



ARP ESSER Health and Safety Plan Guidance & Template

Section 2001(i)(1) of the American Rescue Plan (ARP) Act requires each local education agency (LEA) that receives funding under the ARP Elementary and Secondary School Emergency Relief (ESSER) Fund to develop and make publicly available on the LEA's website a *Safe Return to In-Person Instruction and Continuity of Services Plan*, hereinafter referred to as a *Health and Safety Plan*.

Based on ARP requirements, 90 percent of ARP ESSER funds will be distributed to school districts and charter schools based on their relative share of Title I-A funding in FY 2020-2021. **Given Federally required timelines, LEAs eligible to apply for and receive this portion of the ARP ESSER funding must submit a Health and Safety Plan that meets ARP Act requirements to the Pennsylvania Department of Education (PDE) by Friday, July 30, 2021, regardless of when the LEA submits its ARP ESSER application.**

Each LEA must create a Health and Safety Plan that addresses how it will maintain the health and safety of students, educators, and other staff, and which will serve as local guidelines for all instructional and non-instructional school activities during the period of the LEA's ARP ESSER grant. The Health and Safety Plan should be tailored to the unique needs of each LEA and its schools and must take into account public comment related to the development of, and subsequent revisions to, the Health and Safety Plan.

The ARP Act and U.S. Department of Education rules require Health and Safety plans include the following components:

1. How the LEA will, to the greatest extent practicable, implement prevention and mitigation policies in line with the most up-to-date guidance from the Centers for Disease Control and Prevention (CDC) for the reopening and operation of school facilities in order to continuously and safely open and operate schools for in-person learning;
2. How the LEA will ensure continuity of services, including but not limited to services to address the students' academic needs, and students' and staff members' social, emotional, mental health, and other needs, which may include student health and food services;
3. 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 policy 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 State and local health departments;
- f. [Diagnostic](#) and screening testing;
- g. Efforts to provide COVID-19 [vaccinations to school communities](#);
- h. Appropriate accommodations for children with disabilities with respect to health and safety policies; and
- i. Coordination with state and local health officials.

The LEA's Health and Safety Plan must be approved by its governing body and posted on the LEA's publicly available website by July 30, 2021.* The ARP Act requires LEAs to post their Health and Safety Plans online in a language that parents/caregivers can understand, or, if it is not practicable to provide written translations to an individual with limited English proficiency, be orally translated. The plan also must be provided in an alternative format accessible, upon request, by a parent who is an individual with a disability as defined by the Americans with Disabilities Act.

Each LEA will upload in the eGrants system its updated Health and Safety Plan and webpage URL where the plan is located on the LEA's publicly available website.

The ARP Act requires LEAs to review their Health and Safety Plans at least every six months during the period of the LEA's ARP ESSER grant. LEAs also must review and update their plans whenever there are significant changes to the CDC recommendations for K-12 schools. Like the development of the plan, all revisions must be informed by community input and reviewed and approved by the governing body prior to posting on the LEA's publicly available website.

LEAs may use the template to revise their current Health and Safety Plans to meet ARP requirements and ensure all stakeholders are fully informed of the LEA's plan to safely resume instructional and non-instructional school activities, including in-person learning, for the current school year. An LEA may use a different plan template or format provided it includes all the elements required by the ARP Act, as listed above.

* The July 30 deadline applies only to school districts and charter schools that received federal Title I-A funds in FY 2020-2021 and intend to apply for and receive ARP ESSER funding.

Additional Resources

LEAs are advised to review the following resources when developing their Health and Safety Plans:

- [CDC K-12 School Operational Strategy](#)
- [PDE Resources for School Communities During COVID-19](#)
- [PDE Roadmap for Education Leaders](#)
- [PDE Accelerated Learning Through an Integrated System of Support](#)
- [PA Department of Health - COVID-19 in Pennsylvania](#)

Health and Safety Plan Summary: **ROCHESTER AREA SCHOOL DISTRICT**

Initial Effective Date: JULY 1, 2021

Date of Last Review: JUNE 27, 2022

Date of Last Revision: JANUARY 10, 2022

1. How will the LEA, to the greatest extent practicable, support prevention and mitigation policies in line with the most up-to-date guidance from the CDC for the reopening and operation of school facilities in order to continuously and safely open and operate schools for in-person learning?

The Rochester Area School District (RASD) will continue to review the guidance from the Center for Disease Control (CDC) and Pennsylvania Department of Health (PA DOH) and revise our Health and Safety Plan according to the recommendations of those two entities. Our current protocols align with CDC and PA DOH guidance. The Administration participates in regular county-wide meetings to stay abreast of current guidelines. Throughout the past school year, the Beaver Valley Intermediate Unit hosted weekly Superintendent virtual meetings to provide opportunities to review updated regulations and to collaborate amongst our colleagues. In addition, we have partnered with local health care professionals and rely on their expertise to help navigate the pandemic. Our county-wide nurses have been meeting regularly and have provided valuable resources for all of the school district. The District Administration meets weekly. Updated guidance will be incorporated into our Health and Safety Plan on a regular basis. As the number of positive cases increase in our buildings, district administration will monitor the building level statistics. When we see twenty positive or presumed positive cases in the elementary school or middle school/high school combined, we will implement universal masking. After observing two weeks of decreased data of less than twenty cases in a two week period, we will recommend masks be optional and each person's choice.

