

**VOLUNTEERS OF AMERICA-GNY
EARLY LEARNING CENTERS
SCHOOL RE-OPENING PLAN
SUBMITTED AUGUST 7, 2020
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REVISED JULY 2021**

AGENCY NAME: Volunteers of America-Greater New York

BEDS CODE: 35100880287

PROGRAM NAME & ADDRESS: Bronx Early Learning Center
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INTRODUCTION:

This plan was developed to conform to the guidance provided by the New York State Education Department (NYSED) in their July 2020 document entitled: “Recovering, Rebuilding and Renewing: The Spirit of New York’s Schools – Re-opening Guidance.” This plan has been revised and updated as needed to adjust to changing public health conditions caused by the COVID-19 virus and the new requirements and regulations which may emerge over time. Volunteers of America-Greater New York (VOA-GNY) solicited input and involvement from the families we serve and our staff during the original drafting of our re-opening plan. We rely on continued input from all stakeholders as we move forward implementing this plan and as we make any additions or modifications. This plan addresses the re-opening plans for the VOA-GNY Bronx Early Learning Center. The VOA-GNY Staten Island Early Learning Center was closed on December 31, 2020.

We acknowledge that our early learning center must be flexible and as responsive as possible to the needs of our students, families and staff members. We will closely monitor the conditions of

our communities as the COVID-19 pandemic continues, and the effectiveness and appropriateness of our plan. Our commitment to our students and our determination to provide the highest possible educational programming and related services remains consistent, even during challenging times.

The goal of the plan is to guide the delivery of high-quality educational services as safely as possible, whether that service delivery is in-person, through a remote learning platform or a blended combination of remote and in-person services. Our focus and concerns extend to the social and emotional needs of our students, families, and staff members. We will work together and remain focused on the outcomes we seek to accomplish, so that we can find collaborative solutions to the challenges ahead.

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

1. Communication/Family and Community Engagement
2. Health and Safety
3. Facilities
4. Nutrition
5. Transportation
6. Social Emotional Well-Being
7. School Schedules
8. Budget and Fiscal
9. Attendance and Chronic Absenteeism
10. Technology and Connectivity
11. Teaching and Learning
12. Career and Technical Education
13. Athletics and Extra Curricular Activities
14. Special Education
15. Bilingual Education and World Languages
16. Staffing
17. Teacher and Principal Evaluation System
18. Student Teaching

*All suggestions, concerns and/or questions regarding our plan should be directed to the contact person identified at the beginning of this document.

1. COMMUNICATION/FAMILY AND COMMUNITY ENGAGEMENT

In preparation for the completion of this re-opening plan and the additional revisions to the re-opening plan, we sought the guidance of our families, our staff, our colleagues in the 4410 preschool special education community, our Regional Associate at NYSED, and our Program Consultant at the New York City Department of Education (NYCDOE) 4410 program office.

- During the first week of the summer session 2020, parents were asked to complete a survey citing their preference for a program model for September (i.e., remote

instruction, combination of remote instruction and in-person learning). This survey was distributed via e-mail and letters were mailed to families, as well. The teachers reviewed the survey with each family and the results were collated by the Director of Early Childhood Educational Services for each site. The results of this survey indicated that the majority of the parents at the early learning centers were interested in a blended model for September 2020

- In April 2021, parents once again received a survey requesting their preference for a program model for summer session 2021. The majority of the parents (107) requested a blended model for the summer session and a smaller number of parents (18) requested 100% remote instruction for the summer session.
- On a weekly basis, virtual staff and supervisory meetings were conducted at the early learning center to gauge the recommendations and concerns of our staff. Effective September 2020, full staff meetings were held on a monthly basis, department meetings were held on a monthly basis, and supervisor meetings were held on a **biweekly basis**.
- Our School Nurse researched the current health and safety guidelines, spoke directly with staff and families, and assisted in the revisions to our relevant policies & procedures (e.g., infection control, adult-child interactions). Our School Nurse worked closely with the Social Services staff to assist families with medical and mental health challenges.
- The following job titles were involved in the creation of the initial re-opening plan via virtual meetings, shared e-mails and telephone conference calls: Vice President of Quality and Program Services, Director of Early Childhood Educational Services, Business Manager, Human Resources Manager, School Nurse, Clinical Supervisors, Program Directors. This team will continue to work on future revisions to this plan.
- In development of this plan guidance was also received from the New York City Department of Health/Mental Hygiene, NYSED Regional Associate, NYCDOE 4410 Program Office, and 4410 colleagues who are member of the Interagency Council (IAC) and the Coalition for Children With Special Needs.

Ongoing communication is critical to the successful implementation of the re-opening plan. We will continue **to** utilize the following methods to communicate and provide information:

- Students/Parents/Legal Guardians: We will communicate via emails, telephone calls, interactive platforms, and mail/fed ex. In addition, daily/weekly communication will be shared with families of students who attend the early learning center in-person via the communication notebook in the student's bookbag.
- Staff: We communicate weekly, as more often as needed, via e-mails, individual telephone calls, group conference calls, interactive platforms, and face to face interactions, employing social distancing when the early learning center re-opened. Posted signage throughout the building on bulletin boards and by the timeclocks continues to be utilized.
- Visitors: Visitors to the early learning center are limited, and most communication occurs onsite at the front door. Wherever possible, communication is conducted via telephone calls and e-mails with parents and other visitors. There is a sign posted at the front door at the early learning center stating that entrance into the building will require a person wearing a mask, completing the health checklist, having their temperature taken and, using hand sanitizer and maintaining social distancing while in the building.

