Middle School
111 Mechanic St.
Foxboro, MA 02035

Number of Students Served: 4
Number of Full time Staff: 2
Number of Itinerant Staff: 3 (alternating)

Description of Program:
The Therapeutic Education Program (TEP) serves middle school aged students who present with neurological, social, communication and learning challenges.

The program provides a highly structured environment designed to assist students in learning academic content, perspective-taking skills, problem-solving skills, self-control, coping strategies, and acceptable social behaviors. Goals for students include the development of organizational skills, self-advocacy skills, confidence, and relationship building with peers and adults as well as preparation for success at the high school level. Throughout the program, emphasis is placed on students developing self-respect and becoming responsible learners who contribute to their class and school community in positive ways.

Although the program provides specialized instructional approaches for academics, socialization, and behavior, the curriculum remains rigorous for each student. The program is aligned with the MA Common Core Standards. Modifications and accommodations are designed to match each individual student's learning style and profile to ensure success accessing the curriculum. Depending on the level of skills development, students participate in the MCAS Assessment with or without accommodations, or the MCAS Alternate Assessment.

The teaching team at TEP strives to develop close working relationships with their students and encourages team-building activities. Since parents or guardians are considered partners in the educational process, trusting and supportive relationships are fostered between the student, school staff and parent/guardian.

RELATED SERVICES: Speech and language, physical and occupational therapy and counseling are available as needed.
Proposed Daily Schedule:
8:15-2:40
Homeroom
Student News
Math
Break/snack
English
Science
Lunch
History
Reading
Social Skills
Classroom Jobs
Dismissal

*Specials- Art and physical education will be offered weekly to all students
*Individual Therapies are scheduled throughout each student’s day dependent on IEP service delivery
*Mask breaks will be provided at least hourly to students and staff, while maining a distance of 6ft during these times.
*Outdoor breaks will be offered daily to our staff and students, weather permitting.

Student Assessment/Screening timeline
Staff and therapists will assess any regression on IEP goals since the students began in remote learning. They will collect and analyze data in order to determine current performance level on all goals and develop a plan to increase functioning above baseline.

Sample Classroom Design: (pictures or drawing)
Lunch and Snack Protocols:
For students who are ordering lunches, staff will obtain the lunches from the cafeteria and bring them to
the classroom. Students will eat in classrooms 6 feet apart. Sharing of food between students is highly
discouraged and they will not have the opportunity to heat up their food or have access to a refrigerator.
They will wash their hands before and after eating. Tables and desks will be sanitized before and after.
BICO Programs must follow the food safety guidelines below.

(1) Whenever possible, student’s snacks must be pre-packaged or ready to serve in individual
portions to minimize handling and preparation.
(2) To minimize potential spread of infection and to promote physical distancing, cafeterias and
group dining rooms must be avoided.
(3) Multiple students shall not use the same serving or eating utensils.
(4) Sinks used for food preparation must not be used for any other purposes.
(5) Staff must ensure students wash hands prior to and immediately after eating.
(6) Staff must wash their hands before preparing food and after helping students to eat. (7)
Tables, chairs, and trays used for meals need to be cleaned and sanitized before and after use.
(8) All food contact surfaces, equipment, and utensils used for the preparation, packaging, or
handling of food products must be washed, rinsed, and sanitized before each use. Additionally,
programs must frequently clean non-food contact surfaces, such as doorknobs, tabletops, and
chairs. Use sanitizers approved by the EPA for use against COVID-19 and for food-contact
surfaces.
(9) When disinfecting for coronavirus, EPA recommends following the product label use directions
for enveloped viruses, as indicated by the approved emerging viral pathogen claim on the master
label.
(10) Staff must be prepared to provide hands-on assistance to students with special needs for
activities of daily living such as feeding. To protect themselves, staff who care for students
requiring hands-on assistance for routine care activities, including feeding, and other direct
contact activities must wear a long-sleeved, button down, oversized shirt over their clothing and
wear long hair up or tied back during all activities requiring direct contact with a student. Staff
must change outer clothing if body fluids from the student are present. Staff must change the
student’s clothing if body fluids are present. Soiled clothing must be placed in a plastic bag until it
can be sent home with the child to be washed.

Restraint Protocols:
Bi-County Collaborative trains and prepares program staff to work with students with diverse needs.
Through clinical consultation offered by clinical psychologists and psychiatrists, and the work of Board
Certified Behavior Analysts (BCBAs), school adjustment counselors, therapists, and special education
teachers, our programs utilize positive behavior support plans, therapeutic interventions, and instructional
strategies to respond to crisis situations.

Due to the nature of the disabilities of our students, they can become agitated, dis-regulated and
sometimes out of control. Students may make threats, attempt to hurt themselves or others. The safety of
all BICO students and staff is our utmost priority and all incidents are taken seriously. Staff follow Crisis
Prevention Intervention procedures to support students in these situations.

When a student is acting in such a way as to present imminent danger to themselves or to others, BICO
Program Staff Implement Non-Violent Crisis Prevention Intervention strategies. BICO has staff who are
certified trainers who provide training in Non-Violent Crisis Prevention Intervention (CPI) on an ongoing
basis. For a complete description of BICO’s Crisis Prevention Intervention Policy and Procedures please
see the Employee and Student Manual for Health and Safety posted on our website at www.bicounty.org.
Due to an overabundance of caution, as a result of Covid-19, we will continue to emphasize verbal escalation techniques to help our students when they become dysregulated. However, when such a time arises for physical interventions, staff will take all possible precautions to promote the safety and wellbeing of students and staff alike.

If a student is acting in an unsafe manner, and verbal interventions prove unsuccessful, staff will intervene. When intervening, staff will be wearing appropriate PPE to ensure the safety of all parties involved. The PPE will include: gloves, masks, face shields, and other appropriate PPE. If staff are unable to deescalate a student within a reasonable amount of time, an administrator will contact the parent/guardian and ask them to pick their child up from school.

Protocols and Use of PPE in Restraint:
- Gloves are to be made available for staff to carry.
- A staff member in each classroom should be designated daily as the initial point person--quick access to PPE
- Prior to any restraint, staff should ensure they are wearing gloves, masks, and face shields.
- Masks and face shields to be worn if there is a risk of bodily fluids e.g., from spitting and/or self-injurious behaviour.
- Following physical contacts with others during a restraint, remove and dispose of gloves immediately. Avoid touching your face and limit contact with hard surfaces before immediately washing hands and arms, if bare.
- Keep hands clear of the eyes, mouth and nose of yourself and others during incidents of physical restraint.
- Consider changing clothes especially if you have come in to physical contact through physical restraint. On arriving home, shower and change clothing prior to greeting other members of your household.
- Plastic aprons are not advised, they are easily ripped and may become a hazard, and also during a physical restraint they will offer little protection to body parts in contact with others

Toileting / Changing Protocols:
Students are independent in their toileting needs. Students will follow the protocols set forth by the public school while accessing the school bathroom.
Hand Washing procedures will be followed by all staff and students.

Handwashing:
- Scrub your palms, between your fingers, the backs of your hands and under your fingernails for at least 20 seconds. Dry your hands with a paper towel. Use the same paper towel to turn off the water and, if using the restroom, open the door.

Toilet / Restrooms:
- Sanitized and wiped down after utilizing the restroom following use.
- One (1) person in the restroom at a time.
- The host school's custodial staff will be cleaning and sanitizing the restrooms per their health and safety protocols.

Cleaning and Disinfecting Schedule (Include who is responsible):
All staff will clean and disinfect student work areas at the start and end of the day.
Teacher will be responsible for overseeing cleaning and disinfecting of the door handles, faucets and other frequently touched areas regularly throughout the day.
Each staff member will will clean and disinfect student work stations at the end of each session
Each Staff member will clean and disinfect sensory/ break areas after each use.
Staff will clean and disinfect the sink and toilet area after each use.
Check list will be posted with step by step instructions
School custodial staff will clean each classroom at the end of each school day.
Sign In/Out Procedure:
Staff will sign in upon arrival and sign out at the end of the day in the classroom.

Student Entry / Exit Procedure (Include - Use of sanitizer, handwashing, masks....)
Bico students arrive and dismiss from school at different times than the public school we are housed in. We will follow entry and exit protocols set forth by the public school. In addition, staff and students will be wearing masks and keeping six feet apart from each other during these procedures. Staff and students will use hand sanitizer upon entry and prior to dismissal from the school building.

Student / Staff Screening & Monitoring Process (See BICO Screening Instrument)
All BICO staff, students, parents/guardians, and any individuals seeking entry into the program spaces must be directed to self-screen at home, prior to coming to the program each day.
(a) Self-screening shall include checking temperature (temperature of 100.0°F or above is considered a fever), and checking for symptoms including fever, cough, shortness of breath, gastrointestinal symptoms, abdominal pain, unexplained rash, new loss of taste/smell, muscle aches, or any other symptoms that feel like a cold/flu. Anyone with a fever of 100.0°F or above or any other signs of illness will not be permitted to enter the program.
(b) Parents and staff must sign written attestations daily regarding any household contacts with COVID-19, symptoms (e.g., fever, sore throat, cough, shortness of breath, loss of smell or taste, or diarrhea), or if they have given students medicine to lower a fever.
(c) Individuals who decline to complete the screening questionnaire will not be permitted to enter the program space.

B. Regular Monitoring: Staff must actively monitor students throughout the day for symptoms of any kind, including fever, cough, shortness of breath, diarrhea, nausea, and vomiting, abdominal pain, and unexplained rash. Students who appear ill or are exhibiting signs of illness must be referred to the nurse and be separated from the larger group and isolated until able to leave the facility. Program nurses have non-contact thermometers on site to check temperatures if a student is suspected of having a fever (temperature above 100°F).
**If any student or staff appears to have severe symptoms, the program nurse must call emergency services immediately.** Before transferring to a medical facility, the nurse must notify the transfer team and medical facility if the individual is suspected to have COVID-19. Severe symptoms include the following: extreme difficulty breathing (i.e. not being able to speak without gasping for air), bluish lips or face, persistent pain or pressure in the chest, severe persistent dizziness or lightheadedness, new confusion or inability to rouse someone, or new seizure or seizures that won't stop.

Nursing Protocols for students who are ill (not experiencing symptoms)
If a student becomes ill with symptoms unrelated to Covid-19, the nurse will assess per illness protocol. The student will then remain in the health office until:
(1) The student is well enough to return to class.
(2) The student will be dismissed to parent/guardian.

Nursing Protocols for students experiencing symptoms:
**Include Quarantine Space & notification of family**
If a student becomes symptomatic, programs must follow the protocols below:
(1) Immediately isolate from other students and minimize exposure to staff.
(2) Whenever possible, cover the student's nose and mouth with a mask or cloth face covering and accompany the student to the designated isolation room.
(3) A staff member must alert the program nurse. The nurse will then properly assess the student in the isolation room to determine if the student should remain in the isolation room with a staff member until a parent or guardian arrives for pickup.
(3) Contact the student's parents and send home as soon as possible.
(4) Follow the program's plan for the transportation of a student who has developed symptoms and who relies on program transportation.
(5) If the nurse determines the student is experiencing severe symptoms and is in need of emergency care, the nurse will immediately call 911 and remain with the student until EMS arrives.
(6) Custodial staff should wait 24 hours before cleaning and disinfecting to minimize potential for other employees being exposed to respiratory droplets. If waiting 24 hours is not feasible, wait as long as possible. During this waiting period, open outside doors and windows to increase air circulation in these areas. Custodial staff should follow the CDC cleaning and disinfection recommendations for cleaning the exposed locations.

Protocol if staff or student is diagnosed.
Sick students or employees who are COVID-19 positive or symptomatic and presumed to have COVID-19 must not return until they have met the criteria for discontinuing home isolation and have consulted with a health care provider. Program leaders will determine the date of symptom onset for the student/staff. Program leaders will identify if the student/staff attended/worked at the program while symptomatic or during the two days before symptoms began and also determine who had close contact with the student/staff at the program during those days (staff and other children).
(1) If the individual tests positive for COVID-19 but is asymptomatic, isolation may be discontinued when at least 14 days have passed from the date of the positive test, as long as the individual remains asymptomatic. For example, if the individual was tested on April 1, isolation may be discontinued on or after April 15.

E. Notifying Required Parties: In the event that a program experiences an exposure, BICO programs must notify the following parties.
(1) Staff members and families about exposure while maintaining strict confidentiality.
(2) Local board of health if a student or staff is COVID-19 positive (the BICO COVID19 point person will notify the local BOH while adhering to the Public Health Recommendations for Community-Related Exposure).

Proposed Transition Process (ex. Open house with staggered scheduled times for students, Virtual tours, pre-return meeting with student / teacher - (social story about mask wearing / handwashing, etc...) 1:1 Teacher / Parent Conference to check in on student status, discuss return to school, explain what the day will look like):

A parent letter will be sent with details of the date and time students will return. All protocols will be clearly communicated and parents will need to sign off that they have read and agree to them. Teachers will offer phone calls, remote sessions and emails to answer any student specific questions. Support material will be available to address safety and sanitation precautions

Open House:
- A staggered schedule will be prepared to minimize the number of people in the building
- If preferred, staff will offer video conferencing with parents and students
- Staff and visitors will be wearing appropriate PPE to ensure the safety of all parties involved. The PPE will include: gloves, masks, face shields, and other appropriate PPE.
- Following visits, high touch surfaces will be sanitized.
Notification Process: In the event that one of our school locations/programs needs to move from one model to another we will notify:

**Families:** Program Director - Phone Call  
Executive Director - Email / Letter

**Sending District Representatives:** Director of Student Services - Phone contact with follow up letter

**Staff:** Program Director - Email

**Technology Needs:**  
Chromebooks and instructional materials were delivered to students upon the initial closure in March to families that needed them to access the curriculum and virtual classes and therapy sessions. Students are expected to return to school with their Chromebooks. In the event that we have to revert back to remote learning, accommodations will be made to deliver Chromebooks to students who will need them at home.

**COVID-19 Response Team:** Program Director: Laurie Cunningham, Director of Student Services: Julie O’Connor, Lead Nurse: Dianne Croteau, Executive Director: Jeanne Sullivan
Program Name: AMS
Program Grade Level: 6-8

Program Location:
Keller-Sullivan School
500 Lincoln St.
Franklin, MA 02038

Number of Students Served: 14
Number of Full time Staff: 5
Number of Itinerant Staff: 4

Description of Program:
Alternative Middle School Program (AMS) provides services to students in grades 6-8 who may present with behavioral and social challenges, emotional impairment and/or specific learning disabilities.

