

## APPENDIX E

### *Malverne Union Free School District*

#### **Emergency Remote Instruction Plan Appendix**

#### **District-wide School Safety Plan (DWSSP)**

#### **Required for the 2023-2024 School Year**

**(Template created on 5/5/2023)**

This *Emergency Remote Instruction Plan Appendix* is being shared with the AESHP Listserv, in edited form as a template, with permission from the Burnt Hills-Ballston Lake Central School District. It was created by Cynthia Holmes and Mark Sullivan with district-specific edits and other feedback provided by the school district.

NOTE: This appendix is still in draft form and has not yet been officially approved by the BH-BL Board of Education.

#### **Instructions:**

1. Read the template in its entirety.
2. Make it BOCES/district-specific by editing/confirming:
  - Search the document for the word “insert” and edit all red text.
3. Remove all square brackets “[ ]” and all unneeded language within the brackets before sharing as a final document.
4. Page 6, Special Services
  - Add the *SUPPORT FOR STUDENTS WITH DISABILITIES DURING EMERGENCY CLOSING VIRTUAL INSTRUCTION* information on page 10 to the district’s website or a Google doc, then insert the hyper link over the words “this document”.
5. Add your final version to your 2023-2024 DWSSP.
6. If improvements are made, please share them on the AESHP Listserv.

#### 4. Communications Planning (cont.):

Completed	In Progress	Not Started	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Develop and test platforms (e.g., hotlines, telephone trees, dedicated websites, and local radio or TV stations) for communicating pandemic status and actions to school district staff, students, and families.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Develop and maintain up-to-date communications contacts of key public health and education stakeholders and use the network to provide regular updates as the influenza pandemic unfolds.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Assure the provision of redundant communication systems/channels that allow for the expedited transmission and receipt of information.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Advise district staff, students and families where to find up-to-date and reliable pandemic information from federal, state and local public health sources.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Disseminate information about the LEA's pandemic influenza preparedness and response plan (e.g., continuity of instruction, community containment measures).
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Disseminate information from public health sources covering routine infection control (e.g., hand hygiene, cough/sneeze etiquette), pandemic influenza fundamentals (e.g., signs and symptoms of influenza, modes of transmission) as well as personal and family protection and response strategies (e.g., guidance for the at-home care of ill students and family members).
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Anticipate the potential fear and anxiety of staff, students, and families as a result of rumors and misinformation and plan communications accordingly.



**1. Planning and Coordination (cont.):**

Completed	In Progress	Not Started	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consider developing in concert with the local health department a surveillance system that would alert the local health department to a substantial increase in absenteeism among students.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Implement an exercise/drill to test your pandemic plan and revise it periodically.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Share what you have learned from developing your preparedness and response plan with other LEAs as well as private schools within the community to improve community response efforts.

**2. Continuity of Student Learning and Core Operations:**

Completed	In Progress	Not Started	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Develop scenarios describing the potential impact of a pandemic on student learning (e.g., student and staff absences), school closings, and extracurricular activities based on having various levels of illness among students and staff.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Develop alternative procedures to assure continuity of instruction (e.g., web-based distance instruction, telephone trees, mailed lessons and assignments, instruction via local radio or television stations) in the event of district school closures.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Develop a continuity of operations plan for essential central office functions including payroll and ongoing communication with students and parents.

**3. Infection Control Policies and Procedures:**

Completed	In Progress	Not Started	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Work with the local health department to implement effective infection prevention policies and procedures that help limit the spread of influenza at schools in the district (e.g. promotion of hand hygiene, cough/sneeze etiquette). Make good hygiene a habit now in order to help protect children from many infectious diseases such as flu.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Provide sufficient and accessible infection prevention supplies, such as soap, alcohol-based/waterless hand hygiene products (containing at least 60% alcohol), tissues, and receptacles for their disposal.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Establish policies and procedures for students and staff sick leave absences unique to a pandemic influenza (e.g., non-punitive, liberal leave).
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Establish sick leave policies for staff and students suspected to be ill or who become ill at school. Staff and students with known or suspected pandemic influenza should not remain at school and should return only after their symptoms resolve and they are physically ready to return to school.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Establish policies for transporting ill students.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Assure that the LEA pandemic plan for school-based health facilities conforms to those recommended for health care settings (Refer to <a href="http://www.hhs.gov/pandemicflu/plan">www.hhs.gov/pandemicflu/plan</a> ).