Activities of Daily Living (ADL)/Social Skills are a critical part of the curriculum for the students. Infection control techniques are incorporated into the ADL skills curriculum for students. Our teaching staff continue to re-force modeling and teaching hand hygiene, social distancing, respiratory hygiene (i.e., coughing into one's bent elbow), throughout the school day. Given the age and developmental skill levels of our students, pediatric masks are encouraged but not required for students to receive in-person services. Communication regarding Centers for Disease Control (CDC) and Department of Health (DOH) guidelines for the proper use of masks and social distancing with students will continue with verbal cues, pictures, physical cues and modeling by staff. The School Nurse will continue to work with the teaching staff on demonstrating appropriate handwashing, respiratory hygiene (covering the mouth and nose when sneezing or coughing), and the use of face coverings (as appropriate). There continues to be age-appropriate posted signage in each classroom.

Communication regarding CDC and DOH guidelines for the proper use of masks and social distancing will continue to be provided using the following techniques: written information in the updated parent handbook, information in the updated early learning centers policies & procedures, in-person and/or online training, signs posted throughout the early learning center. Prior to the school re-opening in September 2020, the early learning center conducted interactive meetings with families to review the new policies and procedures. These meetings have continued during the school year on a regularly scheduled basis via an interactive platform. The School Nurse, the Social Workers continue to participate in these online meetings. All written communication and verbal communication for families is available in English and Spanish. In terms of communication with members of the community with visual and/or hearing impairments, an American sign language interpreter is available at each early learning center for individuals with hearing impairments, and verbal communication is provided to individuals with visual impairments. In preparation for summer session 2021, a parent meeting was been scheduled for 9, 2021, via an interactive platform.

2. HEALTH AND SAFETY

*Please note that staff and students continue to participate in in-person instruction only when government authorities permit in-person education. The Governor, the Mayor and/or the Commissioner of the New York City Department of Health determine if the VOA Bronx Early Learning Center should temporarily convert to 100% remote instruction. In addition, the return to in-person instruction necessitated that early learning center leadership also determined that the number of students and staff allowed to return in person is based upon: the ability to maintain social distancing; the availability of Personal Protection Equipment (PPE), including the availability of cloth face coverings and masks; availability of safe transportation; and local hospital capacity according to the local DOH.

Staff returned to work at the early learning center in September 2020, three days prior to the start date for the students. During the three days of professional development, staff received training by the School Nurse on Infection Control, including: an overview of COVID-19, signs & symptoms of illness in students, the protocol for sending symptomatic, appropriate handwashing

techniques, respiratory hygiene, use of PPE, isolation techniques, clearance for the return to the early learning center, daily health clearance before entering the building, utilizing social distancing, as appropriate. Signage **is** posted throughout the early learning center.

Staff and students/families may enter the early learning center, after waiting in line outside of the building. Sidewalk chalk **is** used to enforce social distancing. Screening station(s) **are** set up inside the entrance to the building. Screeners/greeters wear appropriate PPE. In order to enter the building an adult must wear a mask. Each person (i.e., adults & children) has their temperature taken using a thermal scan thermometer, they complete a health checklist (staff complete the New York City Department of Education Health Checklist and parents will complete the New York State Department of Health Checklist), they sign in with the date & time of their entry into the building and use hand sanitizer before going to their assigned workstation. Parents leave the children at the front door and the children are escorted to their classroom by their teaching staff and/or assigned related services therapists. Staff & parents have copies of the daily health checklist in advance and sign and date the checklist as they enter the early learning center. Once staff enter the building, they will clock in via their computers.

The School Nurse assesses students as they come into the building, before being brought to their classroom. Assessments include: temperature checks, and observation of any signs/symptoms of illness. Students will remain in their classroom throughout the school day, and will only be brought to the Nurse's office, as needed. In the absence of the School Nurse, the staff member or student must be directly sent home for follow up with their health care provider.

If a staff member or student comes to the building with a fever and/or answers "yes" to any of the questions on the health checklist(s), they will not be permitted to enter the building. If a staff member or student becomes ill at school, they will remain in the isolation area until an approved escort can take them home. If a student comes off the school bus and presents with a fever, the student will immediately be brought to the isolation area, and the family/emergency contact will be called to come to the building to pick up the student. The isolation areas the early learning center is identified with appropriate signage.

Vendors coming to the early learning center (i.e., delivery personnel) will continue to leave packages and delivery items at the front door. Vendors/inspectors (e.g. government agencies, building inspectors, etc.) who need to enter the building will complete the health checklist, have their temperature taken, sign into the visitor log and sanitize their hands before entering the building. A mask must be worn upon entry, after passing the screening.

Parents/guardians receive instructions regarding illness during the parent orientation and this information is included in their parent handbook, as well as observing for signs/symptoms of illness in their child that would require staying home from school. In addition, information regarding the proper procedures for follow up should their child become ill or exposed to a confirmed case of COVID-19, is also included. Parents have been advised that the early learning center will be checking the names and telephone numbers of the three required emergency contacts/escorts, to ensure that they will be available to pick the child up from school. A revised emergency escort/pick up form will be updated at least quarterly for parents to sign, which states,

“Should my child exhibit signs and symptoms of illness, I understand that my child must be picked up from the early learning center promptly.”