The program provides a highly structured, consistent, and therapeutic environment. Teaching is individualized with a focus on promoting academic, social, and emotional success. Predictable routines, therapeutic supports, and consistent ongoing direct teaching of social and communication skills assist in motivating students and developing their self-esteem. Strategies are utilized that assist students to learn self-control and to develop appropriate behaviors and coping skills within the school environment.

The AMS academic curriculum is aligned with the Massachusetts Common Core Standards and is modified to meet the learning styles and needs of each student.

RELATED SERVICES: Students in this program receive counseling, speech and language, and other related services as recommended by their IEP teams.

Proposed Daily Schedule:

<table>
<thead>
<tr>
<th>6th Grade</th>
<th>7th &amp; 8th Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>Arrive &amp; sanitizing routine</td>
<td>Arrive &amp; sanitizing routine</td>
</tr>
<tr>
<td>Morning Work</td>
<td>Morning Work</td>
</tr>
<tr>
<td>Mindfulness</td>
<td>Mindfulness</td>
</tr>
<tr>
<td>ELA</td>
<td>Math</td>
</tr>
<tr>
<td>Earned Break</td>
<td>Earned Break</td>
</tr>
<tr>
<td>Math</td>
<td>ELA</td>
</tr>
<tr>
<td>Lunch</td>
<td>Lunch</td>
</tr>
<tr>
<td>Reading</td>
<td>Social Studies</td>
</tr>
<tr>
<td>Social Studies</td>
<td>Reading</td>
</tr>
<tr>
<td>Science</td>
<td>Science</td>
</tr>
<tr>
<td>Earned Break</td>
<td>Earned Break</td>
</tr>
<tr>
<td>Social Skills</td>
<td>Social Skills</td>
</tr>
</tbody>
</table>

Mask Breaks will be offered at least hourly to students and staff while maintaining at least 6 feet of distance. Outdoor breaks will be offered, weather permitting.
Lunch and Snack Protocols:
One staff will get lunches from the cafeteria and bring them to the classroom. Students will eat in classrooms 6 feet apart, they will wash their hands before eating. Tables and desks will be sanitized before and after. Staff will wear PPE for assisting with feeding. BiCO Programs must follow the food safety guidelines below.

1. Whenever possible, student's snacks must be pre-packaged or ready to serve in individual portions to minimize handling and preparation.
2. To minimize potential spread of infection and to promote physical distancing, cafeterias and group dining rooms must be avoided.
3. Multiple students shall not use the same serving or eating utensils.
4. Sinks used for food preparation must not be used for any other purposes.
5. Staff must ensure students wash hands prior to and immediately after eating.
6. Staff must wash their hands before preparing food and after helping students to eat. (7)
7. Tables, chairs, and trays used for meals need to be cleaned and sanitized before and after use.
8. All food contact surfaces, equipment, and utensils used for the preparation, packaging, or handling of food products must be washed, rinsed, and sanitized before each use. Additionally, programs must frequently clean non-food contact surfaces, such as doorknobs, tabletops, and chairs. Use sanitizers approved by the EPA for use against COVID-19 and for food-contact surfaces.
9. When disinfecting for coronavirus, EPA recommends following the product label use directions for enveloped viruses, as indicated by the approved emerging viral pathogen claim on the master label.
10. Staff must be prepared to provide hands-on assistance to students with special needs for activities of daily living such as feeding. To protect themselves, staff who care for students
requiring hands-on assistance for routine care activities, including feeding, and other direct contact activities must wear a long-sleeved, button down, oversized shirt over their clothing and wear long hair up or tied back during all activities requiring direct contact with a student. Staff must change outer clothing if body fluids from the student are present. Staff must change the student’s clothing if body fluids are present. Soiled clothing must be placed in a plastic bag until it can be sent home with the child to be washed.

Restraint Protocols:
Bi-County Collaborative trains and prepares program staff to work with students with diverse needs. Through clinical consultation offered by clinical psychologists and psychiatrists, and the work of Board Certified Behavior Analysts (BCBAs), school adjustment counselors, therapists and special education teachers, our programs utilize positive behavior support plans, therapeutic interventions, and instructional strategies to respond to crisis situations.

Due to the nature of the disabilities of our students, they can become agitated, dis-regulated and sometimes out of control. Students may make threats, attempt to hurt themselves or others. The safety of all BICO students and staff is our utmost priority and all incidents are taken seriously. Staff follow Crisis Prevention Intervention procedures to support students in these situations.

When a student is acting in such a way as to present imminent danger to themselves or to others, BICO Program Staff implement Non-Violent Crisis Prevention Intervention strategies. BICO has staff who are certified trainers who provide training in Non-Violent Crisis Prevention Intervention (CPI) on an ongoing basis. For a complete description of BICO’s Crisis Prevention Intervention Policy and Procedures please see the Employee and Student Manual for Health and Safety posted on our website at www.bicounty.org.

Due to an overabundance of caution, as a result of Covid-19, we will continue to emphasize verbal deescalation techniques to help our students when they become dysregulated. However, when such a time arises for physical interventions, staff will take all possible precautions to promote the safety and wellbeing of students and staff alike.

If a student is acting in an unsafe manner, and verbal interventions prove unsuccessful, staff will intervene. When intervening, staff will be wearing appropriate PPE to ensure the safety of all parties involved. The PPE will include: gloves, masks, face shields, and other appropriate PPE. If staff are unable to deescalate a student within a reasonable amount of time, an administrator will contact the parent/guardian and ask them to pick their child up from school.

Protocols and Use of PPE in Restraint:
- Gloves are to be made available for staff to carry.
- A staff member in each classroom should be designated daily as the initial point person—quick access to PPE
- Prior to any restraint, staff should ensure they are wearing gloves, masks, and face shields.
- Masks and face shields to be worn if there is a risk of bodily fluids e.g., from spitting and/or self-injurious behavior.
- Following physical contact with others during a restraint, remove and dispose of gloves immediately. Avoid touching your face and limit contact with hard surfaces before immediately washing hands and arms, if bare,
- Keep hands clear of the eyes, mouth, and nose of yourself and others during incidents of physical restraint.
- Consider changing clothes especially if you have come into physical contact through physical restraint. On arriving home, shower and change clothing prior to greeting other members of your household.

Plastic aprons are not advised, they are easily ripped and may become a hazard, and also during a physical restraint they will offer little protection to body parts in contact with others.
Toileting / Changing Protocols:
Students will follow the protocols set forth by the public school while accessing the school bathroom. Hand Washing procedures will be followed by all staff and students.

Handwashing:
Scrub your palms, between your fingers, the backs of your hands and under your fingernails for at least 20 seconds. Dry your hands with a paper towel. Use the same paper towel to turn off the water and, if using the restroom, open the door.

Toilet/ Restrooms:
Sanitized and wiped down after utilizing the restroom following use.
One (1) person in the restroom at a time.
The host school’s custodial staff will be cleaning and sanitizing the restrooms per their health and safety protocols.

Cleaning and Disinfecting Schedule (Include who is responsible):
All staff will clean and disinfect student work areas at the start and end of the day.
Teacher will be responsible for overseeing cleaning and disinfecting of the door handles, faucets and other frequently touched areas regularly throughout the day.
Each staff member will clean and disinfect student work stations at the end of each session.
Each Staff member will clean and disinfect sensory/ break areas after each use.
Staff will clean and disinfect the sink and toilet area after each use.
Check list will be posted with step by step instructions.

Sign In/Out Procedure:
Staff will sign in, in each classroom daily and sign out at the end of the day in the classroom.

Student Entry / Exit Procedure (Include - Use of sanitizer, handwashing, masks....)
A staff member will be stationed (donning face masks) at the drop off area, in the hallway and at the top of stairs near the classroom adjusting the flow of students to allow for social distancing for both arrival and dismissal. Students that are able will don face masks except during mask breaks. Staff will not let students disembark from transportation until there is six feet between other students. Students will bring personal items (lunch box, backpack to their personal work area) students will not gather in a common area.
Upon dismissal, At dismissal the staff member stationed at the pick up area will communicate which student will be dismissed from class, only one student at a time will be allowed out in six feet intervals.

Student / Staff Screening & Monitoring Process (See BICO Screening Instrument)
All BICO staff, students, parents/guardians, and any individuals seeking entry into the program spaces must be directed to self-screen at home, prior to coming to the program each day.
(a) Self-screening shall include checking temperature (temperature of 100.0°F or above is considered a fever), and checking for symptoms including fever, cough, shortness of breath, gastrointestinal symptoms, abdominal pain, unexplained rash, new loss of taste/smell, muscle aches, or any other symptoms that feel like a cold/flu. Anyone with a fever of 100.0°F or above or any other signs of illness will not be permitted to enter the program.
(b) Parents and staff must sign written attestations regarding any household contacts with COVID-19, symptoms (e.g., fever, sore throat, cough, shortness of breath, loss of smell or taste, or diarrhea), or if they have given students medicine to lower a fever.
(c) Individuals who decline to complete the screening questionnaire will not be permitted to enter the program space.

B. Regular Monitoring: Staff must actively monitor students throughout the day for symptoms of any kind, including fever, cough, shortness of breath, diarrhea, nausea, and vomiting, abdominal pain, and unexplained rash. Students who appear ill or are exhibiting signs of illness must be referred to the nurse and be separated from the larger group and isolated until able to leave the facility. Program nurses have
non-contact thermometers on site to check temperatures if a student is suspected of having a fever (temperature above 100°F).

*If any student or staff appears to have severe symptoms, the program nurse must call emergency services immediately. Before transferring to a medical facility, the nurse must notify the transfer team and medical facility if the individual is suspected to have COVID-19. Severe symptoms include the following: extreme difficulty breathing (i.e. not being able to speak without gasping for air), bluish lips or face, persistent pain or pressure in the chest, severe persistent dizziness or lightheadedness, new confusion or inability to rouse someone, or new seizure or seizures that won’t stop.

Nursing Protocols for students who are ill (not experiencing symptoms)
If a student becomes ill with symptoms unrelated to COVID-19, the nurse will assess per illness protocol. The student will then remain in the health office until:
1. The student is well enough to return to class.
2. The student will be dismissed to parent/guardian.

Nursing Protocols for students experiencing symptoms:
***Include Quarantine Space & notification of family
If a student becomes symptomatic, programs must follow the protocols below:
1. Immediately isolate from other students and minimize exposure to staff.
2. Whenever possible, cover the student’s nose and mouth with a mask or cloth face covering and accompany the student to the designated isolation room.
3. A staff member must alert the program nurse. The nurse will then properly assess the student in the isolation room to determine if the student should remain in the isolation room with a staff member until a parent or guardian arrives for pickup.
4. Contact the student’s parents and send home as soon as possible.
5. Follow the program’s plan for the transportation of a student who has developed symptoms and who relies on program transportation.
6. If the nurse determines the student is experiencing severe symptoms and is in need of emergency care, the nurse will immediately call 911 and remain with the student until EMS arrives.
7. Custodial staff should wait 24 hours before cleaning and disinfecting to minimize potential for other employees being exposed to respiratory droplets. If waiting 24 hours is not feasible, wait as long as possible. During this waiting period, open outside doors and windows to increase air circulation in these areas. Custodial staff should follow the CDC cleaning and disinfection recommendations for cleaning the exposed locations.

Protocol if staff or student is diagnosed.
Sick students or employees who are COVID-19 positive or symptomatic and presumed to have COVID-19 must not return until they have met the criteria for discontinuing home isolation and have consulted with a health care provider. Program leaders will determine the date of symptom onset for the student/staff. Program leaders will identify if the student/staff attended/worked at the program while symptomatic or during the two days before symptoms began and also determine who had close contact with the student/staff at the program during those days (staff and other children).

1. If the individual tests positive for COVID-19 but is asymptomatic, isolation may be discontinued when at least 14 days have passed from the date of the positive test, as long as the individual remains asymptomatic. For example, if the individual was tested on April 1, isolation may be discontinued on or after April 15.

E. Notifying Required Parties: In the event that a program experiences an exposure, BICO programs must notify the following parties.
1. Staff members and families about exposure while maintaining strict confidentiality.
(2) Local board of health if a student or staff is COVID-19 positive (the BICO COVID19 point person will notify the local BOH while adhering to the Public Health Recommendations for Community-Related Exposure).

Proposed Transition Process (ex. Open house with staggered scheduled times for students, Virtual tours, pre-return meeting with student / teacher - (social story about mask wearing / handwashing, etc...) 1:1 Teacher / Parent Conference to check in on student status, discuss return to school, explain what the day will look like):

Parent letter sent with details of the date and time students will return
All protocols will be clearly communicated and parents will need to sign off that they have read and agree to them.
Teachers will offer phone calls, remote sessions and emails to answer any student specific questions.
Support material including social stories, videos and lessons will be available to address safety and sanitation precautions
(ex. Open house with staggered scheduled times for students, Virtual tours, pre-return meeting

Notification Process: In the event that one of our school locations/programs needs to move from one model to another we will notify:

**Families:** Program Director - Phone Call
Executive Director - Email / Letter

**Sending District Representatives:** Director of Student Services - Phone contact with follow up letter

**Staff:** Program Director - Email

**Technology Needs:**
Chromebooks and instructional materials were delivered to students upon the initial closure in March to families that needed them to access the curriculum and virtual classes and therapy sessions. Students will continue to keep these at home in the circumstance that we need to revert back to remote learning.

**COVID-19 Response Team:** Program Director, Director of Student Services: Julie O'Connor, Lead Nurse: Dianne Croteau, Executive Director: Jeanne Sullivan
In-Person Learning Plan

Program Name: The Learning Center
Program Grade Level: 9-12

Program Location:
Blackstone Millville Regional HS
175 Lincoln St.
Blackstone, MA

Number of Students Served: 16
Number of Full time Staff:
  Admin: 1
  Teachers: 2
  Paraprofessionals 3
Number of Itinerant Staff: 4

Description of Program:
The Learning Center is a therapeutic educational program located in a public school setting. Students may present with emotional impairment and/or specific learning disabilities.

The Learning Center emphasizes a multi-disciplinary approach that provides clinical consultation, ongoing counseling, behavioral programming, and instruction in social pragmatics in conjunction with a focus on academic achievement. The program curriculum is aligned with the Massachusetts Common Core Standards with accommodations tailored on an individual basis to assist each student in accessing the curriculum.

