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Technical Assistance Bulletin

MarylandPublicSchools.org



Division of Early Intervention and Special Education Services | Supplement to TAB #20-10

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Recovery Efforts: Addressing the Reopening of Nonpublic Special Education Schools

This document has been developed in alignment with Technical Assistance Bulletin (TAB) #20-01: *Serving Children with Disabilities under IDEA during School Closures due to the Covid-19 Pandemic*; #20-02: *Providing Continuity of Learning to Students with Disabilities Through Nonpublic Special Education Schools during COVID-19*; #20-03: *Providing Continuity of Learning to Students with Disabilities during COVID-19*; and #20-09: *Recovery Efforts: Addressing the Provision of FAPE through Alternative Service Delivery Models for Students with Disabilities during the Reopening of Schools*. Please refer to these TABs for additional information and guidance on the provision of services to students with disabilities and their families during this unprecedented time.

Introduction

On June 10, 2020, the State Superintendent of Schools announced, in coordination with the second stage (medium risk) of the Governor's *Maryland Strong: Roadmap to Recovery Plan*, that nonpublic special education schools (NPSs) will have the option to reopen their school buildings to provide instruction through an alternative service delivery model, including face-to-face instruction. In response to this announcement, NPSs may begin to develop and implement a Recovery Plan aligned with requirements outlined by the Governor, the State Superintendent of Schools, local health departments, local government orders, and/or other appropriate agencies and/or partners. As one of the first programs to reopen following extended school closures, Maryland's NPSs may serve as a model for replication across the State during this recovery period.

The re-entry of students with disabilities into NPS buildings will require innovative coordination, thoughtful planning, and intentional collaboration among families, local school systems, public agencies (LSSs/PAs), staff, and outside partners to support the continuum of teaching and learning while addressing health and safety concerns for the school community. This guidance provides important factors to consider in the development and implementation of the NPS Recovery Plan, including the following topical guidance:

- Recovery Plan Development Teams and Communication
- Health and Safety
- School Operations/Service Delivery Model
- Transportation
- Resources

Each Recovery Plan must continue to comply with all applicable federal and state laws. NPSs are encouraged to consult with legal counsel if a question arises about the legality of a particular planning decision.

Recovery Plan Development Teams and Communication

Effective recovery planning begins with a strong team of individuals who represent the needs and interests of the school community, including those with health and safety expertise. NPSs should consider creating a Recovery Plan Development Team, representing various stakeholders, to provide opportunities for input and support from critical school community members. Each NPS is encouraged to engage with all facets of their unique school community, including a robust partnership with each LSS/PA to which their students are enrolled. Stakeholders invested in the work of each NPS include:

- LSS partners;
- LSS special education and transportation representatives;
- NPS teachers/service providers;
- School nurse or health care provider;
- Local Health Department representative or other medical consultants;
- Public Agency representative, as appropriate;
- Behavioral Specialists;
- Board members;
- Parent representative; and
- Others, as appropriate.

The NPS and its Recovery Plan Development Team should consider the following as they move forward in reopening their school buildings:

- the program's unique building space;
- available resources (for instruction and safety/health);
- programmatic components (offered by the LSS/PA and NPS);
- individual student profiles to address and meet the individual needs of enrolled students;
- considerations for modes of transportation to transport students; and
- best-practices informed by research.

Essential to the success of the Recovery Plan is effective and robust communication with the school community and the sending LSS/PA. Communication should be consistent and routine, allowing for timely updates as each NPS moves through recovery phase planning and beyond. For more information on Recovery Teams and communication, please see the [Maryland Together: Maryland's Recovery Plan for Education](#).

Health and Safety

As a NPS prepares to reopen the doors of their school buildings and facilities, it should consider both the school-wide health and safety policies and procedures, as well as the health and safety needs of specific individual community members.

Collaboration across agencies and service providers is a critical element in developing a comprehensive plan. As such, NPSs are encouraged to collaborate with local health departments and/or other appropriate health care professionals to obtain guidance and feedback throughout the planning process. They should also consider guidelines and recommendations established by the Maryland Department of Health (MDH) and the Centers for Disease Control and Prevention (CDC). NPSs must establish program/facility-wide guidelines outlining the necessary steps to establish a safe physical environment for all individuals who enter the school building.

In addition, NPSs must also consider each individual student/staff member and their specific needs, especially for medically fragile students or those with underlying health conditions. Ongoing communication with families, LSSs, and Individualized Education Program (IEP) teams will be essential in determining best practices to address any student-specific concerns, including those with chronic or intermittent health conditions. Decisions regarding individual students should be made through the IEP team process as would typically happen during normal school operations.

In addressing system-wide health and safety, the following points should be addressed and considered during planning:

- Review of school facility plans for social distancing and individual student circumstances (e.g., wheelchair use, classroom set up, etc.).
- Consider appropriate classroom ratios to ensure social distancing (MDH/CDC guidance or COMAR 13A.09.10.17E, depending on which is more restrictive).
- Clean and disinfect school buildings (consider ill-effects on students with chemical sensitivities).
- Use of face masks (for staff use, for student use, and possible adverse impact on the student).
- Supply of personal protective equipment (PPE) and cleaning supplies.
- Plan for how to consistently teach, practice, and reinforce washing hands and covering coughs and sneezes among students and staff. This may include providing visual

prompts, and when necessary, direct supervision and/or hand over hand instruction for handwashing.