Social distancing signs & floor markers are posted throughout the school building. Signage includes information on proper hand hygiene, use of PPE, wearing face coverings, cough etiquette, and staying home when sick. Staff will be encouraged to stay in their workspace (i.e., office, classroom) throughout the day, whenever possible. Therapists provide in-classroom therapy whenever possible and are assigned to specific classrooms to limit contacts from classroom to classroom. Signage outlining proper hand and respiratory hygiene is posted throughout the building, including all classrooms. This signage includes visual prompts, so that students can also follow them.

Students and staff who require special accommodations, including an increased risk for complications from COVID-19 may require alternative provisions for social distancing. The specific needs of students are reviewed individually, in consultation with the School Nurse. Staff who may require special accommodations are required to meet with the Human Resources Department. The early learning center will follow the CDC, NYSDOH & NYCDOH/MH guidelines for high-risk individuals. Students who cannot attend in-person services due to high risk are accommodated with remote instruction.

All staff and visitors are required to wear masks while at the early learning center, without exception. Since not all staff at the early learning center have received the COVID-19 vaccine, and not all students consistently wear masks, the early learning center will continue to require staff to wear masks while they are onsite. Students are encouraged to wear pediatric masks, however; there may be instances that a student's respiratory status or social emotional well-being may be impacted by being “forced” to wear a pediatric mask. The School Nurse has a supply of disposable pediatric masks available for students. The School Nurse and the teaching staff continue to work with the students through modelling and learning activities to encourage students to wear masks. The early learning center provides three re-usable masks to each employee. PPE such as: gloves, gowns, facial shields, and additional disposable masks are readily available for all staff. PPE was pre-ordered in anticipation of the re-opening of school and the early learning center stores a month's supply of PPE onsite. The site completes a weekly inventory of supplies, including PPE. These inventory worksheets are submitted to the agency Quality Assurance Director for review. If supply quantities dip below the minimum amount required to have on-site, an order will immediately be placed.

The School Nurse is a trained & certified contact tracer. The School Nurse, working in conjunction with the Human Resources Department, notifies the appropriate government agencies when there is a confirmed case of COVID-19 at the school. All staff & students who have been exposed to a person testing positive (i.e., were within less than 6-feet of social distancing at the school for 10 minutes or longer) are required to self-quarantine for a period of 14 days, starting on the date of contact. Staff who have received the COVID-19 vaccine do not have to quarantine, however; it is recommended that these staff members be tested and monitor themselves for symptoms. If a student or staff member becomes ill with COVID-19 during their self-quarantine, they will be required to self-isolate for a period of 10 days, beginning on the date of diagnosis and then follow the return to school guidelines. If a staff member or student tests

positive for COVID-19, the staff and students will self-quarantine for 14 days, with remote instruction. If two or more students and/or staff test positive for COVID-19 in the early learning center, the center will close for 14 days during self-quarantine, and all students will receive remote instruction. The students will participate in remote instruction until such time that they are able to return to the early learning center. The classroom and other areas of the building where there was an exposure will undergo a thorough disinfecting process following CDC and NYSDOH guidelines.

The early learning center is disinfected daily by the maintenance staff, employing the cleaning protocols recommended in the CDC and NYSDOH guidelines and using cleaning products recommended by the CDC and Department of Environmental Conservation (DEC). Staff complete a daily checklist confirming that these cleaning and disinfecting protocols have been completed. This checklist includes disinfecting of high touch areas such as handrails, elevator buttons, etc. Staff will have disinfecting supplies (including hand sanitizer, tissues and alcohol wipes, at their workstations. Each staff member is required to clean their work area at the beginning and end of their workday. A disinfecting checklist is posted at the early learning center. Frequently touched surfaces such as doorknobs, light switches, toilets and restroom handles, desktops, etc., are cleaned periodically throughout the day. Equipment and supplies are cleaned after use by each student. Each student has his/her own labelled daily bin with separate supplies and equipment.

Fire drills and lockdown drills are conducted, as per the NYCDOH Article 47 childcare regulations guidelines. The revised policy & procedure includes the requirements of the 2020 New York State Uniform Fire Prevention and Building Code (BC) and the State Energy Conservation Code. Since there will be a maximum of 50% of the students onsite each school day (i.e., 4 students or 6 students per classroom), staff hold the hand of each student (for a total of two students) and escort the students out of the building during fire drills. Students escorted by staff will maintain six feet distance from the person ahead of them. Hallway floors will be marked with tape to remind staff & students to maintain six distance during drills and whenever they are in the hallway. All exits from the early learning center will be used to limit the number of adults and children exiting the building at one time. A new map has been developed for the early learning center, demonstrating the exit to be utilized. For lockdown drills, all windows and door windows will be covered, and social distancing will be maintained as best as possible within the classroom.

The COVID-19 Safety Coordinator for the Bronx Early Learning Center is Randy Williams, R.N. Ms. Williams's contact information: 718-466-3580, rwilliams2@voa-gny.org. Ms. Williams works in collaboration with Ms. Rosenthal, Director of Early Childhood Educational Services. Ms. Williams and Ms. Rosenthal also work closely with community agencies and organizations. Staff and families have been informed of the COVID-19 Safety Coordinator at the site and have been provided with their contact information. This information has also been shared with NYCDOE 4410 Program Office and the NYCDOH/MH childcare licensing specialist.