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

The RASD will continue to educate students regardless of level of transmission. Families will be surveyed to determine their choice for educational programming. Families may select face-to-face instruction, online instruction, or a combination of the two. Approximately 750 students in grades K-12 are educated by the RASD (This includes students in various placements.) At full capacity, our average class size is 20 students per classroom. By permitting choice, the district is able to create even smaller

classes within the building. Therefore, we are easily able to establish social distancing based on CDC requirements.

In the event the district would need to transition to a complete virtual environment, students would utilize their district provided iPad. In addition to curricular materials, staff utilize age-appropriate resources like from the Google Suite (Classroom, Chat, Hangouts etc.), Edgenuity, Compass Learning, Scholastic, Discovery Education, and Seesaw to educate our students in a virtual environment.

We surveyed our families to ascertain internet accessibility. Our staff has worked with those without the internet to assist them in finding an appropriate provider. In some instances, iPads with wifi were given to the children, in other cases, boosters were placed in appropriate areas. Internet accessibility is also available when a person is in proximity of the district buildings.

To assist students and staff social, emotional, and mental health needs, our guidance counselors and school nurses provide assistance. In addition, the district has a partnership with Western Psychiatric Services to offer mental health services to our students through a program called, Positive Steps. Western Psych utilizes space within the building and services students on a regular basis. Positive Steps has opened their doors to students and staff. Our district's health care provider, Blue Cross Blue Shield also disseminates information to staff on a regular basis in an effort to provide valuable resources for our mental health.

Food Services, including breakfast, lunch and dinner, continue regardless of whether or not the students are face-to-face or virtual. Our transportation company assists in the distribution of meals to the students on virtual days.

3. Use the table below to explain 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 policy on each of the following safety recommendations established by the CDC.

ARP ESSER Requirement	Strategies, Policies, and Procedures
<p>a. Universal and correct wearing of <u>masks</u>;</p>	<ol style="list-style-type: none"> 1. The district will comply with mask mandates. 2. In the event our district numbers increase, we will implement universal masking. An increase is defined as twenty or more positive or presumer positive cases in a two week period in either the elementary school or middle school/high school combined. If cases decrease to a normal level (below twenty cases for two

	<p>consecutive weeks) we will recommend masks be optional and a person's individual choice.</p> <ol style="list-style-type: none"> 3. Mask orders will be posted at entrances. 4. Staff will receive training on appropriate wearing of masks at the beginning of year. 5. Teachers will train students regarding appropriate use of masks. 6. Signage throughout the building will remind students and staff of the mandate and appropriate wearing of masks. 7. As a community, we will all remind each other to wear masks as mandated.
<p>b. Modifying facilities to allow for <u>physical distancing</u> (e.g., use of cohorts/podding);</p>	<ol style="list-style-type: none"> 1. Building room capacity for social distancing will be implemented based on CDC recommendations. 2. Miscellaneous furniture may need to be removed to establish social distancing. 3. The number of individuals in a classroom will be limited to only those essential in that classroom and for the students within that classroom. 4. Larger classes will be moved to an appropriate space. 5. Classes may be held outdoors when possible. 6. Teacher and Student desks will all face the same direction. 7. Social distancing patterns will be maintained within classrooms and throughout the common areas, i.e. hallways, stairwells, etc. 8. Signage is established to show traffic flow, repurpose stair wells to be up/ down stairs.
<p>c. <u>Handwashing and respiratory etiquette</u>;</p>	<ol style="list-style-type: none"> 1. All staff will be trained on healthy hygiene practices so they can teach these to students. 2. Ensure handwashing strategies include washing with soap and water for at least 20 seconds, especially after going to the

	<p>bathroom; before eating; and after blowing your nose, coughing, or sneezing. If soap and water are not available and hands are not visibly dirty, use an alcohol-based hand sanitizer that contains at least 60% alcohol.</p> <ol style="list-style-type: none"> 3. CDC – handwashing resources available online; Utilize social media, building television systems, and similar platforms to educate and encourage proper hygiene among students, staff, and the community. 4. Ensure adequate supplies (e.g., soap, paper towels, hand sanitizer, tissue) to support healthy hygiene practices.
<p>d. Cleaning and maintaining healthy facilities, including improving <u>ventilation</u>;</p>	<ol style="list-style-type: none"> 1. Schedules have been created so that all personnel are instructed on their areas of cleaning and the amount of time needed to address their areas of responsibility. 2. Daily disinfecting by custodians protocols include: <ol style="list-style-type: none"> a. Restroom handles, b. doors handles, c. sinks, d. stair railings, e. water bottle refilling handles, f. office counters. 3. 60 Second Clean-up – periodic clean-up of individual working space 4. When a student is sent home with any flu/virus symptoms, the nurse will notify the principal and Director of Buildings & Grounds. The class will be moved so the classroom can be disinfected and reopened after the disinfectant dries (at least 15 minutes). 5. All personnel will clean their spaces routinely. Appropriate cleaning supplies (disinfecting spray and paper towels) will be made available. 6. Hand sanitizing stations will be available throughout all buildings

