

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



Entity ID	CTDS	LEA NAME
4360	07-87-59-000	Khalsa Montessori Elementary School

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:
Universal and correct wearing of masks	Y	Face coverings or masks are meant to protect other people in case the wearer is unknowingly infected but does not have symptoms. KMS follows CDC/AZDHS guidelines masking and community level. Currently, masks are optional indoors as well as outdoors. This new policy is modeled on the CDC's Community Level which is low in Maricopa County.
Modifying facilities to allow for physical distancing (e.g., use of cohorts/podding)	Y	KMES cohorts are no longer separated by class during school or in the after school program. Classes have smaller sizes and students follow the 3' distance guideline as much as possible.
Handwashing and respiratory etiquette	Y	<p>Washing hands can keep you healthy and prevent the spread of infections from one person to the next. All children and staff will engage in hand hygiene at the following times:</p> <ul style="list-style-type: none"> <li>● Arrival at school whether outside or inside</li> <li>● Arrival to the classroom and after breaks</li> <li>● Before and after eating or handling food</li> <li>● After using the toilet or helping a child use the bathroom</li> <li>● After coming in contact with bodily fluid</li> <li>● After playing outdoors or in sand</li> <li>● After handling garbage</li> <li>● Before touching your eyes, nose, or mouth because that's how germs enter our bodies.</li> </ul> <p>Follow Five Steps to Wash Your Hands the Right Way</p> <p>Follow these five steps every time:</p> <ol style="list-style-type: none"> <li>1. Wet your hands with clean, running water (warm or cold), turn off the tap, and apply soap.</li> <li>2. Lather your hands by rubbing them together with the soap. Lather the backs of your hands, between your fingers, and under your nails.</li> <li>3. Scrub your hands for at least 20 seconds.</li> <li>4. Rinse your hands well under clean, running water.</li> <li>5. Dry your hands using a clean towel or air dry them.</li> </ol> <p>After assisting children with handwashing, staff should also wash their own hands.</p>

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		<p>Use Hand Sanitizer for Adults When You Can't Use Soap and Water</p> <p>Washing hands with soap and water is the best way to get rid of germs in most situations. If soap and water are not readily available, you can use an alcohol-based hand sanitizer that contains at least 60% alcohol. Sanitizers can quickly reduce the number of germs on hands in many situations.</p> <p>How to use hand sanitizer</p> <ol style="list-style-type: none"> <li>1. Apply the gel product to the palm of one hand (read the label to learn the correct amount).</li> <li>2. Rub your hands together.</li> <li>3. Rub the gel over all the surfaces of your hands</li> </ol> <p>This should take 20 around seconds.</p>
<p>Cleaning and maintaining healthy facilities, including improving ventilation</p>	<p>Y</p>	<p>KMS layers of protection at school: frequent hand washing and air purifiers in each classroom, will continue. Classrooms within the school will allow children to play during outside recess time. We will no longer separate students by class before start times, during lunch/recess times, and departure times. Again, this is a strategic risk assessment where students will interact and play while outside. Our teacher to student ratio will be no greater than 1:14 in elementary, 1:10 in primary and 1:5 in toddler programs.</p> <p>We will continue to model grace and courtesy lessons to navigate this new world we live in: to learn how to wash hands thoroughly, why it's important to do so, why people are wearing masks and how to put one on and take one-off; who has a greater risk of becoming sick and how we can lessen the likelihood of infection by our actions and choices.</p>
<p>Contact tracing in combination with isolation and quarantine, in collaboration with the State, local, territorial, or Tribal health departments</p>	<p>Y</p>	<p>Contact Tracing» Contact tracing is no longer recommended and is not practiced by MCPHD.</p> <p>Communication» Khalsa Montessori School will communicate with all families regarding any infectious disease outbreaks including COVID-19.</p> <p>Monitoring Absenteeism» Khalsa Montessori School administrative staff will monitor absenteeism among children and staff. Any unusual patterns will be considered when evaluating the need for responding to chronic absenteeism.</p> <p>If COVID-19 is confirmed in a child or staff member in a classroom, the school requires they</p>