The isolation area has been identified at the early learning center, located next to the School Nurse's office. The isolation area has posted signage, ventilation, and contains vinyl covered cots

for students, and a supply of PPE for the Nurse and for whomever is assigned to stay with the student. All staff entering the isolation area wear disposable PPE, including a mask, gloves, facial shield and gown. Additionally, the School Nurse has full disposable PPE when providing respiratory treatments to students, such as a nebulizer. All treatments for injuries and administration of medication occurs in the Nurse's office.

Custodial personnel wear masks throughout the day in the early learning center. Facial shields, gloves, and gowns are available for use, as appropriate. The custodial personnel complete the daily cleaning/disinfecting log recommended by the NYCDOH. Custodial staff ensure that classrooms, offices and therapy spaces have a daily supply of PPE and hand sanitizer readily available. In addition, all staff keep a checklist of their own supplies needed to maintain safety in their work area, which be checked prior to the start of the day.

3. FACILITIES

Poly carbonite shields were installed at the front desk of the early learning center. Wooden dividers have been placed between desks in offices and in therapy spaces. Ventilation systems at the early learning center was inspected and approved. VOA performed a thorough cleaning of the ventilation system and continues to do so on a periodic basis. The poly carbonite shields are fire rated and approved by the DOH.

Emergency plans at the early learning center (i.e., fire drills, evacuation lockdown) were modified to reflect and facilitate social distancing while ensuring that staff and students are safe. New exit routes have been designed for safe evacuation of the facilities.

Offices were re-arranged to reflect social distancing and/or barriers placed between desks. Therapists will provide a combination of in-class and in therapy room related services sessions with **the** maximum of 50% of the student population onsite. Several of the therapists work at their desks in their offices performing tele-therapy and consultations for those students receiving remote services.

All exit doors have automatic closure mechanisms and are fire rated. Classroom doors and therapy room doors remain open to increase air flow. Child proof gates are used to ensure that students remain in the classroom and therapy spaces.

Each classroom has a sink. Hand sanitizer pumps have been mounted throughout the early learning center for easy access (i.e., two locations in each hallway, at the entrances to the building, at the base & top of stairwells, outside of adult bathrooms throughout the entry area). The hand sanitizer pumps are in compliance with all applicable fire codes. There are no drinking fountains located at the early learning center.

Staff are encouraged to eat their meals at their workstations (i.e., classrooms & offices). Staff training has been conducted in small groups, with sessions being repeated, to ensure that social distancing will be maintained. In addition, online training has been being developed so that staff can maintain social distancing.

4. NUTRITION

The Bronx Early Learning Center participates in the NYSED School Breakfast and Lunch Program. All policies & procedures related to mealtimes have been amended to reflect Child Nutrition Program requirements. The vendor delivers all meals & beverages in individually pre-packaged containers with child appropriate portions for each food group. The food vendor is an approved vendor by the NYSED School Breakfast and Lunch Program. The vendor provides meal substitutions to accommodate the food allergies of the students. Food allergies are posted in each classroom with the medical alerts. The vendor delivers the meal containers to the front door and the custodial staff bring the food containers into the building. Assigned staff deliver the meals to the classroom to ensure that social distancing is maintained. Staff distributing the meals have food handler certificates and are be masked and gloved. For students receiving remote instruction the Social Services staff offers the families information regarding “Grab & Go” meals at the local public schools and offers the families the opportunity to come to the school to pick up the prepared meal(s) for their child.

All students eat their meals in the classroom. Students are seated 6 feet apart during meals. With a maximum of 50% on the students on site, students maintain social distancing during mealtimes to ensure that the students do not touch or share each other’s meals, and that the students will only eat the food that they have brought to school. During mealtimes, staff are seated at the rectangular tables with 2-3 students seated at each table. Students & staff wash their hands before and after each meal. Staff disinfect the tables after each meal is served. Proper hand hygiene posters are posted in each classroom.

Student allergies are posted in each classroom with a cover sheet maintaining HIPAA guidelines. Student specific Epi-pens are stored in the classroom out of the child’s reach. Non-specific student Epi-pens are stored in the Nurse’s office and accessible to all staff. All staff are trained prior to school opening by the School Nurse on Epi-pen protocols and signs and symptoms of severe allergic reactions. Students with Epi-pens are identified prior to the start of school and allergy plans are discussed with appropriate staff.

The parent handbook contains a section on student meals for the early learning center. At parent orientation and parent meetings, changes to the mealtime program have been reviewed with families.

5. TRANSPORTATION

*Transportation for preschool students with disabilities enrolled in 4410 programs is provided by the school district (NYCDOE). Transportation routes for students are determined by the bus company, which is under contract with the NYCDOE Office of Pupil Transportation (OPT).

The early learning center screeners/greeters take the temperature of each student as they disembark from the school bus. Students exit from the front of the bus first and then going back toward the rear of the bus to discourage students from being in direct contact with each other.

Staff and therapists from each classroom escort their own students to the classrooms, maintaining social distancing in the hallways, and where the students will immediately wash their hands. The School Nurse and additional screeners/greeters conduct a quick health check (e.g., runny nose, coughing, wheezing, rash, etc.) before the student is escorted to his/her classroom.

Student arrival and departure times is dependent on the routing prepared by the bus company. Classroom staff escort students to their respective buses and students board the bus starting at the rear of the bus.

Students transported to school by their families, are greeted at the front door. Families are not permitted to come into the building. The screeners/greeters take the student's temperature, and the parents are asked the questions on the health checklist. If any question is answered with a "yes" response, the student is admitted into the building. The student uses hand sanitizer (as tolerated) before taking the hand of the staff escort. A staff member from the student's classroom escorts the student to the classroom, where he/she washes hands upon entering the classroom. Students also wash their hands before being escorted to the front door to meet their families.