The goals of the program include reintegration into the mainstream, a return to a community high school, diploma acquisition, and transition planning for entry into college or a post-secondary training program. Transitional planning and programming are individualized for each student to assist them in achieving their goals. This may include preparation for college based testing, work-based learning experiences, vocational exploration and soft skill job development, preparation for learning permit testing, and life planning skills such as budgeting.
### Proposed Daily Schedule:

<table>
<thead>
<tr>
<th>Time</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
</tr>
</thead>
<tbody>
<tr>
<td>8:00 - 8:30</td>
<td>Arrival and Breakfast</td>
<td>Arrival and Breakfast</td>
<td>Arrival and Breakfast</td>
<td>Arrival and Breakfast</td>
<td>Arrival and Breakfast</td>
</tr>
<tr>
<td>8:30 - 9:00</td>
<td>Morning Activity Direct Instruction</td>
<td>Morning Activity Direct Instruction</td>
<td>Morning Activity Direct Instruction</td>
<td>Morning Activity Direct Instruction</td>
<td>Morning Activity Direct Instruction</td>
</tr>
<tr>
<td>9:00 - 10:00</td>
<td>Educational Block 1 Direct Instruction</td>
<td>Educational Block 1 Direct Instruction</td>
<td>Educational Block 1 Direct Instruction</td>
<td>Educational Block 1 Direct Instruction</td>
<td>Educational Block 1 Direct Instruction</td>
</tr>
<tr>
<td>10:00 - 11:00</td>
<td>Educational Block 2 Direct Instruction</td>
<td>Educational Block 2 Direct Instruction</td>
<td>Educational Block 2 Direct Instruction</td>
<td>Educational Block 2 Direct Instruction</td>
<td>Educational Block 2 Direct Instruction</td>
</tr>
<tr>
<td>11:00 - 11:20</td>
<td>Lunches/Electives</td>
<td>Lunches/Electives</td>
<td>Lunches/Electives</td>
<td>Lunches/Electives</td>
<td>Lunches/Electives</td>
</tr>
<tr>
<td>11:20 - 12:00</td>
<td>Educational Block 3 Direct Instruction</td>
<td>Educational Block 3 Direct Instruction</td>
<td>Educational Block 3 Direct Instruction</td>
<td>Educational Block 3 Direct Instruction</td>
<td>Educational Block 3 Direct Instruction</td>
</tr>
<tr>
<td>12:00 - 1:30</td>
<td>Educational Block 4 Direct Instruction</td>
<td>Educational Block 4 Direct Instruction</td>
<td>Educational Block 4 Direct Instruction</td>
<td>Educational Block 4 Direct Instruction</td>
<td>Educational Block 4 Direct Instruction</td>
</tr>
<tr>
<td>1:30 - 2:00</td>
<td>Educational Block 5 Direct Instruction</td>
<td>Educational Block 5 Direct Instruction</td>
<td>Educational Block 5 Direct Instruction</td>
<td>Educational Block 5 Direct Instruction</td>
<td>Educational Block 5 Direct Instruction</td>
</tr>
<tr>
<td>2:00 - 2:15</td>
<td>Dismissal</td>
<td>Dismissal</td>
<td>Dismissal</td>
<td>Dismissal</td>
<td>Dismissal</td>
</tr>
</tbody>
</table>

*Individual therapies are scheduled throughout each student's day dependent on IEP service delivery.  
Mask Breaks will be offered at least hourly to students and staff while maintaining at least 6 feet of distance. Outdoor breaks will be offered, weather permitting.

**Student Assessment/Screening timeline**

High School Assessments:
- ELA Fall Common Assessment
- Math Prerequisite Skills Assessment
- CAFAS/PECAS
Sample Classroom Design: (pictures or drawing)
**Must maintain at least a 3 foot distance, students facing the same direction.

Teacher's Desk

Bookshelves  Blackboard  Bookshelves  Square Desk

Rectangle Desk  Rectangle Desk  Rectangle Desk  Rectangle Desk

Rectangle Desk  Rectangle Desk  Rectangle Desk  Rectangle Desk

Maximum class size will be determined by square footage in order to maintain 6 feet between student desks. Teacher desks will be at the front of the room and at least 4 feet from the first row of student desks.

Lunch and Snack Protocols:
BICO Programs must follow the food safety guidelines below.

(1) Whenever possible, student’s snacks must be pre-packaged or ready to serve in individual portions to minimize handling and preparation.
(2) To minimize potential spread of infection and to promote physical distancing, cafeterias and group dining rooms must be avoided.
(3) Multiple students shall not use the same serving or eating utensils.
(4) Sinks used for food preparation must not be used for any other purposes.
(5) Staff must ensure students wash hands prior to and immediately after eating.
(6) Staff must wash their hands before preparing food and after helping students to eat.
(7) Tables, chairs, and trays used for meals need to be cleaned and sanitized before and after use.
(8) All food contact surfaces, equipment, and utensils used for the preparation, packaging, or handling of food products must be washed, rinsed, and sanitized before each use. Additionally, programs must frequently clean non-food contact surfaces, such as doorknobs, tabletops, and chairs. Use sanitizers approved by the EPA for use against COVID-19 and for food-contact surfaces.
(9) When disinfecting for coronavirus, EPA recommends following the product label use directions for enveloped viruses, as indicated by the approved emerging viral pathogen claim on the master label.
(10) Staff must be prepared to provide hands-on assistance to students with special needs for activities of daily living such as feeding. To protect themselves, staff who care for students requiring hands-on assistance for routine care activities, including feeding, and other direct contact activities must wear a
long-sleeved, button down, oversized shirt over their clothing and wear long hair up or tied back during all activities requiring direct contact with a student. Staff must change outer clothing if body fluids from the student are present. Staff must change the student’s clothing if body fluids are present. Soiled clothing must be placed in a plastic bag until it can be sent home with the child to be washed.

**Restraint Protocols:**
Bi-County Collaborative trains and prepares program staff to work with students with diverse needs. Through clinical consultation offered by clinical psychologists and psychiatrists, and the work of Board Certified Behavior Analysts (BCBAs), school adjustment counselors, therapists and special education teachers, our programs utilize positive behavior support plans, therapeutic interventions, and instructional strategies to respond to crisis situations.

Due to the nature of the disabilities of our students, they can become agitated, dis-regulated and sometimes out of control. Students may make threats, attempt to hurt themselves or others. The safety of all BICO students and staff is our utmost priority and all incidents are taken seriously. Staff follow Crisis Prevention Intervention procedures to support students in these situations.

When a student is acting in such a way as to present imminent danger to themselves or to others, BICO Program Staff implement Non-Violent Crisis Prevention Intervention strategies. BICO has staff who are certified trainers who provide training in Non-Violent Crisis Prevention Intervention (CPI) on an ongoing basis. For a complete description of BICO’s Crisis Prevention Intervention Policy and Procedures please see the Employee and Student Manual for Health and Safety posted on our website at [www.bicounty.org](http://www.bicounty.org).

Due to an overabundance of caution, as a result of Covid-19, we will continue to emphasize verbal de-escalation techniques to help our students when they become dysregulated. However, when such a time arises for physical interventions, staff will take all possible precautions to promote the safety and wellbeing of students and staff alike.

If a student is acting in an unsafe manner, and verbal interventions prove unsuccessful, staff will intervene. When intervening, staff will be wearing appropriate PPE to ensure the safety of all parties involved. The PPE will include: gloves, masks, face shields, and other appropriate PPE. If staff are unable to deescalate a student within a reasonable amount of time, an administrator will contact the parent/guardian and ask them to pick their child up from school.

**Protocols and Use of PPE in Restraint:**
- Gloves are to be made available for staff to carry.
- A staff member in each classroom should be designated daily as the initial point person--quick access to PPE
- Prior to any restraint, staff should ensure they are wearing gloves, masks, and face shields.
- Masks and face shields to be worn if there is a risk of bodily fluids e.g., from spitting and/or self-injurious behavior.
- Following physical contact with others during a restraint, remove and dispose of gloves immediately. Avoid touching your face and limit contact with hard surfaces before immediately washing hands and arms, if bare.
- Keep hands clear of the eyes, mouth, and nose of yourself and others during incidents of physical restraint.
- Consider changing clothes especially if you have come into physical contact through physical restraint. On arriving home, shower and change clothing prior to greeting other members of your household.
- Plastic aprons are not advised, they are easily ripped and may become a hazard, and also during a physical restraint they will offer little protection to body parts in contact with others.
- Used PPE disposable PPE will be discarded in a trash barrel with a lid, located in a designated for doffing the used equipment.
Bathroom and Hygiene Protocols:
Students will follow the protocols set forth by the public school while accessing the school bathroom. Hand Washing procedures will be followed by all staff and students.

Handwashing:
Scrub your palms, between your fingers, the backs of your hands and under your fingernails for at least 20 seconds. Dry your hands with a paper towel. Use the same paper towel to turn off the water and, if using the restroom, open the door.

Toilet/ Restrooms:
Sanitized and wiped down after utilizing the restroom following use.
One (1) person in the restroom at a time.
The host school’s custodial staff will be cleaning and sanitizing the restrooms per their health and safety protocols.

Cleaning and Disinfecting Schedule (Include who is responsible):
All staff will clean and disinfect student work areas at the start and end of the day.
Teacher will be responsible for overseeing cleaning and disinfecting of the door handles, faucets and other frequently touched areas regularly throughout the day.
Each staff member will clean and disinfect student work stations at the end of each session.
Each Staff member will clean and disinfect sensory/break areas after each use.
Staff will clean and disinfect the sink and toilet area after each use.
Check list will be posted with step by step instructions

Sign In/Out Procedure:
Staff will sign in, in each classroom daily and sign out at the end of the day in the classroom

Student Entry / Exit Procedure (Include - Use of sanitizer, handwashing, masks....)
Staff members (donning face masks) will embark/disembark students to/from transportation individually and walk them to/from the classroom, maintaining six feet between other students at the drop off area, door, hallway, and classroom adjusting the flow of students to allow for social distancing for both arrival and dismissal. Students that are able will don face masks except during mask breaks. Students will bring personal items (lunch box, backpack) to their personal work area.
Students will not gather in a common area.
Upon dismissal, a staff member stationed at the pick up area will communicate which student will be dismissed from class; only one student at a time will be allowed out in six feet intervals.

Student / Staff Screening & Monitoring Process
All BICO staff, students, parents/guardians, and any individuals seeking entry into the program spaces must be directed to self-screen at home, prior to coming to the program each day.

(a) Self-screening shall include checking temperature (temperature of 100.0°F or above is considered a fever), and checking for symptoms including fever, cough, shortness of breath, gastrointestinal symptoms, abdominal pain, unexplained rash, new loss of taste/smell, muscle aches, or any other symptoms that feel like a cold/flu. Anyone with a fever of 100.0°F or above or any other signs of illness will not be permitted to enter the program.

(b) Parents and staff must sign written attestations daily regarding any household contacts with COVID-19, symptoms (e.g., fever, sore throat, cough, shortness of breath, loss of smell or taste, or diarrhea), or if they have given students medicine to lower a fever.
(c) Individuals who decline to complete the screening questionnaire will not be permitted to enter the program space.

**Regular Monitoring:** Staff must actively monitor students throughout the day for symptoms of any kind, including fever, cough, shortness of breath, diarrhea, nausea, and vomiting, abdominal pain, and unexplained rash. Students who appear ill or are exhibiting signs of illness must be referred to the nurse and be separated from the larger group and isolated until able to leave the facility. Program nurses have non-contact thermometers on site to check temperatures if a student is suspected of having a fever (temperature above 100°F).

**If any student or staff appears to have severe symptoms, the program nurse must call emergency services immediately.** Before transferring to a medical facility, the nurse must notify the transfer team and medical facility if the individual is suspected to have COVID-19. Severe symptoms include the following: extreme difficulty breathing (i.e. not being able to speak without gasping for air), bluish lips or face, persistent pain or pressure in the chest, severe persistent dizziness or lightheadedness, new confusion or inability to rouse someone, or new seizure or seizures that won’t stop.

**Nursing Protocols for students who are ill (not experiencing symptoms):**
If a student becomes ill with symptoms unrelated to COVID-19, the nurse will assess per illness protocol. The student will then remain in the health office until:
1. The student is well enough to return to class.
2. The student will be dismissed to parent/guardian.

**Nursing Protocols for students experiencing symptoms:**

If a student becomes symptomatic, programs must follow the protocols below:

(1) Immediately isolate from other students and minimize exposure to staff.

(2) Whenever possible, cover the student's nose and mouth with a mask or cloth face covering and accompany the student to the designated isolation room.

(3) A staff member must alert the program nurse. The nurse will then properly assess the student in the isolation room to determine if the student should remain in the isolation room with a staff member until a parent or guardian arrives for pickup.

(3) Contact the student's parents and send home as soon as possible.

(4) Follow the program's plan for the transportation of a student who has developed symptoms and who relies on program transportation.

(5) If the nurse determines the student is experiencing severe symptoms and is in need of emergency care, the nurse will immediately call 911 and remain with the student until EMS arrives.

(6) Custodial staff should wait 24 hours before cleaning and disinfecting to minimize potential for other employees being exposed to respiratory droplets. If waiting 24 hours is not feasible, wait as long as possible. During this waiting period, open outside doors and windows to increase air circulation in these areas. Custodial staff should follow the CDC cleaning and disinfection recommendations for cleaning the exposed locations.
Protocol if staff or student is diagnosed:
Sick students or employees who are COVID-19 positive or symptomatic and presumed to have COVID-19 must not return until they have met the criteria for discontinuing home isolation and have consulted with a health care provider. Program leaders will determine the date of symptom onset for the student/staff. Program leaders will identify if the student/staff attended/worked at the program while symptomatic or during the two days before symptoms began and also determine who had close contact with the student/staff at the program during those days (staff and other children).
(1) If the individual tests positive for COVID-19 but is asymptomatic, isolation may be discontinued when at least 14 days have passed from the date of the positive test, as long as the individual remains asymptomatic. For example, if the individual was tested on April 1, isolation may be discontinued on or after April 15.
Notifying Required Parties: In the event that a program experiences an exposure, BICO programs must notify the following parties.
(1) Staff members and families about exposure while maintaining strict confidentiality.
(2) Local board of health if a student or staff is COVID-19 positive (the BICO COVID19 point person will notify the local BOH while adhering to the Public Health Recommendations for Community-Related Exposure).