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		follow school procedures for any infectious illness. They may return to school if they have no symptoms, are improving and at least 24 hours have passed with no fever without the use of fever reducing medication. Wearing of masks is left to the discretion of the family. Khalsa requires that families report positive cases to the on-site coordinator. Confidentiality will be maintained.
Diagnostic and screening testing	Y	The Concentric Pooled Testing program is no longer available and KMES does not provide any on-site testing to students or staff. Staff and parents are encouraged to test if they suspect that they have COVID-19 and to report any positives to the on-site coordinator.
Efforts to provide vaccinations to school communities	N	KMES has communicated to families the availability of vaccinations as they have become available to younger age groups. We have not sponsored a pop-up clinic for vaccinations.
Appropriate accommodations for children with disabilities with respect to health and safety policies	Y	All students follow the same protocols and support is provided for any student who needs help to meet those expectations.
Coordination with State and local health officials	Y	KMES has coordinated with AZDHS for vaccination of staff, available resources for parents/caregivers regarding vaccine availability and with updates from the MCDPH SHOES webinars.  The COVID-19 Health Emergency has been declared over and KMES does not create a COVID-19 Operating Plan for the school.

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?

Khalsa Montessori School will continue instruction in the event of an extended campus closure following the plan developed School Year (SY) 2020-21. The staff at Khalsa successfully implemented this plan throughout the year. We endeavored in our Distance Learning Plan (DLP) to accomplish three K–6 goals within a flexible framework:

- Live Student-Teacher Contact Time
- Remote Content Delivery
- Remote Monitoring of Student Progress/Student Assessment

It is our intention that we continue to live our mission, vision, and strategic plan, which together assert that, in order to prepare our students to respond to an ever-changing world, learning remains responsive, adaptive, personalized, and relationship-based. The School Director will periodically send email updates to parents and faculty/staff apprising them of any pertinent information about when Khalsa might reopen for regular classes. As with the decision to close campus, the decision to reopen school for regular classes will be made through close consultation with the school's Board of Directors.

Khalsa's approach to distance learning will be based on the methods and strategies from SY 2020-21, which defined the channels we used for communication, the online platforms we employed, the roles, responsibilities, and

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expectations Khalsa had for faculty, parents, and students, guidelines for how parents/guardians can support their children’s learning, and a host of other priorities and considerations tailored to make the best of challenging circumstances.

Students’ Needs:	
Academic Needs	Any student who exhibited academic needs/challenges has early intervention tutoring this fall. Their progress is evaluated at intervals to ascertain the need for additional services. Those students who were identified in need of additional support are provided with tutoring, reading intervention instruction, and math intervention instruction before, during or after school.
Social, Emotional and Mental Health Needs	<p>KMES has Montessori trained staff who provide staff workshops, teacher observation and support for each level as well as individual consultation for challenging student behavior. They have supported teachers with observations in class and staff discussions by levels. They offer feedback or make a plan with individual teachers to address identified issues.</p> <p>Positive Discipline is a school wide endeavor to address students’ social, emotional and mental health needs through a lens that is compatible with the Montessori philosophy. Faculty completed a book study of the newly published “Positive Discipline in a Montessori Classroom” by Dr. Jane Nelson and Chip De Lorenzo. Administrative and support staff have also taken on-line Positive Discipline training, on-site training with a Montessori trained teacher with interactive staff workshops.</p>
Other Needs (which may include student health and food services)	Students learn through the gardening program the importance of nutritious food as well as serving others by donating produce to St. Mary's Food Bank. KMES provides time outdoors for students to learn skills and provide an alternative environment when needed.
Staff Needs:	
Social, Emotional and Mental Health Needs	KMES has an Employee Assistance Program to give staff the option of counseling and other wellness services.
Other Needs	n/a

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>09/09/23</b>
Public Input	
Describe the process used to seek public input, and how that input was taken into account in the revision of the plan:	KMES provides all families the opportunity to inquire about school policies, plans and procedures at the All Parent Evening August 24, 2023. Any parent concern is addressed in open discussion when the plan is reviewed. Also, any written concerns are addressed individually. KMS Board of Directors has open meetings where the proposed plan is reviewed. Discussion is open to the public before the Board votes on changes. This process has been followed nine times: Fall 2020, Spring 2021, Fall 2021, Spring 2022, Summer 2022 and Fall 2022, Spring 2023, Summer 2023 and Fall 2023.

## 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