6. SOCIAL EMOTIONAL WELL-BEING

The early learning center uses positive behavioral interventions and supports (PBIS) as a methodology for supporting students. Guided by the clinical services departments at the early learning center, PBIS techniques have been shared with families during remote instruction and will continue to be employed as students return to school. In addition, the multidisciplinary team meets to discuss concerns related to students presenting with challenging behaviors, and during remote learning, these techniques are reinforced with family members when their children are at home.

During remote instruction & in person instruction, team meetings have continued with Teachers, Therapists, and families to address challenges families are facing at home. These meetings, which are led by the Teacher, have been held via conference calls and interactive platforms, based upon the choice and technology capability of families. These team meetings continue as the school re-opened using conference calls and interactive platforms, since parents are unable to come into the early learning center. The School Nurse has participated in many of the team meetings, since many of the challenges faced by our families include the health of family members and access to medical services.

The early learning center has a parent council, and this parent council continues to meet virtually as schools have re-opened. The parent council, in conjunction with the Social Services staff and School Nurse, continue to meet to discuss topics of concern to families, which have included: signs & symptoms of COVID-19, accessing food resources, accessing financial resources, accessing legal resources, accessing mental health resources, accessing medical resources. The

Social Services staff and School Nurse have also “met” with families individually during remote learning and will continue to do so during the school year.

Our clinical department, inclusive of the Social Services staff and the School Nurse, have participated in trauma informed webinars and workshops during remote learning, to gain access to additional information and resources. The Director of Early Childhood Educational Services has continued to participate in virtual monthly community planning board meetings and accessed the community planning board websites to gather resources to help families during the pandemic. Information has included: locations of food banks & “grab and go” food programs, mental health resources providing tele-health services, medical resources providing tele-health and onsite services, support for families experiencing domestic violence, etc.

At the early learning center, team meetings continue to be held on a regularly scheduled basis, to provide resources for individual families and to provide support and training to the parent council and their ongoing meetings. The teams include: Social Services staff, the School Nurse, Teacher(s), Clinical Supervisors (i.e., psychology, speech, occupational therapy, physical therapy), and are led by the Program Director or his/her designee. The Social Services staff and School Nurse have established relationships with community organizations & governmental agencies which provide mental health, medical, legal, financial, and housing support to families. The early learning center maintains a list of the community organizations & governmental agencies which provide support to families.

Professional development is available to all staff through our organization’s Staff Development Department which utilizes training videos from Relias, as well as live trainings from the department trainers which are conducted virtually. In addition, staff have participated in trainings/webinars offered by government agencies (e.g. NYCDOH/MH, NYSDOH, NYCDOE, OSEP,) and professional organizations (e.g., National Association for the Education of Young Children, Advocates for Children, Early Childhood Professional Development Institute). In addition, Clinical Supervisors prepared virtual workshops for staff and families during remote instruction, and these virtual workshops continued when school re-opened, to ensure that we can provide social distancing during staff development activities.

Our Social Services staff and School Nurse work actively on behalf of our families in terms of referral and follow up with community agencies, in such areas as; mental health, medical services, domestic violence, and accessing services in the areas of housing, employment, legal matters, etc. Participation in community planning board meetings has also facilitated direct contact with local politicians and their staff to assist families, as needed.

For staff in need of assistance & support, the Human Resources Department connects staff members with our Employee Assistance Program (EAP).

7. SCHOOL SCHEDULES

Based upon the results of the parent surveys for the fall session in 2020 and the summer session in 2021, the ability to provide social distancing at our early learning center, the ability to have

our staff provide a combination of remote instruction and in-person services, the ability to ensure that the early learning centers are cleaned and disinfected on a regular basis, and the concerns of our staff and families, the early learning center offered a combination of 100% remote instruction and in-person services with a maximum capacity of 50% of the students onsite at one time through June 30, 2021. The plan provided an A & B cohort for students whose families choose to have their child receive in-person services with a blended model. Up to one half of the students in each classroom (in 8's and 12's classrooms) received full day in-person services in cohort A and received remote instruction the next week, and cohort B received in-person services the next week, while students in cohort A received remote services. Students participating in remote instruction only, received all services at home. Students who received 100% remote instruction were part of cohort C. Staff & families received a monthly calendar to identify the A & B weeks. All students in cohorts A, B, & C, received remote instruction on Fridays.

Effective July 5, 2021, for the six-week summer session, students in cohort A will receive in person in services Monday-Wednesday, and remote services on Thursday & Friday during weeks one, three and five of the summer session, and in person instruction on Monday & Tuesday on weeks two, four and six of the summer session. Students in Cohort B will receive in person services on Thursday & Friday during weeks one, three and five and in person services on Monday-Wednesday weeks two, four and six of the summer session. The model was amended for the summer session to reflect the preference of the parents in Cohorts A & B to have their children participate in weekly onsite services. General staff meetings and supervisor meetings were also conducted to review the change in the blended/hybrid model for the summer session.

Staff who have been approved by the Human Resources Department for a reasonable accommodation to work 100% of the time via telecommuting (i.e., due to approved medical conditions), will work their full shift exclusively with families whose children are receiving remote instruction services.

The plan continues to be communicated families in their primary language via telephone contact (to address questions/concerns), letters sent to parents via e-mail and direct mailing which details the school schedule & the schedule for their child and virtual parent council meetings.