Proposed Transition Process (ex. Open house with staggered scheduled times for students, Virtual tours, pre-return meeting with student / teacher - (social story about mask wearing / handwashing, etc...) 1:1 Teacher / Parent Conference to check in on student status, discuss return to school, explain what the day will look like):
A parent letter will be sent with details of the date and time students will return. All protocols will be clearly communicated and parents will need to sign off that they have read and agree to them. Teachers will offer phone calls, remote sessions, and emails to answer any student specific questions. Support material will be available to address safety and sanitation precautions

Open House:
- A staggered schedule will be prepared to minimize the number of people in the building
- If preferred, staff will offer video conferencing with parents and students
- Staff and visitors will be wearing appropriate PPE to ensure the safety of all parties involved. The PPE will include: gloves, masks, face shields, and other appropriate PPE.
- Following visits, high touch surfaces will be sanitized.

Notification Process: In the event that one of our school locations/programs needs to move from one model to another we will notify:
Families: Program Director - Phone Call to families, email to listserv
Executive Director - Email / Letter
Sending District Representatives: Director of Student Services - Phone contact with follow up letter
Staff: Program Director - Email entire program, text to teachers and teachers to paras

Technology Needs:
Chromebooks and instructional materials were delivered to students upon the initial closure in March to families that needed them to access the curriculum and virtual classes and therapy sessions. Students will continue to keep these at home in the circumstance that we need to revert back to remote learning.

COVID-19 Response Team: Program Director: Kristin Boni, Director of Student Services: Julie O’Connor, Lead Nurse: Dianne Croteau, Executive Director: Jeanne Sullivan
In Person Learning Template

Program Name: SEAP Jackson
Program Grade Level: K-6

Program Location:
Anna Ware Jackson School
68 Messenger St. Plainville, MA

Number of Students Served: 6
Number of Full time Staff: 6
Number of Itinerant Staff: 3

Description of Program:
Educational and therapeutic services for students in grades K-6 with Autism Spectrum Disorder, Neurological, Intellectual and/or Communication Impairment.

Students receive individualized and small group teaching and staffing support to navigate their activities of daily living. Social and academic skills are taught using an Applied Behavioral Analysis approach as appropriate, including discrete trial instruction, natural learning environments, and small group instruction.

Proposed Daily Schedule:
8:30 - 2:55
Morning arrival hand washing and bathrooming routines
Individual Discrete Trial Training
Sensory Break
Individual Discrete Trial Training
hand washing and bathrooming routines
Snack
Individual Discrete Trial Training
Individual Breaks
Individual Discrete Trial Training
Sensory Break
hand washing and bathrooming routines
Lunch
Individual Specials Art, Music
Individual Discrete Trial Training
hand washing and bathrooming routines
Mask Breaks will be offered at least hourly to students and staff while maintaining at least 6 feet of distance. Outdoor breaks will be offered, weather permitting.

Student Assessment/Screening timeline
Staff will develop a baseline for students DTT programs during the first month of In Person Instruction
Previous data will be used to determine specific skills to be assessed.
Appropriate parts of the ABLLS (Assessment of Basic Language Learning Skills) will be used to assess students current baseline during the first two months of In Person Instruction
Sample Classroom Design: (pictures or drawing)

Lunch and Snack Protocols:
One staff will get lunches from the cafeteria and bring them to the classroom. Students will eat in classrooms 6 feet apart, they will wash their hands before eating. Tables and desks will be sanitized before and after. Staff will wear PPE for assisting with feeding.

BICO Programs must follow the food safety guidelines below.

(1) Whenever possible, student’s snacks must be pre-packaged or ready to serve in individual portions to minimize handling and preparation.
(2) To minimize potential spread of infection and to promote physical distancing, cafeterias and group dining rooms must be avoided.
(3) Multiple students shall not use the same serving or eating utensils.
(4) Sinks used for food preparation must not be used for any other purposes.
(5) Staff must ensure students wash hands prior to and immediately after eating.
(6) Staff must wash their hands before preparing food and after helping students to eat. (7) Tables, chairs, and trays used for meals need to be cleaned and sanitized before and after use.
(8) All food contact surfaces, equipment, and utensils used for the preparation, packaging, or handling of food products must be washed, rinsed, and sanitized before each use. Additionally, programs must frequently clean non-food contact surfaces, such as doorknobs, tabletops, and chairs. Use sanitizers approved by the EPA for use against COVID-19 and for food-contact surfaces.
(9) When disinfecting for coronavirus, EPA recommends following the product label use directions for enveloped viruses, as indicated by the approved emerging viral pathogen claim on the master label.
(10) Staff must be prepared to provide hands-on assistance to students with special needs for activities of daily living such as feeding. To protect themselves, staff who care for students requiring hands-on assistance for routine care activities, including feeding, and other direct contact activities must wear a long-sleeved, button down, oversized shirt over their clothing and wear long hair up or tied back during all activities requiring direct contact with a student. Staff must change outer clothing if body fluids from the student are present. Staff must change the student’s clothing if body fluids are present. Soiled clothing must be placed in a plastic bag until it can be sent home with the child to be washed.

Restraint Protocols:
Bi-County Collaborative trains and prepares program staff to work with students with diverse needs. Through clinical consultation offered by clinical psychologists and psychiatrists, and the work of Board Certified Behavior Analysts (BCBAs), school adjustment counselors, therapists and special education...
teachers, our programs utilize positive behavior support plans, therapeutic interventions, and instructional strategies to respond to crisis situations.

Due to the nature of the disabilities of our students, they can become agitated, dis-regulated and sometimes out of control. Students may make threats, attempt to hurt themselves or others. The safety of all BICO students and staff is our utmost priority and all incidents are taken seriously. Staff follow Crisis Prevention Intervention procedures to support students in these situations.

When a student is acting in such a way as to present imminent danger to themselves or to others, BICO Program Staff implement Non-Violent Crisis Prevention Intervention strategies. BICO has staff who are certified trainers who provide training in Non-Violent Crisis Prevention Intervention (CPI) on an ongoing basis. For a complete description of BICO's Crisis Prevention Intervention Policy and Procedures please see the Employee and Student Manual for Health and Safety posted on our website at www.bicounty.org.

Due to an overabundance of caution, as a result of Covid-19, we will continue to emphasize verbal deescalation techniques to help our students when they become dysregulated. However, when such a time arises for physical interventions, staff will take all possible precautions to promote the safety and wellbeing of students and staff alike.

If a student is acting in an unsafe manner, and verbal interventions prove unsuccessful, staff will intervene. When intervening, staff will be wearing appropriate PPE to ensure the safety of all parties involved. The PPE will include: gloves, masks, face shields, and other appropriate PPE. If staff are unable to deescalate a student within a reasonable amount of time, an administrator will contact the parent/guardian and ask them to pick their child up from school.

Protocols and Use of PPE in Restraint:
- Gloves are to be made available for staff to carry.
- A staff member in each classroom should be designated daily as the initial point person--quick access to PPE
- Prior to any restraint, staff should ensure they are wearing gloves, masks, and face shields.
- Masks and face shields to be worn if there is a risk of bodily fluids e.g., from spitting and/or self-injurious behavior.
- Following physical contact with others during a restraint, remove and dispose of gloves immediately. Avoid touching your face and limit contact with hard surfaces before immediately washing hands and arms, if bare.
- Keep hands clear of the eyes, mouth, and nose of yourself and others during incidents of physical restraint.
- Consider changing clothes especially if you have come into physical contact through physical restraint. On arriving home, shower and change clothing prior to greeting other members of your household.

Plastic aprons are not advised, they are easily ripped and may become a hazard, and also during a physical restraint they will offer little protection to body parts in contact with others.

Toileting / Changing Protocols:
Students will follow the protocols set forth by the public school while accessing the school bathroom. Hand Washing procedures will be followed by all staff and students.

Handwashing:
Scrub your palms, between your fingers, the backs of your hands and under your fingernails for at least 20 seconds. Dry your hands with a paper towel. Use the same paper towel to turn off the water and, if using the restroom, open the door.

Toilet/ Restrooms:
Sanitized and wiped down after utilizing the restroom following use.
One (1) person in the restroom at a time.
The host school's custodial staff will be cleaning and sanitizing the restrooms per their health and safety protocols.

Cleaning and Disinfecting Schedule (Include who is responsible):
All staff will clean and disinfect student work areas at the start and end of the day.
Teacher will be responsible for overseeing cleaning and disinfecting of the door handles, faucets and other frequently touched areas regularly throughout the day.
Each staff member will clean and disinfect student work stations at the end of each session.
Each Staff member will clean and disinfect sensory/ break areas after each use.
Staff will clean and disinfect the sink and toilet area after each use.
Check list will be posted with step by step instructions.

Sign in/Out Procedure:
Staff will sign in, in each classroom daily and sign out at the end of the day in the classroom

Student Entry / Exit Procedure (Include - Use of sanitizer, handwashing, masks….)
A staff member will be stationed (donning face masks) every six feet, at the drop off area, door, hallway and classroom adjusting the flow of students to allow for social distancing for both arrival and dismissal.
Students that are able will don face masks except during mask breaks. Staff will not let students disembark from transportation until there is six feet between other students. Students will bring personal items (lunch box, backpack to their personal work area) students will not gather in a common area. Upon dismissal. At dismissal the staff member stationed at the pick up area will communicate which student will be dismissed from class, only one student at a time will be allowed out in six feet intervals.

Student / Staff Screening & Monitoring Process (See BICO Screening Instrument)
All BICO staff, students, parents/guardians, and any individuals seeking entry into the program spaces must be directed to self-screen at home, prior to coming to the program each day.
(a) Self-screening shall include checking temperature (temperature of 100.0°F or above is considered a fever), and checking for symptoms including fever, cough, shortness of breath, gastrointestinal symptoms, abdominal pain, unexplained rash, new loss of taste/smell, muscle aches, or any other symptoms that feel like a cold/flu. Anyone with a fever of 100.0°F or above or any other signs of illness will not be permitted to enter the program.
(b) Parents and staff must sign written attestations daily regarding any household contacts with COVID-19, symptoms (e.g., fever, sore throat, cough, shortness of breath, loss of smell or taste, or diarrhea), or if they have given students medicine to lower a fever.
(c) Individuals who decline to complete the screening questionnaire will not be permitted to enter the program space.

B. Regular Monitoring: Staff must actively monitor students throughout the day for symptoms of any kind, including fever, cough, shortness of breath, diarrhea, nausea, and vomiting, abdominal pain, and unexplained rash. Students who appear ill or are exhibiting signs of illness must be referred to the nurse and be separated from the larger group and isolated until able to leave the facility. Program nurses have non-contact thermometers on site to check temperatures if a student is suspected of having a fever (temperature above 100°F).

**If any student or staff appears to have severe symptoms, the program nurse must call emergency services immediately. Before transferring to a medical facility, the nurse must notify the transfer team and medical facility if the individual is suspected to have COVID-19. Severe symptoms include the following: extreme difficulty breathing (i.e. not being able to speak without gasping for air), bluish lips or face, persistent pain or pressure in the chest, severe persistent dizziness or lightheadedness, new confusion or inability to rouse someone, or new seizure or seizures that won't stop.

Nursing Protocols for students who are ill (not experiencing symptoms)
If a student becomes ill with symptoms unrelated to COVID-19, the nurse will assess per illness protocol. The student will then remain in the health office until:
1. The student is well enough to return to class.
2. The student will be dismissed to parent/guardian.

Nursing Protocols for students experiencing symptoms:
*Include Quarantine Space & notification of family
If a student becomes symptomatic, programs must follow the protocols below:
(1) Immediately isolate from other students and minimize exposure to staff.
(2) Whenever possible, cover the student’s nose and mouth with a mask or cloth face covering and accompany the student to the designated isolation room.
(3) A staff member must alert the program nurse. The nurse will then properly assess the student in the isolation room to determine if the student should remain in the isolation room with a staff member until a parent or guardian arrives for pickup.
(3) Contact the student’s parents and send home as soon as possible.
(4) Follow the program’s plan for the transportation of a student who has developed symptoms and who relies on program transportation.
(5) If the nurse determines the student is experiencing severe symptoms and is in need of emergency care, the nurse will immediately call 911 and remain with the student until EMS arrives.
(6) Custodial staff should wait 24 hours before cleaning and disinfecting to minimize potential for other employees being exposed to respiratory droplets. If waiting 24 hours is not feasible, wait as long as possible. During this waiting period, open outside doors and windows to increase air circulation in these areas. Custodial staff should follow the CDC cleaning and disinfection recommendations for cleaning the exposed locations.

Protocol if staff or student is diagnosed.
Sick students or employees who are COVID-19 positive or symptomatic and presumed to have COVID-19 must not return until they have met the criteria for discontinuing home isolation and have consulted with a health care provider. Program leaders will determine the date of symptom onset for the student/staff. Program leaders will identify if the student/staff attended/worked at the program while symptomatic or during the two days before symptoms began and also determine who had close contact with the student/staff at the program during those days (staff and other children).
(1) If the individual tests positive for COVID-19 but is asymptomatic, isolation may be discontinued when at least 14 days have passed from the date of the positive test, as long as the individual remains asymptomatic. For example, if the individual was tested on April 1, isolation may be discontinued on or after April 15.

E. Notifying Required Parties: In the event that a program experiences an exposure, BICO programs must notify the following parties.
(1) Staff members and families about exposure while maintaining strict confidentiality.
(2) Local board of health if a student or staff is COVID-19 positive (the BICO COVID19 point person will notify the local BOH while adhering to the Public Health Recommendations for Community-Related Exposure).

Proposed Transition Process
Parent letter sent with details of the date and time students will return
All protocols will be clearly communicated and parents will need to sign off that they have read and agree to them.
Teachers will offer phone calls, remote sessions and emails to answer any student specific questions.
Support material including social stories, videos and lessons will be available to address safety and sanitation precautions
(ex. Open house with staggered scheduled times for students, Virtual tours, pre-return meeting
Notification Process: In the event that one of our school locations/programs needs to move from one model to another we will notify:

**Families:** Program Director - Phone Call  
Executive Director - Email / Letter  
**Sending District Representatives:** Director of Student Services - Phone contact with follow up letter  
**Staff:** Program Director - Email

**Technology Needs:**  
Chromebooks and instructional materials were delivered to students upon the initial closure in March to families that needed them to access the curriculum and virtual classes and therapy sessions. Students will continue to keep these at home in the circumstance that we need to revert back to remote learning.