	<p>and availability will increase as supplies become available.</p> <p>7. There will be a designated “well” and “sick” area within each nurse’s office. Upon a student leaving a “sick” area, the nurse will allow for ventilation and appropriate time between students before the area will be cleaned. The nurse will coordinate with the Director of Buildings & Grounds on who is needed to clean the area, appropriate cleaning and current needs of the area.</p>
<p>e. <u>Contact tracing</u> in combination with <u>isolation</u> and <u>quarantine</u>, in collaboration with the State and local health departments;</p>	<ol style="list-style-type: none"> 1. If a student, staff, or visitor exhibits signs or symptoms of COVID-19 they will: <ol style="list-style-type: none"> a. Notify the school nurse prior to sending /coming to the health office b. Be masked immediately c. Placed in isolated area d. Assessed after PPE applied by school nurse e. Parent/guardian will be called f. Student will be escorted to the car when parent arrives g. Siblings will be dismissed as well h. Parents will be advised to follow up with their PCP. A virtual visit may be set up while at the school or at home if the parent /guardian chooses. Parents will receive instructions on how this is conducted. 2. Close off the area used by a person testing positive for COVID-19 and do not use it before cleaning and disinfecting. 3. Refer to the most recent DOH guidance on home isolation or quarantine and returning to work/school. 4. The nurse will follow the screening tool which identifies the conditions

	<p>related to a student's return to school.</p> <ol style="list-style-type: none"> 5. Nurse will conduct contact tracing and quarantine students/staff as appropriate. 6. Contact Rapid Response, PA DOH or CDC, as guided by current protocols.
<p>f. <u>Diagnostic</u> and screening testing;</p>	<ol style="list-style-type: none"> 1. Symptom screening will be done by all parents/guardians at home each morning before the school day. 2. No children with symptoms will be sent on a bus or brought to school. 3. All district staff will perform a symptom screen on themselves prior to leaving for work, and will stay home if ill – Google form for self-reporting. 4. Temperature screening will not be required upon entrance to school for students or staff. 5. Students and staff will consistently be made aware of the signs and symptoms of COVID-19. 6. Students and staff will go to the nurse immediately if feeling symptomatic and will be placed in an isolation area. 7. The District will share resources with the school community to help families understand when to keep children home.
<p>g. Efforts to provide <u>vaccinations to school communities</u>;</p>	<ol style="list-style-type: none"> 1. Partner with a local pharmacist or health care provider to offer a Vaccination Clinic as per CDC guidelines. Follow CDC guidance on the need to offer a booster. <ol style="list-style-type: none"> a. Staff Vaccination Clinic held in March 2021. b. Student and Community Vaccination Clinic held in May 2021. 2. Partner with Beaver Valley Intermediate Unit and local school districts to offer Vaccine Clinics.

<p>h. Appropriate accommodations for students with disabilities with respect to health and safety policies; and</p>	<ol style="list-style-type: none"> 1. Life Skills, Emotional Support, Autistic Support and English learner students will continue to receive face-to-face instruction. 2. Parents may choose to transition their child to a virtual environment. 3. Support services may be held in-person or virtually. 4. Students with complex needs will be addressed individually.
<p>i. Coordination with state and local health officials.</p>	<p>The RASD will follow the CDC and PA DOH guidelines and coordinate with state and local health officials as changes in protocols occur.</p>

Health and Safety Plan Governing Body Affirmation Statement

The Board of Directors/Trustees for ROCHESTER AREA SCHOOL DISTRICT reviewed and approved the Health and Safety Plan on June 27, 2022.

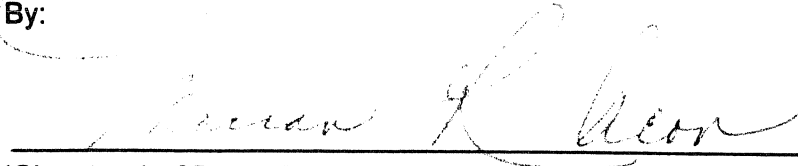
The plan was approved by a vote of:

6 Yes

0 No

Affirmed on: June 27, 2022

By:



(Signature* of Board President)

Marian R. Acon

(Print Name of Board President)

*Electronic signatures on this document are acceptable using one of the two methods detailed below.

Option A: The use of actual signatures is encouraged whenever possible. This method requires that the document be printed, signed, scanned, and then submitted.

Option B: If printing and scanning are not possible, add an electronic signature using the resident Microsoft Office product signature option, which is free to everyone, no installation or purchase needed.