Students receiving in-person services will remain in their classroom "pod" throughout the school day, whenever possible. The Teacher and one Teacher Assistant work directly with the students in the classroom. The second Teacher Assistant assists with remote learning activities to the students at home via: e-mails, interactive platforms, telephone consultations, facetime into the classroom so that students can participate in "live" activities, etc. Students receiving remote instruction services, either full time or for their days each week, also receive their therapy services during the school day. Their Therapists engage with the students & families, from their therapy offices and/or working remotely.

The Bronx Early Learning Center is a NYCDOE approved Interim Alternate Bilingual Program (IABP) and continues to provide in-person and remote learning services to students & families in their primary language. The Social Services staff at the early learning center continue to support families experiencing homelessness and domestic violence. Every effort is made to have the

students continue to receive services in-person and through remote learning services while their family is in transition.

8. BUDGET AND FISCAL

During remote instruction, a separate cost center had been established to reflect all COVID-19 related expenses, which have included: PPE, internal renovations to the early learning centers, staff development trainings, and classroom supplies & equipment. The early learning center applied for the mini-grants as part of the federal CARES Act to offset some of the costs associated with preparing the early learning center for in-person services. does not support the increased expenses in preparing the early learning centers for re-opening.

The teams at the early learning center have worked tirelessly to maintain student enrollment during the 10-month school year and the six-week summer session. The Intake Department has worked with the CPSE Administrators and the Services Coordinators at the Early Intervention Programs to facilitate referrals of new students. In addition, the early learning center began conducting virtual multidisciplinary evaluations, as soon as the NYCDOE & NYSED issued guidance to begin these evaluations (**Spring 2020**). During the six-week summer session, families will be offered the choice to receive in person and/or virtual multidisciplinary evaluations.

9. ATTENDANCE AND CHRONIC ABSENTEEISM

Attendance records are maintained using the classroom and therapy attendance cards, in addition to the daily logs completed by each teacher and therapist. Students & families receiving remote instruction 100% of the time or as part of the blended model, are offered services as mandated on their IEP (i.e., 5 days of special instruction, number of mandated related services sessions per week). During remote instruction, the parent log reflects if the session was completed, and if not, the reason(s) why the services was not completed for that day (e.g., parent declined service, student or parent had a doctor's appointment, student or parent ill, etc.).

Families who select cohort C/ 100% remote instruction, are provided with support and encouragement to continue with the daily educational and therapy sessions. Our Social Services staff and our School Nurse call parents periodically for "check-ins", as well as scheduled calls to assist with specific family concerns. Where there have been challenges encountered by our families, our Social Services staff and School Nurse have offered support and assistance to families, while being respectful of their privacy and issues of confidentiality. Where families have become "overwhelmed" by person circumstances, participating in remote instruction, encountering difficulties with their child's behavior at home, time constraints, etc., the student's Teacher, Social Services staff member and/or School Nurse, have worked with the family to find a "comfort level" for the length and frequency of remote instruction and therapy sessions. We continue to work with families engaged in remote instruction.

In terms of students receiving in-person services, the School Nurse reviews with families the signs & symptoms of COVID-19, explains to families to monitor their child's and their family's

health status using the questions on the health checklist as a guide (this information is also included in the parent handbook), to ensure that students come to school “healthy” and are able to participate in school each week that they are scheduled to attend in-person services. The virtual trainings were conducted by the School Nurse prior to students returning to school. In addition, this information has been included in the parent handbook.

Where there has been chronic absenteeism for students (i.e., frequent absences, absence extending beyond the required self-quarantine period, sporadic attendance) for in person instruction and/or remote instruction, the Social Services staff have put the following protocols in place to provide outreach to families: telephone call(s) to the family, e-mail to the family, certified letter sent to the family, contacting emergency contacts/approved escorts (i.e., to obtain updated contact information). All communication with the family, orally & in writing, is in the family’s primary language. Where there is sustained lack of contact with a family (i.e., more than 10 days), the Social Services staff will reach out to the CPSE Administrator.

As mandated reporters, all staff are trained annually on the early learning center policies & procedures regarding child abuse and neglect. Additionally, staff are trained bi-annually by participating in the OCFS online course. Our Social Services staff and School Nurse work closely with families experiencing trauma and make referrals for assistance to families and calls to government agencies, as appropriate.

10. TECHNOLOGY AND CONNECTIVITY

During the week of March 16, 2020, when schools closed, the teaching staff reached out to families to ascertain their technology capabilities and needs. Until such time as the NYCDOE provided access to I-pads for our students, many families were using their smartphones to participate in remote instruction. As new students are enrolled at our early learning center, our intake department assesses each family’s access to technology, and where appropriate, the early learning center will reach out to the NYCDOE for an I-pad for the family. As new students are enrolled at the early learning center, the Intake Department will discuss the technology capabilities/needs of each family

For new students whose families did not have access to technology, the teaching staff and therapy staff reach out to families via telephone contact and send learning activities to the families, until such time as we are able to assist the family in accessing an I-pad. With schools re-opened, families continued to need access to technology since students receive either 100% remote instruction or 50% remote instruction as part of the blended model. In addition, should schools need to once again close, and all students go back to remote instruction, it is imperative that families have the tools to participate in services. During remote instruction, the following strategies have been used to engage families: telephone contacts, interactive platforms, e-mails, and learning activities sent to families.