**COVID-19 Response Team:** Program Director, Director of Student Services: Julie O’Connor, Lead Nurse: Dianne Croteau, Executive Director: Jeanne Sullivan
In Person Learning Template

Program Name: PDLP
Program Grade Level: Pre-K-1

Program Location:
Jordan Jackson Elementary School
255 East St. Mansfield, MA

Number of Students Served: 5
Number of Full time Staff: 3
Number of Itinerant Staff: 5 (alternating)

Description of Program:
The Preschool Developmental Learning Program serves students ages 3-5 with multiple physical, intellectual, neurological and communication impairments.

Many of these students enter the program after participating in a home-based early intervention model. A comprehensive transition plan between the early intervention team and the school-based team is developed to assure student success in the program. The team also makes it a priority to help parents understand the school-based model of instruction and the IEP process.

Educational instruction is based on the Pre-Kindergarten Common Core standards with modifications for students to successfully participate in all curriculum areas. The program incorporates assistive technology using a multi-sensory model of instruction to foster participation, awareness, and self-determination.

RELATED SERVICES: Students may have daily medical needs that require care by a classroom nurse. Direct speech therapy, occupational therapy, and physical therapy are provided per each student's IEP. Therapists also provide staff consultation in order to embed therapeutic techniques into the daily classroom routine. Vision services are also available as needed.
## Proposed Daily Schedule:

8:40 - 3:00

<table>
<thead>
<tr>
<th>Time</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
</tr>
</thead>
<tbody>
<tr>
<td>8:40-9</td>
<td>Arrival</td>
<td>Arrival</td>
<td>Arrival</td>
<td>Arrival</td>
<td>Arrival</td>
</tr>
<tr>
<td>9-9:30</td>
<td>Welcome Group (Michelle)</td>
<td>Welcome Group (Sara)</td>
<td>Welcome Group (Michelle)</td>
<td>Welcome Group (Sara)</td>
<td>Welcome Group (Michelle)</td>
</tr>
<tr>
<td>9:30-10</td>
<td>Individual Work</td>
<td>Individual Work</td>
<td>Show &amp; Tell</td>
<td>Individual Work</td>
<td>Individual Work</td>
</tr>
<tr>
<td>10-10:30</td>
<td>Library/ Swim (biweekly)</td>
<td>Circle (Michelle)</td>
<td>Circle (Sara)</td>
<td>Circle (Michelle)</td>
<td>Circle (Sara)</td>
</tr>
<tr>
<td>10:30-11:15</td>
<td>Circle (Sara)</td>
<td>Group (Sara)</td>
<td>Group (Michelle)</td>
<td>Group (Sara)</td>
<td>Group (Michelle)</td>
</tr>
<tr>
<td>11:15-12:00</td>
<td>Independent Play</td>
<td>Music 11-11:45 (biweekly)</td>
<td>Independent Play</td>
<td>Independent Play</td>
<td>Independent Play</td>
</tr>
<tr>
<td>12-1:30</td>
<td>Leisure</td>
<td>Leisure</td>
<td>Leisure</td>
<td>Leisure</td>
<td>Leisure</td>
</tr>
<tr>
<td>1:30-2:30</td>
<td>Unique Learning (Sara)</td>
<td>Unique Learning (Michelle)</td>
<td>GYM Group (2:10-2:40)</td>
<td>Unique Learning (Michelle)</td>
<td>Unique Learning (Sara)</td>
</tr>
<tr>
<td>2:30-2:50</td>
<td>Goodbye Group</td>
<td>Goodbye Group</td>
<td></td>
<td>Goodbye Group</td>
<td>Goodbye Group</td>
</tr>
<tr>
<td>2:50-3</td>
<td>Dismissal</td>
<td>Dismissal</td>
<td>Dismissal</td>
<td>Dismissal</td>
<td>Dismissal</td>
</tr>
</tbody>
</table>

***Individual Therapies are scheduled throughout each student's day dependent on IEP service delivery.

**** Due to the medical and sensory needs of our students, some students cannot tolerate wearing a mask. For those students who can tolerate wearing one, mask breaks will be provided at least once per hour.
Student Assessment/Screening timeline
Staff and therapists will assess any regression on IEP goals since the students began in remote learning. They will collect and analyze data in order to determine current performance level on all goals and develop a plan to increase functioning above baseline.

Sample Classroom Design: (pictures or drawing)

Lunch and Snack Protocols:
Our students primarily receive their nutrition through g-tube feeds by the classroom nurse. Health and safety protocols will occur before and after each student is fed. Our Occupational Therapist also assists in feeding students who are working on textures. She will also follow all health and safety protocols. Students will be 6 feet apart at all times during feedings. Tables and desks will be sanitized before and after. Staff will wear PPE for assisting with feeding.
BICO Programs must follow the food safety guidelines below.

(1) Whenever possible, student's snacks must be pre-packaged or ready to serve in individual portions to minimize handling and preparation.
(2) To minimize potential spread of infection and to promote physical distancing, cafeterias and group dining rooms must be avoided.
(3) Multiple students shall not use the same serving or eating utensils.
(4) Sinks used for food preparation must not be used for any other purposes.
(5) Staff must ensure students wash hands prior to and immediately after eating.
(6) Staff must wash their hands before preparing food and after helping students to eat. (7) Tables, chairs, and trays used for meals need to be cleaned and sanitized before and after use. (8) All food contact surfaces, equipment, and utensils used for the preparation, packaging, or handling of food products must be washed, rinsed, and sanitized before each use. Additionally, programs must frequently clean non-food contact surfaces, such as doorknobs, tabletops, and chairs. Use sanitizers approved by the EPA for use against COVID-19 and for food-contact surfaces.

(9) When disinfecting for coronavirus, EPA recommends following the product label use directions for enveloped viruses, as indicated by the approved emerging viral pathogen claim on the master label.

(10) Staff must be prepared to provide hands-on assistance to students with special needs for activities of daily living such as feeding. To protect themselves, staff who care for students requiring hands-on assistance for routine care activities, including feeding, and other direct contact activities must wear a long-sleeved, button down, oversized shirt over their clothing and wear long hair up or tied back during all activities requiring direct contact with a student. Staff must change outer clothing if body fluids from the student are present. Staff must change the student’s clothing if body fluids are present. Soiled clothing must be placed in a plastic bag until it can be sent home with the child to be washed.

Restraint Protocols:
Restraints do not occur in this program due to the absence of unsafe behaviors.

Toileting / Changing Protocols:
Staff must practice stringent hygiene and infection control practices to keep themselves and students healthy and safe.

(1) Staff must wear a long-sleeved, button down, oversized shirt over their clothing and wear long hair up or tied back during all activities that may expose staff to bodily fluids.

(2) Staff must change outer clothing if body fluids from a student come into contact with the clothing.

(3) Staff must change the student’s clothing if body fluids come into contact with the clothing.

(4) Soiled clothing must be placed in a sealed plastic bag or container until it can be sent home to be washed.

(5) All staff must follow safe and sanitary toileting/diaper changing procedures. Staff must wear a mask, clothing covering (e.g., an oversized button-down, long sleeved shirt, etc.), and eye protection. Staff with long hair must tie their hair back so it is off the collar and away from the reach of the student.

Procedures must be posted in all toileting/diaper changing areas, and must include:

(a) Prepare (includes wearing PPE, gathering all supplies, washing hands, and putting on gloves).

(b) Clean the child.

(c) Remove trash (soiled diaper, wipes, and gloves).

(d) Put on clean gloves.

(e) Replace diaper.

(f) Wash child’s hands.

(g) Clean up diapering station.

(h) Remove and dispose of gloves.

(i) Wash hands.

(6) During changing and feeding activities, staff must wear a mask, clothing covering (e.g., an oversized button-down, long sleeved shirt, etc.), and eye protection. Staff with long hair must tie their hair back so it is off the collar and away from the reach of the student.

(a) Staff must thoroughly wash their hands (regardless of glove use), neck, and any other areas touched by a student’s bodily fluids.
(b) Staff must change the student's clothes if bodily fluids are on the student's clothing. Staff must then change the button-down shirt, if bodily fluids are on it, and wash their hands again.
(c) Contaminated clothes must be placed in a sealed plastic bag or container and then washed in a washing machine.
(d) It is recommended that staff and students have multiple changes of clothing on hand each day.

Surface areas will be sanitized and disinfected after each change. Hand Washing procedures will be followed by staff.

Handwashing:
BICO ensures that each program has adequate supplies to promote effective hygiene behaviors.
Programs must have the following materials and supplies:
(1) Handwashing facilities with soap and water must be readily accessible to all students and staff. Hand washing instructions are posted near every hand washing sink and where they can easily be seen by students and staff.
(2) Hand sanitizer or hand sanitizing wipes with at least 60% alcohol may be utilized at times when hand washing is not available. Hand sanitizer must be stored securely and used only under supervision of staff. Staff is responsible for teaching students proper use.
(3) Hand hygiene stations are set up at the entrance of the programs, so that students can clean their hands before they enter. If a sink with soap and water is not available, hand sanitizer or hand sanitizing wipes with at least 60% alcohol are provided at program entrance locations. If hand sanitizer use is not appropriate or not approved and there is no soap and water located at the entrance, students are instructed to go to the nearest handwashing station upon entry. The use of hand sanitizer is supervised by staff.
(4) If pens are required for visitor sign in, they will be disinfected between each use.

B. When to Wash Hands: BICO Students and staff must wash their hands or use hand sanitizer often, making sure to wash all surfaces of their hands (e.g., front and back, wrists, between fingers). Staff and students must be perform hand washing with soap and water for at least 20 seconds when the following criteria are met:
(1) Upon entry into and exit from program space;
(2) When coming in to the program space from outside activities;
(3) Before and after eating;
(4) After using the restroom;
(5) After sneezing, coughing or nose blowing;
(6) After toileting and/or changing students;
(7) Before and after handling food;
(8) After touching or cleaning surfaces that may be contaminated;
(9) After using any shared equipment like toys, computer keyboards, mouse, copy machines, etc;
(10) After assisting students with handwashing;
(11) Before and after administration of medication;
(12) Before entering vehicles used for transportation of students;
(13) After contact with facemask or cloth face covering;
(14) Before and after changes of gloves.

Toilet/Restrooms:
Sanitized and wiped down by the person utilizing the restroom following use.
One (1) person in the restroom at a time.

Cleaning and Disinfecting Schedule (Include who is responsible):
All staff will clean and disinfect student work areas at the start and end of the day.
Teacher will be responsible for overseeing cleaning and disinfecting of the door handles, faucets and other frequently touched areas regularly throughout the day.
Each staff member will clean and disinfect student work stations at the end of each session.
Each Staff member will clean and disinfect sensory/break areas after each use.
Staff will clean and disinfect the changing table, sink, and toilet area after each use.
Check list will be posted with step by step instructions.
Teacher will be responsible for signing off on the checklist at the end of each day.
School custodial staff will clean each classroom at the end of each school day.

Sign In/Out Procedure:
Staff will sign in upon arrival and sign out at the end of the day in the classroom.

Student Entry / Exit Procedure (Include - Use of sanitizer, handwashing, masks....)
A staff member will be stationed (wearing PPE) every six feet, at the drop off area, door, hallway and classroom adjusting the flow of students to allow for social distancing for both arrival and dismissal.
Students that are able will wear face masks except during mask breaks. Staff will bring our students into the classroom and put their backpacks/materials in a designated space which will be separate from other students’ items.
At dismissal the staff member stationed at the pick up area will communicate which student will be dismissed from class. Only one student at a time will be allowed out in six feet intervals.
Staff and students will use hand sanitizer upon entry and prior to dismissal from the school building.

Student / Staff Screening & Monitoring Process (See BICO Screening Instrument)
All BICO staff, students, parents/guardians, and any individuals seeking entry into the program spaces must be directed to self-screen at home, prior to coming to the program each day.
(a) Self-screening shall include checking temperature (temperature of 100.0°F or above is considered a fever), and checking for symptoms including fever, cough, shortness of breath, gastrointestinal symptoms, abdominal pain, unexplained rash, new loss of taste/smell, muscle aches, or any other symptoms that feel like a cold/flu. Anyone with a fever of 100.0°F or above or any other signs of illness will not be permitted to enter the program.
(b) Parents and staff must sign written attestations daily regarding any household contacts with COVID-19, symptoms (e.g., fever, sore throat, cough, shortness of breath, loss of smell or taste, or diarrhea), or if they have given students medicine to lower a fever.
(c) Individuals who decline to complete the screening questionnaire will not be permitted to enter the program space.

B. Regular Monitoring: Staff must actively monitor students throughout the day for symptoms of any kind, including fever, cough, shortness of breath, diarrhea, nausea, and vomiting, abdominal pain, and unexplained rash. Students who appear ill or are exhibiting signs of illness must be referred to the nurse and be separated from the larger group and isolated until able to leave the facility. Program nurses have non-contact thermometers on site to check temperatures if a student is suspected of having a fever (temperature above 100°F).

"If any student or staff appears to have severe symptoms, the program nurse must call emergency services immediately. Before transferring to a medical facility, the nurse must notify the transfer team and medical facility if the individual is suspected to have COVID-19. Severe symptoms include the following: extreme difficulty breathing (i.e. not being able to speak without gasping for air), bluish lips or face, persistent pain or pressure in the chest, severe persistent dizziness or light headedness, new confusion or inability to rouse someone, or new seizure or seizures that won’t stop.

Nursing Protocols for students who are ill (not experiencing symptoms)
If a student becomes ill with symptoms unrelated to COVID-19, the nurse will assess per illness protocol. The student will then remain in the health office until:
(1) The student is well enough to return to class.
(2) The student will be dismissed to parent/guardian.
Nursing Protocols for students experiencing symptoms:

***Include Quarantine Space & notification of family
If a student becomes symptomatic, programs must follow the protocols below:

1. Immediately isolate from other students and minimize exposure to staff.
2. Whenever possible, cover the student's nose and mouth with a mask or cloth face covering and accompany the student to the designated isolation room.
3. A staff member must alert the program nurse. The nurse will then properly assess the student in the isolation room to determine if the student should remain in the isolation room with a staff member until a parent or guardian arrives for pickup.
4. Contact the student's parents and send home as soon as possible.
5. Follow the program's plan for the transportation of a student who has developed symptoms and who relies on program transportation.
6. If the nurse determines the student is experiencing severe symptoms and is in need of emergency care, the nurse will immediately call 911 and remain with the student until EMS arrives.

(6) Custodial staff should wait 24 hours before cleaning and disinfecting to minimize potential for other employees being exposed to respiratory droplets. If waiting 24 hours is not feasible, wait as long as possible. During this waiting period, open outside doors and windows to increase air circulation in these areas. Custodial staff should follow the CDC cleaning and disinfection recommendations for cleaning the exposed locations.