**4. Communications Planning:**

Completed	In Progress	Not Started	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Assess readiness to meet communication needs in preparation for an influenza pandemic, including regular review, testing, and updating of communication plans.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Develop a dissemination plan for communication with staff, students, and families, including lead spokespersons and links to other communication networks.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ensure language, culture and reading level appropriateness in communications by including community leaders representing different language and/or ethnic groups on the planning committee, asking for their participation both in document planning and the dissemination of public health messages within their communities.

## SCHOOL DISTRICT (K-12) PANDEMIC INFLUENZA PLANNING CHECKLIST



Local educational agencies (LEAs) play an integral role in protecting the health and safety of their district's staff, students and their families. The Department of Health and Human Services (HHS) and the Centers for Disease Control and Prevention (CDC) have developed the following checklist to assist LEAs in developing and/or improving plans to prepare for and respond to an influenza pandemic.

Building a strong relationship with the local health department is critical for developing a meaningful plan. The key planning activities in this checklist build upon existing contingency plans recommended for school districts by the U.S. Department of Education (Practical Information on Crisis Planning: A Guide For Schools and Communities <http://www.ed.gov/admins/lead/safety/emergencyplan/crisisplanning.pdf>).

Further information on pandemic influenza can be found at [www.pandemicflu.gov](http://www.pandemicflu.gov).

### I. Planning and Coordination:

Completed	In Progress	Not Started	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Identify the authority responsible for declaring a public health emergency at the state and local levels and for officially activating the district's pandemic influenza response plan.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Identify for all stakeholders the legal authorities responsible for executing the community operational plan, especially those authorities responsible for case identification, isolation, quarantine, movement restriction, healthcare services, emergency care, and mutual aid.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As part of the district's crisis management plan, address pandemic influenza preparedness, involving all relevant stakeholders in the district (e.g., lead emergency response agency, district administrators, local public health representatives, school health and mental health professionals, teachers, food services director, and parent representatives). This committee is accountable for articulating strategic priorities and overseeing the development of the district's operational pandemic plan.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Work with local and/or state health departments and other community partners to establish organizational structures, such as the Incident Command System, to manage the execution of the district's pandemic flu plan. An Incident Command System, or ICS, is a standardized organization structure that establishes a line of authority and common terminology and procedures to be followed in response to an incident. Ensure compatibility between the district's established ICS and the local/state health department's and state education department's ICS.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Delineate accountability and responsibility as well as resources for key stakeholders engaged in planning and executing specific components of the operational plan. Assure that the plan includes timelines, deliverables, and performance measures.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Work with your local and/or state health department and state education agencies to coordinate with their pandemic plans. Assure that pandemic planning is coordinated with the community's pandemic plan as well as the state department of education's plan.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Test the linkages between the district's Incident Command System and the local/state health department's and state education department's Incident Command System.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Contribute to the local health department's operational plan for surge capacity of healthcare and other services to meet the needs of the community (e.g., schools designated as contingency hospitals, schools feeding vulnerable populations, community utilizing LEA's healthcare and mental health staff). In an affected community, at least two pandemic disease waves (about 6-8 weeks each) are likely over several months.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Incorporate into the pandemic influenza plan the requirements of students with special needs (e.g., low income students who rely on the school food service for daily meals), those in special facilities (e.g., juvenile justice facilities) as well as those who do not speak English as their first language.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Participate in exercises of the community's pandemic plan.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Work with the local health department to address provision of psychosocial support services for the staff, students and their families during and after a pandemic.