During weekly department meetings at the early learning center, teaching staff and therapy staff incorporate discussions regarding the remote learning strategies and have assisted each other in access to and mastery of the interactive platforms. The Volunteers of America-GNY IT

Department has been instrumental in assisting the early learning center staff in setting up interactive platforms on their devices. The IT Department has also assisted remotely with technology “glitches” experienced by our staff.

We will continue to work with the NYCDOE to obtain I-pads for our families and are actively seeking donations of I-pads for our families.

11. TEACHING AND LEARNING

During the four months of school closure, the early learning center refined its approach to remote instruction. Forms to document attendance, learning activities, student progress have been revised as appropriate, team meetings were regularly scheduled for classrooms and/or individual students, weekly department group supervision of staff is scheduled, as well as individual supervision, and the leadership teams met weekly at the early learning center. Monthly themes continued to be incorporated into the learning activities for each student, as well as the learning/therapeutic activities addressing the IEP goals for each student.

It is the intention of the early learning center to continue to provide the choice for families to participate in 100% remote instruction or a blended model of 50% remote learning & 50% of in-person services during the six-week summer session. In the event that schools are once again closed by government authorities, the early learning center is prepared to go back to 100% remote instruction, with the teaching staff and therapy staff continuing with their same caseload of students.

Instruction continues to be aligned with the outcomes in the New York State Learning Standards, in conjunction with the individual goals & objectives on each student’s IEP. The Creative Curriculum continues as the foundation for the development of learning activities for students. As stated earlier in this plan, students & families are offered the weekly mandated services on each student’s IEP. During remote instruction & in person instruction, teaching staff and therapists are respective of the level of participation by each family and document all outreach attempts and completed sessions with the family. For families who selected the blended model, students will continue to receive their mandated IEP services during their week in school, as well as during the week that the student is participating in remote instruction.

In addition to remote instruction and in-person services, families will also continue to be offered the opportunity to participate in parent council activities with virtual meetings. These meetings provide opportunities to address questions/concerns raised by families, provide program updates, and provide training opportunities for topics of interest to families. Social Services staff and the School Nurse continue to provide outreach to families on a more individualized basis.

Communication with families continues in the family’s primary language via: telephone contacts, e-mails, letters to families via e-mail and direct mailing. Teachers prepare a weekly class newsletter with updated information. For students receiving in-person services the newsletter is placed in the students’ book bags, as well as by email to the family. For students receiving remote instruction, the newsletter is e-mailed to the family. Parent council meetings are typically conducted every 4-6 weeks and continue to be held virtually while schools are open.

Teaching staff continue to update families during their daily contacts with information that they receive during department meetings, a weekly staff memorandum, and the monthly general staff meetings for all staff conducted by the Director of Early Childhood Educational Services.

For those students participating in the blended/hybrid model, their classrooms have no more than one half of the student population present in their classroom. There is increased individualized attention for each student onsite. Staff have focused on comforting students and introducing or re-introducing students to classroom routines and schedules. Much time been devoted to assisting students in identifying their written name/alongside their picture, since students will be assigned their own chair, their own place at the table, their own cubby, their own work/supply bin, and their own poly spot for seating on the floor. Students also receive guidance in maintaining social distancing, using their elbow for coughing and sneezing, and washing their hands. Since bringing toys/transitional objects from home will be discouraged, staff will reach out to families to ascertain their child's favorite book, song, activities, etc. to comfort the child help and them to adjust to being in school.

The classroom staff (i.e., Teacher and two Teacher Assistants) remain intact, and rotate in providing remote instruction and in-person instruction to their students. Planning time and participation in team meetings helps to ensure consistency between remote and in-person instruction for the teaching staff and the assigned Therapists for the students. Students are informally assessed at the Bronx Early Learning Center using the DAYC Checklist. The checklists are updated on a quarterly basis in preparation for the quarterly progress reports submitted to families.

The classroom schedule for in-person services been adapted for compliance with CDC and DOH guidelines and regulations to ensure student & staff health and safety:

- Two-three students are seated at the rectangular tables in each classroom, with a staff member at each table. This allows for a 6-foot distance between students.
- Students have their own work/supply bin with learning activities.
- Students are assigned to their own table/chair/poly spot.
- Students remain in their “pod” throughout the school day, with few exceptions.
- Computer time is no longer be an option onsite since students receive screen time via remote instruction.
- The learning center is disinfected after a student leaves a center
- All gross motor activities will occur in the classroom.
- Meals & beverages are distributed individually to students in the classroom
- There are no volunteers at the early learning center
- Student observations, where appropriate, are conducted from the doorway to the classroom.
- Classroom supplies, equipment, learning activities continue to be reflective of the diverse population of students at the early learning centers.

12. CAREER AND TECHNICAL EDUCATION

*CTE does not specifically apply to 4410 preschool special education programs.

13. ATHLETICS AND EXTRA CURRICULAR ACTIVITIES

The early learning center complies with the guidance and requirements set forth in the DOH Interim Guidance for Sports and Recreation During COVID-19 Public Health Emergency.

All gross motor and physical education activities occur in the classroom, practicing social distancing, wherever possible. Physical activities exclude games, songs, finger plays, and musical activities where there are partners and/or shared materials.

14. SPECIAL EDUCATION

Students enrolled and attending the early learning center are classified as “preschool students with disabilities” and are placed at the early learning center through the NYCDOE Committee on Preschool Special Education. The placement at the early learning centers and the services mandated on each student’s IEP have been determined to be the least restrictive environment (LRE) for the student. Under contract with the NYCDOE, the services provided to students and their families are considered as “free and appropriate public education” (FAPE) for the students.