Protocol if staff or student is diagnosed.
Sick students or employees who are COVID-19 positive or symptomatic and presumed to have COVID-19 must not return until they have met the criteria for discontinuing home isolation and have consulted with a healthcare provider. Program leaders will determine the date of symptom onset for the student/staff. Program leaders will identify if the student/staff attended/worked at the program while symptomatic or during the two days before symptoms began and also determine who had close contact with the student/staff at the program during those days (staff and other children).

1. If the individual tests positive for COVID-19 but is asymptomatic, isolation may be discontinued when at least 14 days have passed from the date of the positive test, as long as the individual remains asymptomatic. For example, if the individual was tested on April 1, isolation may be discontinued on or after April 15.

E. Notifying Required Parties: In the event that a program experiences an exposure, BICO programs must notify the following parties.

1. Staff members and families about exposure while maintaining strict confidentiality.
2. Local board of health if a student or staff is COVID-19 positive (the BICO COVID19 point person will notify the local BOH while adhering to the Public Health Recommendations for Community-Related Exposure).

Proposed Transition Process
Parent letter sent with details of the date and time students will return
All protocols will be clearly communicated and parents will need to sign off that they have read and agree to them.
Teachers will offer phone calls, remote sessions and emails to answer any student-specific questions.
Support material including social stories, videos and lessons will be available to address safety and sanitation precautions
(ex. Open house with staggered scheduled times for students, Virtual tours, pre-return meetings)

Open House:
- A staggered schedule will be prepared to minimize the number of people in the building
- If preferred, staff will offer video conferencing with parents and students
- Staff and visitors will be wearing appropriate PPE to ensure the safety of all parties involved. The PPE will include: gloves, masks, face shields, and other appropriate PPE.
- Following visits, high touch surfaces will be sanitized.
Notification Process: In the event that one of our school locations/programs needs to move from one model to another we will notify:

**Families:** Program Director - Phone Call  
Executive Director - Email / Letter  
**Sending District Representatives:** Director of Student Services - Phone contact with follow up letter  
**Staff:** Program Director - Email and/or phone calls

**Technology Needs:**  
Chromebooks and instructional materials were delivered to students upon the initial closure in March to families that needed them to access the curriculum and virtual classes and therapy sessions. Students are expected to return to school with their Chromebooks. In the event that we have to revert back to remote learning, accommodations will be made to deliver Chromebooks to students who will need them at home.

**COVID-19 Response Team:** Program Director, Director of Student Services: Julie O’Connor, Lead Nurse: Dianne Croteau, Executive Director: Jeanne Sullivan
In Person Learning Template

Program Name: EDLP
Program Grade Level: 3-6

Program Location:
Jordan Jackson Elementary School
255 East St. Mansfield, MA

Number of Students Served: 6
Number of Full time Staff: 4
Number of Itinerant Staff: 5 (alternating)

Description of Program:
The Elementary Developmental Learning Program provides a comprehensive program for elementary students with multiple physical, intellectual, neurological, and communication impairments.

Emphasis is placed upon sensory-based learning, movement, total communication, and adaptive technology. Therapist's activities are integrated into students' daily classroom routines. The program incorporates assistive technology, multi-sensory instruction designed to foster participation, awareness, and self-determination.

Environmental structure and positive behavioral supports are individualized for students to assist in processing and communicating information. Students require structured teaching of social protocol. Academics are individualized and focus on maximizing students' strengths.

RELATED SERVICES: Students may have daily medical needs that require care by a classroom nurse. Direct speech therapy, occupational therapy, and physical therapy are provided per each student's IEP. Therapists also provide staff consultation in order to embed therapeutic techniques into the daily classroom routine. Vision services are also available as needed.

Proposed Daily Schedule:
8:40 - 2:55
Arrival
Welcome Group
Individual work on IEP goals/objectives
Circle Time
Literacy
Play Time
Lunch
Unique Curriculum Whole Group
Read Aloud
Goodbye Group
Dismissal

***Individual Therapies are scheduled throughout each student's day dependent on IEP service delivery
Due to the medical and sensory needs of our students, some students cannot tolerate wearing a mask. For those students who can tolerate wearing one, mask breaks will be provided at least once per hour.

**Student Assessment/Screening timeline**
Staff and therapists will assess any regression on IEP goals since the students began in remote learning. They will collect and analyze data in order to determine current performance level on all goals and develop a plan to increase functioning above baseline.

**Sample Classroom Design:** (pictures or drawing)

![Sample Classroom Design](image)

**Lunch and Snack Protocols:**
Our students primarily receive their nutrition through g-tube feeds by the classroom nurse. Health and safety protocols will occur before and after each student is fed. Our Occupational Therapist also assists in feeding students who are working on textures. She will also follow all health and safety protocols. Students will be 6 feet apart at all times during feedings. Tables and desks will be sanitized before and after. Staff will wear PPE for assisting with feeding. BICO Programs must follow the food safety guidelines below.

1. Whenever possible, student's snacks must be pre-packaged or ready to serve in individual portions to minimize handling and preparation.
2. To minimize potential spread of infection and to promote physical distancing, cafeterias and group dining rooms must be avoided.
3. Multiple students shall not use the same serving or eating utensils.
4. Sinks used for food preparation must not be used for any other purposes.
5. Staff must ensure students wash hands prior to and immediately after eating.
6. Staff must wash their hands before preparing food and after helping students to eat.
7. Tables, chairs, and trays used for meals need to be cleaned and sanitized before and after use.
(8) All food contact surfaces, equipment, and utensils used for the preparation, packaging, or handling of food products must be washed, rinsed, and sanitized before each use. Additionally, programs must frequently clean non-food contact surfaces, such as doorknobs, tabletops, and chairs. Use sanitizers approved by the EPA for use against COVID-19 and for food-contact surfaces.

(9) When disinfecting for coronavirus, EPA recommends following the product label use directions for enveloped viruses, as indicated by the approved emerging viral pathogen claim on the master label.

(10) Staff must be prepared to provide hands-on assistance to students with special needs for activities of daily living such as feeding. To protect themselves, staff who care for students requiring hands-on assistance for routine care activities, including feeding, and other direct contact activities must wear a long-sleeved, button down, oversized shirt over their clothing and wear long hair up or tied back during all activities requiring direct contact with a student. Staff must change outer clothing if body fluids from the student are present. Staff must change the student’s clothing if body fluids are present. Soiled clothing must be placed in a plastic bag until it can be sent home with the child to be washed.

**Restraint Protocols:**
Restraints do not occur in this program due to the absence of unsafe behaviors.

**Toileting / Changing Protocols:**
Staff must practice stringent hygiene and infection control practices to keep themselves and students healthy and safe.

1. Staff must wear a long-sleeved, button down, oversized shirt over their clothing and wear long hair up or tied back during all activities that may expose staff to bodily fluids.
2. Staff must change outer clothing if body fluids from a student come into contact with the clothing.
3. Staff must change the student’s clothing if body fluids come into contact with the clothing.
4. Soiled clothing must be placed in a sealed plastic bag or container until it can be sent home to be washed.
5. All staff must follow safe and sanitary toileting/diaper changing procedures. Staff must wear a mask, clothing covering (e.g., an oversized button-down, long sleeved shirt, etc.), and eye protection. Staff with long hair must tie their hair back so it is off the collar and away from the reach of the student.

Procedures must be posted in all toileting/diaper changing areas, and must include:

(a) Prepare (includes wearing PPE, gathering all supplies, washing hands, and putting on gloves).
(b) Clean the child.
(c) Remove trash (soiled diaper, wipes, and gloves).
(d) Put on clean gloves.
(e) Replace diaper.
(f) Wash child’s hands.
(g) Clean up diapering station.
(h) Remove and dispose of gloves.
(i) Wash hands.

6. During changing and feeding activities, staff must wear a mask, clothing covering (e.g., an oversized button-down, long sleeved shirt, etc.), and eye protection. Staff with long hair must tie their hair back so it is off the collar and away from the reach of the student.
   a. Staff must thoroughly wash their hands (regardless of glove use), neck, and any other areas touched by a student’s bodily fluids.
   b. Staff must change the student’s clothes if bodily fluids are on the student’s clothing. Staff must then change the button-down shirt, if bodily fluids are on it, and wash their hands again.
(c) Contaminated clothes must be placed in a sealed plastic bag or container and then washed in a washing machine. 
(d) It is recommended that staff and students have multiple changes of clothing on hand each day. 
Surface areas will be sanitized and disinfected after each change. Hand Washing procedures will be followed by staff. 
Handwashing: 
BICO ensures that each program has adequate supplies to promote effective hygiene behaviors. 
Programs must have the following materials and supplies: 
(1) Handwashing facilities with soap and water must be readily accessible to all students and staff. Hand washing instructions are posted near every hand washing sink and where they can easily be seen by students and staff. 
(2) Hand sanitizer or hand sanitizing wipes with at least 60% alcohol may be utilized at times when hand washing is not available. Hand sanitizer must be stored securely and used only under supervision of staff. Staff is responsible for teaching students proper use. 
(3) Hand hygiene stations are set up at the entrance of the programs, so that students can clean their hands before they enter. If a sink with soap and water is not available, hand sanitizer or hand sanitizing wipes with at least 60% alcohol are provided at program entrance locations. If hand sanitizer use is not appropriate or not approved and there is no soap and water located at the entrance, students are instructed to go to the nearest handwashing station upon entry. The use of hand sanitizer is supervised by staff. 
(4) If pens are required for visitor sign in, they will be disinfected between each use. 

B. When to Wash Hands: BICO Students and staff must wash their hands or use hand sanitizer often, making sure to wash all surfaces of their hands (e.g., front and back, wrists, between fingers). Staff and students must be perform hand washing with soap and water for at least 20 seconds when the following criteria are met: 
(1) Upon entry into and exit from program space; 
(2) When coming in to the program space from outside activities; 
(3) Before and after eating; 
(4) After using the restroom; 
(5) After sneezing, coughing or nose blowing; 
(6) After toileting and/or changing students; 
(7) Before and after handling food; 
(8) After touching or cleaning surfaces that may be contaminated; 
(9) After using any shared equipment like toys, computer keyboards, mouse, copy machines, etc; 
(10) After assisting students with handwashing; 
(11) Before and after administration of medication; 
(12) Before entering vehicles used for transportation of students; 
(13) After contact with facemask or cloth face covering; 
(14) Before and after changes of gloves. 

Toilet/ Restrooms: 
Sanitized and wiped down by the person utilizing the restroom following use. 
One (1) person in the restroom at a time. 

Cleaning and Disinfecting Schedule (Include who is responsible): 
All staff will clean and disinfect student work areas at the start and end of the day. 
Teacher will be responsible for overseeing cleaning and disinfecting of the door handles, faucets and other frequently touched areas regularly throughout the day. 
Each staff member will clean and disinfect student work stations at the end of each session. 
Each Staff member will clean and disinfect sensory/ break areas after each use. 
Staff will clean and disinfect the changing table, sink, and toilet area after each use. 
Check list will be posted with step by step instructions.
Teacher will be responsible for signing off on the checklist at the end of each day. School custodial staff will clean each classroom at the end of each school day.

**Sign In/Out Procedure:**
Staff will sign in upon arrival and sign out at the end of the day in the classroom.

**Student Entry / Exit Procedure (Include - Use of sanitizer, handwashing, masks....)**
A staff member will be stationed (wearing PPE) every six feet, at the drop off area, door, hallway and classroom adjusting the flow of students to allow for social distancing for both arrival and dismissal. Students that are able will wear face masks except during mask breaks. Staff will bring our students into the classroom and put their backpacks/materials in a designated space which will be separate from other students' items.
At dismissal the staff member stationed at the pick up area will communicate which student will be dismissed from class. Only one student at a time will be allowed out in six feet intervals.
Staff and students will use hand sanitizer upon entry and prior to dismissal from the school building.

**Student / Staff Screening & Monitoring Process (See BICO Screening Instrument)**
All BICO staff, students, parents/guardians, and any individuals seeking entry into the program spaces must be directed to self-screen at home, prior to coming to the program each day.
(a) Self-screening shall include checking temperature (temperature of 100.0°F or above is considered a fever), and checking for symptoms including fever, cough, shortness of breath, gastrointestinal symptoms, abdominal pain, unexplained rash, new loss of taste/smell, muscle aches, or any other symptoms that feel like a cold/flu. Anyone with a fever of 100.0°F or above or any other signs of illness will not be permitted to enter the program.
(b) Parents and staff must sign written attestations daily regarding any household contacts with COVID-19, symptoms (e.g, fever, sore throat, cough, shortness of breath, loss of smell or taste, or diarrhea), or if they have given students medicine to lower a fever.
(c) Individuals who decline to complete the screening questionnaire will not be permitted to enter the program space.

**B. Regular Monitoring:** Staff must actively monitor students throughout the day for symptoms of any kind, including fever, cough, shortness of breath, diarrhea, nausea, and vomiting, abdominal pain, and unexplained rash. Students who appear ill or are exhibiting signs of illness must be referred to the nurse and be separated from the larger group and isolated until able to leave the facility. Program nurses have non-contact thermometers on site to check temperatures if a student is suspected of having a fever (temperature above 100°F).

**If any student or staff appears to have severe symptoms, the program nurse must call emergency services immediately.** Before transferring to a medical facility, the nurse must notify the transfer team and medical facility if the individual is suspected to have COVID-19. Severe symptoms include the following: extreme difficulty breathing (i.e., not being able to speak without gasping for air), bluish lips or face, persistent pain or pressure in the chest, severe persistent dizziness or lightheadedness, new confusion or inability to rouse someone, or new seizure or seizures that won’t stop.

**Nursing Protocols for students who are ill (not experiencing symptoms)**
If a student becomes ill with symptoms unrelated to COVID19, the nurse will assess per illness protocol.
The student will then remain in the health office until:
(1) The student is well enough to return to class.
(2) The student will be dismissed to parent/guardian.