Date draft was presented to employee representative(s): \_\_\_\_\_

Date finalized: \_\_\_\_\_

Location of publication: \_\_\_\_\_

Definitions included in the legislation are provided below.

**Essential worker:** *is required to be physically present at a work site to perform his or her job. Such designation may be changed at any time in the sole discretion of the employer.*

**Non-essential worker:** *is not required to be physically present at a work site to perform his or her job. Such designation may be changed at any time in the sole discretion of the employer.*

**Personal protective equipment:** *all equipment worn to minimize exposure to hazards, including gloves, masks, face shields, foot and eye protection, protective hearing devices, respirators, hard hats, and disposable gowns and aprons.*

**Communicable disease:** *an illness caused by an infectious agent or its toxins that occurs through the direct or indirect transmission of the infectious agent or its products from an infected individual [or via an animal, vector or the inanimate environment to a susceptible animal or human host].*

**Retaliatory action:** *the discharge, suspension, demotion, or discrimination against any employee, or other adverse employment action taken against an employee in the terms and conditions of employment.*

h.) Other requirements determined by the department of health such as contact tracing or testing, social distancing, hand hygiene and disinfectant, or mask wearing.

#### Department of Health Requirements

We will work closely with the Nassau County Department of Health to determine the need for activation of our Plan. The following procedures will be followed by administrators, principals, school nurses for reporting communicable disease, including Coronavirus, Influenza, etc., and communicating with the Health Department: o Report suspected and confirmed cases of influenza on the monthly school's *Communicable Disease Report*, (DMS-485.7/93; HE-112.4/81) and submit to: Nassau County Department of Health, Bureau of Infectious Diseases, 240 Old Country Road, Mineola, N.Y. 11501.

o Public Health Consultation and Immediate Reporting: 516-227-9639

o Coronavirus Hotline: 888-364-3065

o Fax: 516-227-9669

o Weekend/After-hours Consultation and Reporting: 516-742-6154

- The Nassau County Department of Health will monitor County-wide cases of communicable disease and inform school districts as to appropriate actions.
- The Superintendent Dr. Kusum Sinha will help coordinate our Pandemic planning and response effort. This person will work closely with the District-Wide School Safety Team that has responsibility for reviewing and approving all recommendations and incorporating them into the District-Wide School Safety Plan. The school district Medical Director and nurses will be vital members of the Safety Team. Because of the potential importance of technology in the response effort (communication and notification) the school district technology director will also be an important Team member. The Assistant Superintendent of Human Resources, Business Official, Facility Director, Food Service Director, Transportation Coordinator, Public Information Officer and Curriculum Director will also be vital to the planning effort. Other non-traditional individuals may also be required to be part of the Team.
- The District-Wide School Safety Team will review and assess any obstacles to implementation of the Plan. The *CDC School District Pandemic Influenza Planning Checklist* was reviewed on May 3, 2022 for this determination and has considered issues related to Planning and Coordination; Continuity of Student Learning; Core Operations; Infection Control Policies and Procedures; and Communication.
- The school district will emphasize hand-washing and cough/sneezing etiquette through educational campaigns including the CDC Germ Stopper Materials; Cover Your Cough Materials; It's a SNAP Toolkit; and the NSF Scrub Clean; which can all be accessed at <http://www.cdc.gov/flu/school/>.
- We will educate and provide information to parents, staff, and students about our Pandemic Plan and about how to make an informed decision to stay home when ill. We will utilize our website, postings and direct mailings for this purpose.

f.) A protocol for documenting hours and work locations, including off-site visits, for essential employees. Such protocol shall be designed only to aid in tracking of the disease and to identify the population of exposed employees, to facilitate the provision of any benefits which may be available to certain employees and contractors on that basis.

