

## Safe Return to In-Person Instruction and Continuity of Services Plan (ARP Act)



Entity ID	CTDS	LEA NAME
4243	070289000	Dysart Unified School District 89

How the LEA will maintain the health and safety of students, educators, and other staff and the extent to which it has adopted policies, and a description of any such policies, on each of the following safety recommendations established by the Centers for Disease Control and Prevention (CDC)

CDC Safety Recommendations	Has the LEA Adopted a Policy? (Y/N)	Describe LEA Policy: (Dysart has procedures for each item)
Universal and correct wearing of masks	N	Masks are not required for all staff, students, and visitors to all schools and campuses. Masks are provided upon request.
Modifying facilities to allow for physical distancing (e.g., use of cohorts/podding)	N	Extra furniture was moved out of classrooms and office areas to create more space. Drinking fountains are for water bottle filling only.
Handwashing and respiratory etiquette	N	Proper handwashing is encouraged as well as practicing good hygiene Hand sanitizer is available, including in hallways, offices, and classrooms.
Cleaning and maintaining healthy facilities, including improving ventilation	N	Daily air flush with outside air. Air scrubber technology installed in every air handler. Additional cleaning supplies available upon request.
Contact tracing in combination with isolation and quarantine, in collaboration with the State, local, territorial, or Tribal health departments	N	Any staff or student that tests positive for COVID-19 should isolate for a minimum of 5 days and end isolation when symptom free.
Diagnostic and screening testing	N	No. We ask staff and students to monitor any symptoms and take appropriate action if needed.
Efforts to provide vaccinations to school communities	N	Dysart partnered with the MCDPH several times in early 2021 to provide vaccinations for staff and community.
Appropriate accommodations for children with disabilities with respect to health and safety policies	N	Dysart follows all appropriate accommodations as well as all health plans in place as needed.
Coordination with State and local health officials	N	Dysart works closely with MCDPH and keeps up to date on all state and local health updates.

How the LEA will ensure continuity of services, including but not limited to services to address students' academic needs and students' and staff social, emotional, mental health, and other needs, which may include student health and food services

### How the LEA will Ensure Continuity of Services?

Dysart partners with staff, students, parents, and community to ensure the continuity of services addressing student academic needs, student and staff other needs including mental health support, health services support, and food services (students). This is completed through various forums including Governing Board Meetings Superintendent Parent, Support Staff, and Certified Staff Councils.

### Students' Needs:

Academic Needs	Teachers, interventionists, and other school staff work together to meet student academic needs through tutoring, Tier II and Tier III interventions and summer school.
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Social, Emotional and Mental Health Needs	Each school has a Social Worker to support students and their families.
Other Needs (which may include student health and food services)	Each school has a health office. Families are required to qualify for Free and/or Reduced Meals.
<b>Staff Needs:</b>	
Social, Emotional and Mental Health Needs	Dysart has an Employee Assistance Program to support employees with a variety of issues.
Other Needs	Any staff that tests positive for COVID-19 should isolate for a minimum of 5 days and end isolation when symptom free.

The LEA must **regularly, but no less frequently than every six months** (taking into consideration the timing of significant changes to CDC guidance on reopening schools), **review and, as appropriate, revise its plan** for the safe return to in-person instruction and continuity of services **through September 30, 2023**

<b>Date of Revision</b>	<b>8-11-2022</b>
<b>Public Input</b>	
Describe the process used to seek public input, and how that input was taken into account in the revision of the plan:	<p>11- 16- 2021 The ESSER III plan was discussed with administration until a preliminary plan was created. That preliminary plan was discussed with school administration, including all directors (Special Ed Director). Then a survey with a breakout of the plan and the various areas of support was posted online and on the districts Facebook page and feedback was collected. After reviewing the feedback, the plan was modified to provide more site level support and then presented to the Governing Board and the community at a board meeting on the revised plan.</p> <p><b>Revision August 11, 2022</b></p> <p>An informational item was presented to the Governing Board. This allowed the opportunity for all stakeholders to comment as well as provide input on the plan. The plan will continue to make minor adjustments to align with the CDC as well as other state, county, and local guidelines.</p>

## U.S. Department of Education Interim Final Rule (IFR)

### **(1) LEA Plan for Safe Return to In-Person Instruction and Continuity of Services**

- (a) An LEA must describe in its plan under section 2001(i)(1) of the ARP Act for the safe return to in-person instruction and continuity of services—
  - (i) how it will maintain the health and safety of students, educators, and other staff and the extent to which it has adopted policies, and a description of any such policies, on each of the following safety recommendations established by the CDC:
    - (A) Universal and correct wearing of masks.
    - (B) Modifying facilities to allow for physical distancing (e.g., use of cohorts/podding)
    - (C) Handwashing and respiratory etiquette.
    - (D) Cleaning and maintaining healthy facilities, including improving ventilation.
    - (E) Contact tracing in combination with isolation and quarantine, in collaboration with the State, local, territorial, or Tribal health departments.
    - (F) Diagnostic and screening testing.
    - (G) Efforts to provide vaccinations to school communities.
    - (H) Appropriate accommodations for children with disabilities with respect to health and safety policies.
    - (I) Coordination with State and local health officials.



- (ii) how it will ensure continuity of services, including but not limited to services to address students' academic needs and students' and staff social, emotional, mental health, and other needs, which may include student health and food services.

(b)(i) During the period of the ARP ESSER award established in section Start Printed Page 212022001(a) of the ARP Act, an LEA must regularly, but no less frequently than every six months (taking into consideration the timing of significant changes to CDC guidance on reopening schools), review and, as appropriate, revise its plan for the safe return to in-person instruction and continuity of services.

- (ii) In determining whether revisions are necessary, and in making any revisions, the LEA must seek public input and take such input into account
- (iii) If at the time the LEA revises its plan the CDC has updated its guidance on reopening schools, the revised plan must address the extent to which the LEA has adopted policies, and describe any such policies, for each of the updated safety recommendations.

(c) If an LEA developed a plan prior to enactment of the ARP Act that meets the statutory requirements of section 2001(i)(1) and (2) of the ARP Act but does not address all the requirements in paragraph (a), the LEA must, pursuant to paragraph (b), revise and post its plan no later than six months after receiving its ARP ESSER funds to meet the requirements in paragraph (a).

(d) An LEA's plan under section 2001(i)(1) of the ARP Act for the safe return to in-person instruction and continuity of services must be—

- (i) In an understandable and uniform format;
- (ii) To the extent practicable, written in a language that parents can understand or, if it is not practicable to provide written translations to a parent with limited English proficiency, be orally translated for such parent; an
- (iii) Upon request by a parent who is an individual with a disability as defined by the ADA, provided in an alternative format accessible to that parent