**Nursing Protocols for students experiencing symptoms:**
**Include Quarantine Space & notification of family**
If a student becomes symptomatic, programs must follow the protocols below:
(1) Immediately isolate from other students and minimize exposure to staff.
(2) Whenever possible, cover the student’s nose and mouth with a mask or cloth face covering and accompany the student to the designated isolation room.
(3) A staff member must alert the program nurse. The nurse will then properly assess the student in the isolation room to determine if the student should remain in the isolation room with a staff member until a parent or guardian arrives for pickup.
(3) Contact the student’s parents and send home as soon as possible.
(4) Follow the program’s plan for the transportation of a student who has developed symptoms and who relies on program transportation.
(5) If the nurse determines the student is experiencing severe symptoms and is in need of emergency care, the nurse will immediately call 911 and remain with the student until EMS arrives.
(6) Custodial staff should wait 24 hours before cleaning and disinfecting to minimize potential for other employees being exposed to respiratory droplets. If waiting 24 hours is not feasible, wait as long as possible. During this waiting period, open outside doors and windows to increase air circulation in these areas. Custodial staff should follow the CDC cleaning and disinfection recommendations for cleaning the exposed locations.

Protocol if staff or student is diagnosed.
Sick students or employees who are COVID-19 positive or symptomatic and presumed to have COVID-19 must not return until they have met the criteria for discontinuing home isolation and have consulted with a health care provider. Program leaders will determine the date of symptom onset for the student/staff. Program leaders will identify if the student/staff attended/worked at the program while symptomatic or during the two days before symptoms began and also determine who had close contact with the student/staff at the program during those days (staff and other children).
(1) If the individual tests positive for COVID-19 but is asymptomatic, isolation may be discontinued when at least 14 days have passed from the date of the positive test, as long as the individual remains asymptomatic. For example, if the individual was tested on April 1, isolation may be discontinued on or after April 15.

E. Notifying Required Parties: In the event that a program experiences an exposure, BICO programs must notify the following parties.
(1) Staff members and families about exposure while maintaining strict confidentiality.
(2) Local board of health if a student or staff is COVID-19 positive (the BICO COVID19 point person will notify the local BOH while adhering to the Public Health Recommendations for Community-Related Exposure).

Proposed Transition Process
Parent letter sent with details of the date and time students will return
All protocols will be clearly communicated and parents will need to sign off that they have read and agree to them.
Teachers will offer phone calls, remote sessions and emails to answer any student specific questions.
Support material including social stories, videos and lessons will be available to address safety and sanitation precautions
(ex. Open house with staggered scheduled times for students, Virtual tours, pre-return meetings)
Open House:
• A staggered schedule will be prepared to minimize the number of people in the building
• If preferred, staff will offer video conferencing with parents and students
• Staff and visitors will be wearing appropriate PPE to ensure the safety of all parties involved. The PPE will include: gloves, masks, face shields, and other appropriate PPE.
• Following visits, high touch surfaces will be sanitized.

Notification Process: In the event that one of our school locations/programs needs to move from one model to another we will notify:
Families: Program Director - Phone Call
Executive Director - Email / Letter
Sending District Representatives: Director of Student Services-Phone contact with follow up letter
Staff: Program Director - Email and/or phone calls

Technology Needs:
Chromebooks and instructional materials were delivered to students upon the initial closure in March to families that needed them to access the curriculum and virtual classes and therapy sessions. Students are expected to return to school with their Chromebooks. In the event that we have to revert back to remote learning, accommodations will be made to deliver Chromebooks to students who will need them at home.

COVID-19 Response Team: Program Director, Director of Student Services: Julie O'Connor, Lead Nurse: Dianne Croteau, Executive Director: Jeanne Sullivan
In-Person Learning Template

Program Name: Life Roles Education Program
Program Grade Level: 5-8

Program Location:
215 West Main Street
Norton, MA 02766

Number of Students Served: 7
Number of Full time Staff: 5
Number of Itinerant Staff: 6 (alternating)

Description of Program:
The Life Roles Education Program (LREP) provides educational and therapeutic services to middle school students (ages 12-15) who may have intellectual and/or neurological impairments, multiple disabilities, and/or Autism Spectrum Disorder.

LREP provides classroom instruction that is aligned with the Massachusetts Department of Education Common Core Standards at a level accessible to each student. In addition, programming also includes instruction in self-help as well as social and communication skills that will prepare students for their transition to high school. Therapy services are integrated into all classroom and community experiences. Students attending the 10-month program component have access to Extended School Year services as determined by their IEP Team.

Students' physical, communication and medical needs can also be addressed in the LREP Program. Multi-sensory instruction, assistive technology, and total communication support are integral to each student's program. Physical and Occupational Therapies are integrated into daily classroom routines to maximize therapeutic benefits. A multi-disciplinary approach is used to foster participation, awareness, and self-determination through all areas of need.
## Proposed Daily Schedule*

<table>
<thead>
<tr>
<th>Time</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
</tr>
</thead>
<tbody>
<tr>
<td>8:20-8:45</td>
<td>Arrival/centers</td>
<td>Arrival/centers</td>
<td>Arrival/centers</td>
<td>Arrival/centers</td>
<td>Arrival/centers</td>
</tr>
<tr>
<td>8:45-9:15</td>
<td>Meeting</td>
<td>Meeting</td>
<td>Meeting</td>
<td>Meeting</td>
<td>Meeting</td>
</tr>
<tr>
<td>9:15-9:30</td>
<td>1:1 work</td>
<td>1:1 work</td>
<td>1:1 work</td>
<td>1:1 work</td>
<td>1:1 work</td>
</tr>
<tr>
<td>9:30-10:00</td>
<td>1: work</td>
<td>1:1 work</td>
<td>1:1 work</td>
<td>1:1 work</td>
<td>1:1 work</td>
</tr>
<tr>
<td>10:00-10:30</td>
<td>Snack/ADLS</td>
<td>Snack/ADLS</td>
<td>Snack/ADLS</td>
<td>Snack/ADLS</td>
<td>Snack/ADLS</td>
</tr>
<tr>
<td>10:30-11:00</td>
<td>APE?</td>
<td>Social skills</td>
<td>Math</td>
<td>ELA</td>
<td>N2you/current events</td>
</tr>
<tr>
<td>11:00-11:30</td>
<td>Group learning</td>
<td>Lunch</td>
<td>Social skills</td>
<td>Group learning</td>
<td>Cooking group</td>
</tr>
<tr>
<td>11:30-11:45</td>
<td>Movement/sensory break</td>
<td>Swim?</td>
<td>Movement/sensory break</td>
<td>Movement/sensory break</td>
<td></td>
</tr>
<tr>
<td>11:45-12:30</td>
<td>Lunch</td>
<td>Lunch</td>
<td>Lunch</td>
<td>Lunch</td>
<td>Lunch</td>
</tr>
<tr>
<td>12:30-1:00</td>
<td>1:1 work</td>
<td>1:1 work</td>
<td>1:1 work</td>
<td>1:1 work</td>
<td>1:1 work</td>
</tr>
<tr>
<td>1:00-1:30</td>
<td>Vocational</td>
<td>Vocational</td>
<td>Vocational</td>
<td>Vocational</td>
<td>Vocational</td>
</tr>
<tr>
<td>1:30-2:00</td>
<td>Read aloud/leisure</td>
<td>Read aloud/leisure</td>
<td>Read aloud/leisure</td>
<td>Read aloud/leisure</td>
<td>Read aloud/leisure</td>
</tr>
<tr>
<td>2:00-2:30</td>
<td>Goodbye Group</td>
<td>Goodbye Group</td>
<td>Goodbye Group</td>
<td>Goodbye Group</td>
<td>Goodbye Group</td>
</tr>
</tbody>
</table>

*Individual Therapies are scheduled throughout each student's day dependent on IEP service delivery.

*Due to the medical and sensory needs of our students, some students cannot tolerate wearing a mask. For those students who can tolerate wearing one, mask breaks will be provided at least once per hour.

### Student Assessment/Screening timeline

Staff and therapists will assess any regression on IEP goals since the students began in remote learning. They will collect and analyze data in order to determine current performance level on all goals and develop a plan to increase functioning beyond baseline.
Lunch and Snack Protocols:
One staff member will get lunches from the cafeteria and bring them to the classroom. Students will eat in classrooms and be at least 6 feet apart at all times. Tables and desks will be sanitized before and after. Staff will wear PPE for assisting with feeding.
BICO Programs must follow the food safety guidelines below.

1. Whenever possible, student’s snacks must be pre-packaged or ready to serve in individual portions to minimize handling and preparation.
(2) To minimize potential spread of infection and to promote physical distancing, cafeterias and group dining rooms must be avoided.
(3) Multiple students shall not use the same serving or eating utensils.
(4) Sinks used for food preparation must not be used for any other purposes.
(5) Staff must ensure students wash hands prior to and immediately after eating.
(6) Staff must wash their hands before preparing food and after helping students to eat. (7) Tables, chairs, and trays used for meals need to be cleaned and sanitized before and after use.
(8) All food contact surfaces, equipment, and utensils used for the preparation, packaging, or handling of food products must be washed, rinsed, and sanitized before each use. Additionally, programs must frequently clean non-food contact surfaces, such as doorknobs, tabletops, and chairs. Use sanitizers approved by the EPA for use against COVID-19 and for food-contact surfaces.
(9) When disinfecting for coronavirus, EPA recommends following the product label use directions for enveloped viruses, as indicated by the approved emerging viral pathogen claim on the master label.
(10) Staff must be prepared to provide hands-on assistance to students with special needs for activities of daily living such as feeding. To protect themselves, staff who care for students requiring hands-on assistance for routine care activities, including feeding, and other direct contact activities must wear a long-sleeved, button down, oversized shirt over their clothing and wear long hair up or tied back during all activities requiring direct contact with a student. Staff must change outer clothing if body fluids from the student are present. Staff must change the student’s clothing if body fluids are present. Soiled clothing must be placed in a plastic bag until it can be sent home with the child to be washed.

Restraint Protocols:
Bi-County Collaborative trains and prepares program staff to work with students with diverse needs. Through clinical consultation offered by clinical psychologists and psychiatrists, and the work of Board Certified Behavior Analysts (BCBAs), school adjustment counselors, therapists and special education teachers, our programs utilize positive behavior support plans, therapeutic interventions, and instructional strategies to respond to crisis situations.

Due to the nature of the disabilities of our students, they can become agitated, dis-regulated and sometimes out of control. Students may make threats, attempt to hurt themselves or others. The safety of all BICO students and staff is our utmost priority and all incidents are taken seriously. Staff follow Crisis Prevention Intervention procedures to support students in these situations.

When a student is acting in such a way as to present imminent danger to themselves or to others, BICO Program Staff implement Non-Violent Crisis Prevention Intervention strategies. BICO has staff who are certified trainers who provide training in Non-Violent Crisis Prevention Intervention (CPI) on an ongoing basis. For a complete description of BICO’s Crisis Prevention Intervention Policy and Procedures please see the Employee and Student Manual for Health and Safety posted on our website at www.bicounty.org.

Due to an overabundance of caution, as a result of Covid-19, we will continue to emphasize verbal deescalation techniques to help our students when they become dysregulated. However, when such a time arises for physical interventions, staff will take all possible precautions to promote the safety and wellbeing of students and staff alike.

If a student is acting in an unsafe manner, and verbal interventions prove unsuccessful, staff will intervene. When intervening, staff will be wearing appropriate PPE to ensure the safety of all parties involved. The PPE will include: gloves, masks, face shields, and other appropriate PPE. If staff are unable to deescalate a student within a reasonable amount of time, an administrator will contact the parent/guardian and ask them to pick their child up from school.
Three-sided time-out areas will be used to assist in the de-escalation of students. Staff will don new PPE if physical intervention is necessary to maintain safety. The fewest number of staff needed to maintain the safety of the student will respond to minimize the number of individuals in close proximity to the student. Gloves are to be made available for staff to carry. A staff member in each classroom should be designated daily as the initial point person--quick access to PPE. Prior to any restraint, staff should ensure they are wearing gloves, masks, and face shields. Masks and face shields to be worn if there is a risk of bodily fluids e.g., from spitting and/or self-injurious behaviour. Following physical contacts with others during a restraint, remove and dispose of gloves immediately. Avoid touching your face and limit contact with hard surfaces before immediately washing hands and arms, if bare. Keep hands clear of the eyes, mouth and nose of yourself and others during instances of physical restraint.

**Toileting / Changing Protocols:**
Staff must practice stringent hygiene and infection control practices to keep themselves and students healthy and safe.

1. Staff must wear a long-sleeved, button down, oversized shirt over their clothing and wear long hair up or tied back during all activities that may expose staff to bodily fluids.
2. Staff must change outer clothing if body fluids from a student come into contact with the clothing.
3. Staff must change the student’s clothing if body fluids come into contact with the clothing.
4. Soiled clothing must be placed in a sealed plastic bag or container until it can be sent home to be washed.
5. All staff must follow safe and sanitary toileting/diaper changing procedures. Staff must wear a mask, clothing covering (e.g., an oversized button-down, long sleeved shirt, etc.), and eye protection. Staff with long hair must tie their hair back so it is off the collar and away from the reach of the student.

Procedures must be posted in all toileting/diaper changing areas, and must include:

   a. Prepare (includes wearing PPE, gathering all supplies, washing hands, and putting on gloves).
   b. Clean the child.
   c. Remove trash (soiled diaper, wipes, and gloves).
   d. Put on clean gloves.
   e. Replace diaper.
   f. Wash child’s hands.
   g. Clean up diapering station.
   h. Remove and dispose of gloves.
   i. Wash hands.

6. During changing and feeding activities, staff must wear a mask, clothing covering (e.g., an oversized button-down, long sleeved shirt, etc.), and eye protection. Staff with long hair must tie their hair back so it is off the collar and away from the reach of the student.

   a. Staff must thoroughly wash their hands (regardless of glove use), neck, and any other areas touched by a student’s bodily fluids.
   b. Staff must change the student’s clothes if bodily fluids are on the student’s clothing. Staff must then change the button-down shirt, if bodily fluids are on it, and wash their hands again.
   c. Contaminated clothes must be placed in a sealed plastic bag or container and then washed in a washing machine.
   d. It is recommended that staff and students have multiple changes of clothing on hand each day.

Surface areas will be sanitized and disinfected after each change. Hand Washing procedures will be followed by staff.

**Handwashing:**

BICO ensures that each program has adequate supplies to promote effective hygiene behaviors.

Programs must have the following materials and supplies:
(1) Handwashing facilities with soap and water must be readily accessible to all students and staff. Hand washing instructions are posted near every hand washing sink and where they can easily be seen by students and staff.

(2) Hand sanitizer or hand sanitizing wipes with at least 60% alcohol may be utilized at times when hand washing is not available. Hand sanitizer must be stored securely and used only under supervision of staff. Staff is responsible for teaching students proper use.