**Consider daily symptom checks, absences, and supervisor notification.**

#### **Hours and Work Locations Protocol**

It is recognized that as the work environment changes to adapt to the emergency situation and typical work schedules are modified it can become more difficult to track employees especially if they conduct work off site or in numerous locations. The ability to identify these individuals will be extremely important if contact tracing is necessary during a communicable disease crisis.

**See Work Shift and Protocols – page 29.**

g.) A protocol for how the public employer will work with such employer's locality to identify sites for emergency housing for essential employees in order to further contain the spread of the communicable disease that is the subject of the declared emergency, to the extent applicable to the needs of the workplace.

#### **Emergency Housing Protocol**

Emergency housing for essential workers is not considered to be generally required for school employees as opposed to healthcare workers and other critical care employees. However, we have canvassed local hotels/motels so we may be prepared for an unanticipated need and should be able to access the following if necessary:

1. Residence Inn Garden City (516-742-2500)
2. Garden City Hotel (516-747-3000)
3. La Quinta (516-705-9000)
4. Hyatt Place (516-222-6277)
5. Hampton Inn (516-227-2720)
6. Long Island Marriott Uniondale (516-794-3800)
7. Hilton Garden Inn Westbury (516-683-8200)
8. Courtyard by Marriott Westbury (516-542-1001)
9. Holiday Inn Westbury (516-997-5000)
10. Red Roof Plus Garden City (516-794-2555)

Nassau County School Districts have also established school building shelter sites across the County in cooperation with the Nassau County Office of Emergency Management which may be utilized in the event of any emergency situation. If deemed necessary, school districts will work closely with Office of Emergency Management to determine housing options.

**Hand Sanitizing:**

- Hand sanitizer dispensers will be located and installed in approved locations.

**Trash removal:**

- Trash will be removed daily.
- Garbage cans or process for collecting trash during lunch periods in classrooms will be increased where necessary.
- No-touch trash receptacles will be utilized, where possible.

**Alternate Cleaning Methods:**

- The effectiveness of such as ultrasonic waves, high intensity UV radiation, and LED blue light, against the virus that causes COVID-19 or other communicable disease has not been fully established.

In most cases, fogging, fumigation, and wide-area or electrostatic spraying are not recommended as primary methods of surface disinfection and have several safety risks to consider, unless specified as a method of application on the product label.

**Employer Policy on Available Leave to Receive Testing, Treatment, Isolation, or Quarantine****Employee Assistance Program (EAP)**

- The Human Resources Department will continue to disseminate information to employees about EAP resources. EAP is a voluntary, work-based program that offers free and confidential assessments, short-term counseling, referrals, and follow-up services to employees who have personal and/or work-related problems. EAPs address a broad and complex body of issues affecting mental and emotional well-being, such as alcohol and other substance abuse, stress, grief, family problems, and psychological disorders.

**Staff Absenteeism**

- Instructional staff will call into the Absence Management System when they are absent due to illness. Substitutes will be provided as necessary and as requested.
- The instructional departments will develop a plan to monitor absenteeism of staff, cross-train staff, and create a roster of trained back-up staff.
- Local health departments (LHD) will assess conditions and tailor guidance to their jurisdiction. A LHD may implement masking requirements that are more restrictive than the state. LHDs and school districts and private schools may consult and collaborate on masking and testing decisions. Some school districts cross county boundaries. Schools should follow the guidance of the LHD for the county in which the school building is located.

## Disinfection Protocol

Cleaning removes germs, dirt, and impurities from surfaces or objects. Cleaning works by using soap (or detergent) and water to physically remove germs from surfaces. This process does not necessarily kill germs, but by removing them, it lowers their numbers and the risk of spreading infection. Visibly soiled surfaces and objects must be cleaned first. If surfaces or objects are soiled with body fluids or blood, use gloves and other standard precautions to avoid coming into contact with the fluid. Remove the spill, and then clean and disinfect the surface.

Sanitizing lowers the number of germs on surfaces or objects to a safe level, as judged by public health standards or requirements. This process works by either cleaning or disinfecting surfaces or objects to lower the risk of spreading infection.