As a NYSED approved 4410 preschool special education program and as a contracted “independent” school with the NYCDOE, the early learning center provides the following services at “no cost” to families:

- Multidisciplinary evaluations (virtual at the present time) to children presenting with concerns regarding their development
- Special education classes
- Related services (occupational therapy, speech therapy, physical therapy, counseling)
- Social services
- School Nurse services

The early learning center is an Americans With Disabilities Act (ADA) accessible site. Communication is provided to families, in an orally & written format in their primary language. The early learning center works collaboratively with the CPSE’s & CSE’s in terms of referrals, evaluations, participation in IEP meetings (initial, annual & requested reviews), placement of students, transition as students either age out of services or are in need of less restrictive or more restrictive services. CPSE Administrators have been notified as to which model families select for services (i.e., 100% remote instruction or the blended model of remote instruction and in-person services). Should government authorities mandate that schools close, the early learning center will immediately notify the CPSE Administrators as the early learning center returns to 100% remote instruction.

Student progress will continue to be monitored informally daily and progress will be documented quarterly using the developmental checklists. Families receive written progress reports and participate in parent-teacher conferences on a quarterly basis.

It is the intention of the early learning center to keep the classroom “pods” intact with limited contact between classrooms and staff outside of the classroom:

- Therapists will be assigned to classrooms for both remote and in-person services for each student.
- Wherever possible, therapy sessions are conducted in the classroom.
- Teaching staff & Therapists escort “their” students to & from the school buses.
- Teaching staff & Therapists escort “their” student to the classroom & from the classroom when students are brought to school & picked up by family members.
- Supervisors refrain from coming into the classrooms, wherever possible. All interactions occur from the doorway.
- Teaching staff & Therapists assigned to the classroom participate with the classroom with emergency drills.

15. BILINGUAL AND WORLD LANGUAGES

The Bronx Early Learning Center is approved by NYCDOE as an Interim Alternate Placement (IABP) Program. At least one staff member in each classroom is fluent in Spanish, and in each IABP classroom, the staff have received ELL training. In addition, one Social Worker is bilingual, staff member in the Intake Department is bilingual, and the front desk staff are bilingual. Students whose primary language is Spanish receive speech therapy from a clinician who has a NYS bilingual extension. All written communications to parents is sent home in both English and Spanish. During remote instruction, translators are assigned to monolingual Occupational Therapists and Physical Therapists, as needed, to assist with translation during therapy sessions. All parent council meetings are conducted either with separate Spanish language sessions or with a translator present at the meeting.

When students are referred to the Bronx Early Learning Center for a multidisciplinary evaluation, a Home Language Survey is conducted with the family to determine if the child will require a bilingual multidisciplinary evaluation. If the family’s primary language is Spanish, the Intake Department staff communicate with the family in their preferred language and all written documents are provided in Spanish. A bilingual evaluation team is assigned to conduct the evaluations with the student. If a student is referred by the Preschool Committee on Special Education to the Bronx Early Learning Center after he/she is evaluated, and it is determined that Spanish is the primary language of the student, if the early learning center is selected as the appropriate placement for the student, the center is able to provide the special education services in an IABP classroom with bilingual therapy services.

16. STAFFING:

It is the intention of the early learning centers to provide NYS certified Teachers for each classroom, whether services are provided via remote instruction and/or in-person instruction. Recruitment efforts for NYS certified Teachers are ongoing and have continued during school closure. Where a NYS certified Teacher is not available, teachers with supplementary certifications, Trans B certifications, COVID-19 emergency certification, and Internship

Certificate certification are utilized. Teachers with the alternative certifications receive additional individualized supervision from the Director/assistant Directors, including: review of their lesson plans, organization of classroom environment, implementing monthly themes/unit, informally assessing student progress, preparing written reports, participation in team meetings, participation in IEP meetings.

*Our early learning center will continue diligent recruitment efforts to identify and process qualified Teachers, and Substitute Teachers, as appropriate. During the 2021-2022 school year, as permitted by NYSED, if qualified Substitute Teachers cannot be engaged, individuals with a high school diploma or equivalent, even those individuals not working toward NYS certification can be first engaged for up to ninety (90) days and then beyond the first ninety (90) day period through the end of June 2022, as long as the Superintendent (i.e., VOA Director of Early Childhood Educational Services) documents and attests that recruitment efforts did not identify a fully qualified Substitute Teacher. The Superintendent (i.e., VOA Director of Early Childhood Educational Services) must attest to the shortage of qualified recruits initially and then at the end of the first ninety (90) day period. Recruitment efforts will be extensively documented.

17. TEACHER AND PRINCIPAL EVALUATION SYSTEM

*Preschool special education 4410 programs are not subject to the specific laws and regulations regarding professional evaluation cited in the NYSED guidance.

All staff participate in the program performance evaluation process three times per year with their Supervisor (i.e., initial at the beginning of the school year, mid-year review, and at the end of the school year).

18. STUDENT TEACHING

The early learning center works collaboratively with colleges and universities to have student Teachers and students majoring in occupational therapy, speech therapy, physical therapy, social work, and school psychology participate in our program. It is the intention of the early learning center to continue to have student teachers and student clinicians participate in remote instruction and in-person services during the 2021-2022 school year. Assigned student teachers and student clinicians are included in all staff development training provided to all staff at the throughout the school year.