(3) Hand hygiene stations are set up at the entrance of the programs, so that students can clean their hands before they enter. If a sink with soap and water is not available, hand sanitizer or hand sanitizing wipes with at least 60% alcohol are provided at program entrance locations. If hand sanitizer use is not appropriate or not approved and there is no soap and water located at the entrance, students are instructed to go to the nearest handwashing station upon entry. The use of hand sanitizer is supervised by staff.

(4) If pens are required for visitor sign in, they will be disinfected between each use.

B. When to Wash Hands: BICO Students and staff must wash their hands or use hand sanitizer often, making sure to wash all surfaces of their hands (e.g., front and back, wrists, between fingers). Staff and students must be perform hand washing with soap and water for at least 20 seconds when the following criteria are met:

(1) Upon entry into and exit from program space;
(2) When coming in to the program space from outside activities;
(3) Before and after eating;
(4) After using the restroom;
(5) After sneezing, coughing or nose blowing;
(6) After toileting and/or changing students;
(7) Before and after handling food;
(8) After touching or cleaning surfaces that may be contaminated;
(9) After using any shared equipment like toys, computer keyboards, mouse, copy machines, etc;
(10) After assisting students with handwashing;
(11) Before and after administration of medication;
(12) Before entering vehicles used for transportation of students;
(13) After contact with facemask or cloth face covering;
(14) Before and after changes of gloves.

Toilet/Restrooms:
Sanitized and wiped down by the person utilizing the restroom following use.
One (1) person in the restroom at a time.

Cleaning and Disinfecting Schedule (Include who is responsible):
All staff will clean and disinfect student work areas at the start and end of the day.
Teacher will be responsible for overseeing cleaning and disinfecting of the door handles, faucets and other frequently touched areas regularly throughout the day.
Each staff member will clean and disinfect student work stations at the end of each session.
Each staff member will clean and disinfect sensory/break areas after each use.
Staff will clean and disinfect the changing table, sink, and toilet area after each use.
Checklists will be posted with step by step instructions.
Teacher will be responsible for signing off on the checklist at the end of each day.
School custodial staff will clean each classroom at the end of each school day.

Sign In/Out Procedure:
Staff/Visitors:
- Signs are posted on the front door.
- The building policy regarding COVID procedures is posted at the sign-in table.
- Staff and visitors will sign in and out in the front foyer before entering the building.
Students
- Student attendance will be completed by classroom staff.
- When a parent needs to pick up their child early from school, we are requesting a phone call prior to arriving so that we are prepared to dismiss in an efficient and safe manner.

Student Entry / Exit Procedure (Include - Use of sanitizer, handwashing, masks...)
Staff members will be stationed (wearing PPE) at the drop-off point in the rear of the building to support students and allow for social distancing during both arrival and dismissal. Students that are able will wear face masks, except during mask breaks. Staff will bring our students into the classroom and put their backpacks/materials in a designated space which will be separate from other students' items. At dismissal, the students will exit the classroom one at a time, ensuring that adequate staffing is available to support a socially distanced transition. Only one student at a time will be allowed out in six-foot intervals. Staff and students will use hand sanitizer upon entry and prior to dismissal from the school building.

Student / Staff Screening & Monitoring Process (See BICO Screening Instrument)
All BICO staff, students, parents/guardians, and any individuals seeking entry into the program spaces must be directed to self-screen at home, prior to coming to the program each day.
(a) Self-screening shall include checking temperature (temperature of 100.0°F or above is considered a fever), and checking for symptoms including fever, cough, shortness of breath, gastrointestinal symptoms, abdominal pain, unexplained rash, new loss of taste/smell, muscle aches, or any other symptoms that feel like a cold/flu. Anyone with a fever of 100.0°F or above or any other signs of illness will not be permitted to enter the program.
(b) Parents and staff must sign written attestations daily regarding any household contacts with COVID-19, symptoms (e.g., fever, sore throat, cough, shortness of breath, loss of smell or taste, or diarrhea), or if they have given students medicine to lower a fever.
(c) Individuals who decline to complete the screening questionnaire will not be permitted to enter the program space.

B. Regular Monitoring: Staff must actively monitor students throughout the day for symptoms of any kind, including fever, cough, shortness of breath, diarrhea, nausea, and vomiting, abdominal pain, and unexplained rash. Students who appear ill or are exhibiting signs of illness must be referred to the nurse and be separated from the larger group and isolated until able to leave the facility. Program nurses have non-contact thermometers on site to check temperatures if a student is suspected of having a fever (temperature above 100°F).

**If any student or staff appears to have severe symptoms, the program nurse must call emergency services immediately.** Before transferring to a medical facility, the nurse must notify the transfer team and medical facility if the individual is suspected to have COVID-19. Severe symptoms include the following: extreme difficulty breathing (i.e. not being able to speak without gasping for air), bluish lips or face, persistent pain or pressure in the chest, severe persistent dizziness or lightheadedness, new confusion or inability to rouse someone, or new seizure or seizures that won’t stop.

Nursing Protocols for students who are ill (not experiencing symptoms)
If a student becomes ill with symptoms unrelated to COVID-19, the nurse will assess per illness protocol. The student will then remain in the health office until:
(1) The student is well enough to return to class.
(2) The student will be dismissed to parent/guardian.

Nursing Protocols for students experiencing symptoms:
***Include Quarantine Space & notification of family
If a student becomes symptomatic, programs must follow the protocols below:
(1) Immediately isolate from other students and minimize exposure to staff.
(2) Whenever possible, cover the student’s nose and mouth with a mask or cloth face covering and accompany the student to the designated isolation room.

(3) A staff member must alert the program nurse. The nurse will then properly assess the student in the isolation room to determine if the student should remain in the isolation room with a staff member until a parent or guardian arrives for pickup.

(3) Contact the student’s parents and send home as soon as possible.

(4) Follow the program’s plan for the transportation of a student who has developed symptoms and who relies on program transportation.

(5) If the nurse determines the student is experiencing severe symptoms and is in need of emergency care, the nurse will immediately call 911 and remain with the student until EMS arrives.

(6) Custodial staff should wait 24 hours before cleaning and disinfecting to minimize potential for other employees being exposed to respiratory droplets. If waiting 24 hours is not feasible, wait as long as possible. During this waiting period, open outside doors and windows to increase air circulation in these areas. Custodial staff should follow the CDC cleaning and disinfection recommendations for cleaning the exposed locations.

Protocol if staff or student is diagnosed.

Sick students or employees who are COVID-19 positive or symptomatic and presumed to have COVID-19 must not return until they have met the criteria for discontinuing home isolation and have consulted with a health care provider. Program leaders will determine the date of symptom onset for the student/staff. Program leaders will identify if the student/staff attended/worked at the program while symptomatic or during the two days before symptoms began and also determine who had close contact with the student/staff at the program during those days (staff and other children).

(1) If the individual tests positive for COVID-19 but is asymptomatic, isolation may be discontinued when at least 14 days have passed from the date of the positive test, as long as the individual remains asymptomatic. For example, if the individual was tested on April 1, isolation may be discontinued on or after April 15.

E. Notifying Required Parties: In the event that a program experiences an exposure, BICO programs must notify the following parties.

(1) Staff members and families about exposure while maintaining strict confidentiality.

(2) Local board of health if a student or staff is COVID-19 positive (the BICO COVID19 point person will notify the local BOH while adhering to the Public Health Recommendations for Community-Related Exposure).

Proposed Transition Process

Parent letter sent with details of the date and time students will return. All protocols will be clearly communicated and parents will need to sign off that they have read and agree to them.

Teachers will offer phone calls, remote sessions, and emails to answer any student specific questions. Support materials such as social stories, videos, and lessons will be available to address safety and sanitation precautions.

Notification Process: In the event that one of our school locations/programs needs to move from one model to another we will notify:

Families: Program Director - Phone Call
Executive Director - Email / Letter

Sending District Representatives: Director of Student Services - Phone contact with follow up letter

Staff: Program Director - Email and/or phone calls
Technology Needs:
Chromebooks and instructional materials were delivered to students upon the initial closure in March to families that needed them to access the curriculum and virtual classes and therapy sessions. Students are expected to return to school with their Chromebooks. In the event that we have to revert back to remote learning, accommodations will be made to deliver Chromebooks to students who will need them at home.

COVID-19 Response Team: Program Director: Jacob Richardson, Director of Student Services: Julie O'Connor, Lead Nurse: Dianne Croteau, Executive Director: Jeanne Sullivan
In Person Learning Template

Program Name: LREP KP
Program Grade Level: 7-10

Program Location:
King Philip Middle School
18 King Street
Norfolk, MA

Number of Students Served: 5
Number of Full time Staff: 4
Number of Itinerant Staff: 4 (alternating)

Description of Program:
The Life Roles Education Program (LREP) provides educational and therapeutic services to middle school students (ages 12-15) who may have intellectual and/or neurological impairments, multiple disabilities, and/or Autism Spectrum Disorder.

LREP provides classroom instruction that is aligned with the Massachusetts Department of Education Common Core Standards at a level accessible to each student. In addition, programming also includes instruction in self-help as well as social and communication skills that will prepare students for their transition to high school. Therapy services are integrated into all classroom and community experiences. Students attending the 10-month program component have access to Extended School Year services as determined by their IEP Team.

Students' physical, communication and medical needs can also be addressed in the LREP Program. Multi-sensory instruction, assistive technology, and total communication support are integral to each student's program. Physical and Occupational Therapies are integrated into daily classroom routines to maximize therapeutic benefits. A multi-disciplinary approach is used to foster participation, awareness, and self-determination through all areas of need.

RELATED SERVICES: Students may have daily medical needs that require care by a classroom nurse. Direct speech therapy, occupational therapy, and physical therapy are provided per each student's IEP. Therapists also provide staff consultation in order to embed therapeutic techniques into the daily classroom routine. Vision services are also available as needed.
### Proposed Daily Schedule:
8:15-2:40

<table>
<thead>
<tr>
<th>Time:</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
</tr>
</thead>
<tbody>
<tr>
<td>8:15-8:50 AM</td>
<td>Morning Routine</td>
<td>Morning Routine</td>
<td>Morning Hygiene w/</td>
<td>Morning Routine</td>
<td>Morning Hygiene w/</td>
</tr>
<tr>
<td></td>
<td>Hygiene w/ Icons</td>
<td>Hygiene w/ Icons</td>
<td>Icons Equipment</td>
<td>Hygiene w/ Icons</td>
<td>Icons Equipment</td>
</tr>
<tr>
<td></td>
<td>Equipment</td>
<td>Equipment</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8:50-9:25 AM</td>
<td>Morning Meeting</td>
<td>Morning Meeting</td>
<td>Morning Meeting</td>
<td>Morning Meeting</td>
<td>Morning Meeting</td>
</tr>
<tr>
<td>9:25-9:35</td>
<td>Snack time</td>
<td>Snack time</td>
<td>Snack time</td>
<td>Snack time</td>
<td>Snack time</td>
</tr>
<tr>
<td>9:35-10:15</td>
<td>Math</td>
<td>Vocabulary (body parts, personal)</td>
<td>Individual IEP objectives</td>
<td>Movement group</td>
<td>Individual IEP objectives</td>
</tr>
<tr>
<td>10:15-10:45</td>
<td>Reading</td>
<td>Social Studies</td>
<td>Math</td>
<td>Yes/No questions</td>
<td>Math</td>
</tr>
<tr>
<td>10:45-11:15</td>
<td>Vocabulary (Snappcore, AAC)</td>
<td>Math</td>
<td>Current Events</td>
<td>Math</td>
<td>Reading</td>
</tr>
<tr>
<td>11:15-12:00</td>
<td>Gym</td>
<td>Individual IEP objectives</td>
<td>Vocabulary (Academic)</td>
<td>Science</td>
<td>Gym</td>
</tr>
<tr>
<td>12:00-12:30</td>
<td>Lunch</td>
<td>Lunch</td>
<td>Lunch</td>
<td>Lunch</td>
<td>Lunch</td>
</tr>
<tr>
<td>12:35-1:15</td>
<td>Group learning</td>
<td>Reading</td>
<td>Group Learning</td>
<td>Reading</td>
<td>Current Events</td>
</tr>
<tr>
<td>1:15-2:10</td>
<td>Movement group</td>
<td>Science</td>
<td>Cooking</td>
<td>Group learning</td>
<td>Art</td>
</tr>
<tr>
<td>2:10-2:20</td>
<td>Individual IEP objectives</td>
<td>Classroom clean up</td>
<td>Classroom clean up</td>
<td>OT group</td>
<td>Classroom clean up</td>
</tr>
</tbody>
</table>

**Individual Therapies are scheduled throughout each student’s day dependent on IEP service delivery
**** Due to the medical and sensory needs of our students, some students cannot tolerate wearing a mask. For those students who can tolerate wearing one, mask breaks will be provided at least once per hour.
Student Assessment/Screening timeline
Staff and therapists will assess any regression on IEP goals since the students began in remote learning. They will collect and analyze data in order to determine current performance level on all goals and develop a plan to increase functioning above baseline.

Sample Classroom Design: (pictures or drawing)

Lunch and Snack Protocols:
Our students primarily receive their nutrition through g-tube feeds by the classroom nurse. Health and safety protocols will occur before and after each student is fed. Our Occupational Therapist also assists in feeding students who are working on textures. She will also follow all health and safety protocols. Students will be 6 feet apart at all times during feedings. Tables and desks will be sanitized before and after. Staff will wear PPE for assisting with feeding.
BICO Programs must follow the food safety guidelines below.

1. Whenever possible, student’s snacks must be pre-packaged or ready to serve in individual portions to minimize handling and preparation.
2. To minimize potential spread of infection and to promote physical distancing, cafeterias and group dining rooms must be avoided.
3. Multiple students shall not use the same serving or eating utensils.
4. Sinks used for food preparation must not be used for any other purposes.
5. Staff must ensure students wash hands prior to and immediately after eating.
6. Staff must wash their hands before preparing food and after helping students to eat. (7) Tables, chairs, and trays used for meals need to be cleaned and sanitized before and after use.
8. All food contact surfaces, equipment, and utensils used for the preparation, packaging, or handling of food products must be washed, rinsed, and sanitized before each use. Additionally, programs must frequently clean non-food contact surfaces, such as doorknobs, tabletops, and chairs. Use sanitizers approved by the EPA for use against COVID-19 and for food-contact surfaces.
9. When disinfecting for coronavirus, EPA recommends following the product label use directions for enveloped viruses, as indicated by the approved emerging viral pathogen claim on the master label.