### **Routine cleaning of school settings includes:**

- Cleaning high contact surfaces that are touched by many different people, such as light switches, handrails and doorknobs/handles
- Dust- and wet-mopping or auto-scrubbing floors
- Vacuuming of entryways and high traffic areas
- Removing trash
- Cleaning restrooms
- Wiping heat and air conditioner vents
- Spot cleaning walls
- Spot cleaning carpets
- Dusting horizontal surfaces and light fixtures
- Cleaning spills

### **Disinfecting:**

Disinfecting kills germs on surfaces or objects by using chemicals to kill germs on surfaces or objects. This process does not necessarily clean dirty surfaces or remove germs, but by killing germs on a surface after cleaning, it can further lower the risk of spreading infection.

- We will follow cleaning and disinfection requirements from the Centers for Disease Control and Prevention (CDC) and the Department of Health will be adhered to.
- Custodial logs will be maintained that include the date, time and scope of cleaning and disinfection. Cleaning and disinfection frequency will be identified for each facility type and responsibilities will be assigned.
- Hand hygiene stations will be provided and maintained, including handwashing with soap, running warm water, and disposable paper towels, as well as an alcohol-based hand sanitizer containing 60% or more alcohol for areas where handwashing is not feasible.
- Regular cleaning and disinfection of facilities and more frequent cleaning and disinfection for high-risk areas used by many individuals and for frequently touched surfaces, including desks and cafeteria tables will be conducted.
- Regular cleaning and disinfection of restrooms will be performed.
- Cleaning and disinfection of exposed areas will be performed in the event an individual is confirmed to have communicable disease, with such cleaning and disinfection to include, at a minimum, all heavy transit areas and high-touch surfaces.
- Although cleaning and disinfection is primarily a custodial responsibility, appropriate cleaning and disinfection supplies will be provided to faculty and staff as approved by Central Administration.
- Additional paper towel dispensers may be installed in other designated spaces.

and local officials, the Human Resources Department will help to decide if schools need to be closed.

- Continuity of instruction will need to be considered in the event of significant absences or school closure. Restructuring of the school calendar may become necessary. We will work closely with the New York State Education Department on

this potential result throughout the crisis period. Some of the alternate learning strategies we have implemented to be

used in combination as necessary include:

- o Hard copy, self-directed lessons

- o Use of mobile media storage devices for lessons (CDs, Jump Drives, iPads)

- o On-line instruction; on-line resources; on-line textbooks

- o Communication modalities for assignment postings and follow-up: telephone; Postal Service; cell phone,

cell phone mail, text messages; e-mail; automated notification systems; website postings

CDC and NYSDOH Recommendations:

- Closing off areas used by a sick person and not using these areas until after cleaning and disinfection has occurred;

- Opening outside doors and windows to increase air circulation in the area.

- Clean and disinfect all areas used by the person suspected or confirmed to be sick, such as offices, classrooms, bathrooms, lockers, and common areas.

- Once the area has been appropriately cleaned and disinfected it can be reopened for use.

- Individuals can return to the area and resume school activities immediately after cleaning and disinfection.

Notifications:

To protect themselves and others and stop the spread of communicable disease in the household and community, schools should notify through either group or individual level contact tracing affected school staff, students, and their parents/guardians whenever an individual either:

1. Was in the same room as an infected individual and so was exposed or potentially exposed (i.e., in the same classroom as an infected individual for longer than 1 minutes), if schools are employing "group level contact tracing," or

2. Was identified as being exposed because they were a close contact of an infected individual if schools are employing "individual level contact tracing."

Note: Group contract tracing, (e.g., classroom, school bus), in #1 above, is expected to alleviate the need for most classic ("individual") contact tracing in schools. Criterion #2 above should be used if the school is conducting individual-level contact tracing to reduce the number of students affected by masking/testing and in some situations where there might have been exposures outside the classroom setting, such as non-classroom-based extracurricular activities.