- Professional development and information to be provided to all staff regarding necessary safety actions and outlined implementation steps to promote a safe and healthy physical environment.
- Adapt or use examples of screening methods in MSDE/MDH/CDC guidance.

Guiding questions:

- Is the NPS able to fully reopen the school building, or is there a need to limit the number of students and staff that can be in the building at any given time?
- How will social distancing requirements be implemented between students and among students and staff?
- Is it possible to repurpose space within the building for instructional groups or close communal use spaces, such as common break rooms for staff, multi-purpose rooms, computer centers, gymnasiums, libraries, dining halls/cafeterias? If not, is it possible to schedule staggered use of communal areas and implement enhanced cleaning and disinfecting in between uses?
- Is it feasible to keep the same group of students together each day to limit exposure to other students? Would scheduling allow for the same providers to remain with the same group each day and from week to week? This may help to reduce transitions and/or limit travel in the building.
- Should arrival and drop-off times be staggered or other protocols put into place to limit direct contact with others? Should procedures limit parent/visitor access to the facility to essential functions necessary to implement a Free Appropriate Public Education (FAPE) or convene IEP teams?
- What adjustments will be made to the NPS breakfast and/or lunch program? How and where will students be served and eat their meals with social distancing in place and health and safety protocols?
- How will the NPS screen for signs and symptoms of illness among students, staff, providers, and other facility visitors?
- Is there an area that can be utilized to separate anyone who exhibits COVID-like symptoms during hours of operation and ensure that students are not left without adult supervision?
- What steps may need to be taken to check that all water systems and features (e.g., drinking fountains, decorative fountains) are safe to use after a prolonged facility shutdown to minimize the risk of Legionnaires' disease and other diseases associated with water?
- What protocols will need to be implemented to execute a consistent schedule to provide for cleaning, sanitizing, and disinfecting frequently touched surfaces (for example, playground equipment, door handles, sink handles, drinking fountains) multiple times per day and shared objects between use?

- Are ventilation systems operating properly? Is it possible to increase the circulation of outdoor air as much as possible by opening windows and doors, using fans, and other methods? Do not open windows and doors if doing so poses a safety or health risk (for example, allowing pollens in or exacerbating asthma symptoms) to students using the facility. Keep in mind students that flee the classroom.
- How will the requirement for face masks or other appropriate face shields for staff and students be addressed?
 - What alternatives to cloth masks for students with tactile sensitivities, anxieties, health/breathing issues may need to be considered?
 - For students with fears or those who rely on facial expressions for communication, should alternative face coverings, especially for teachers and related service providers, be considered?

Additional health and safety information can be found in the Resource section of this document. See resources 1, 2, 3, and 4.

School Operations/Service Delivery Model

As the NPS plans for reopening of the school building, based on public health guidance, it may determine that returning all students and staff back to the building at once is not feasible. The NPS may choose a blended service delivery model that includes some face-to-face instruction, as well as virtual and/or remote learning. The service delivery model should reflect the needs and resources of the NPS. Some considerations include:

- Staffing for alternative service delivery models, including:
 - Face-to-face instruction;
 - Blended instruction (a combination of face-to-face and virtual instruction);
 - Potential staff shortages (due to increased instructional needs or staff illness); and
 - Teacher certification and waivers.
- How to determine which students are brought back and when
 - Considerations may include:
 - Students that have not engaged during the extended school closure (i.e., students not engaged in learning or did not have access to instruction);
 - Students with a significant gap in instruction; or
 - Student's response to virtual instruction.

Guiding questions:

- Will it be necessary to divide classrooms into smaller groups to comply with social distancing guidelines and/or COMAR requirements? If so,
 - How will the teacher/service provider oversee instruction in both rooms?
 - How will support staff be scheduled?

- Can the rooms be next door to each other?
- What considerations need to be addressed regarding movement and travel throughout the building for staff?
- What steps might reduce student mobility in the building? (e.g., avoid student class changes, rotate class transition times, etc.)
- What changes may need to be made to the daily routines of the school? What adjustments, if any, will need to be made to student schedules? (grade level, class assignment, etc.)
- How will physical education programming be implemented?
- What additional considerations and/or enhancements need to be made to daily schedules, teachers, and/or service provider schedules to address any continued plans for distance learning, whether provided in a hybrid model or distance learning mode only?

Given new health and safety concerns, the service delivery model may need to incorporate the development of and training on health and safety protocols. Some guiding questions include:

- Based on the student population, what needs will students have for reminders of new expectations? (e.g., visual cues, defined personal space in the classroom)
- How will students be taught that physical contact will be limited? (This may be especially important for students that like to hug their teacher.)
 - What physical reminders need to be in place?
 - How will teachers respond to stop/redirect hugging behaviors?
 - What replacement behaviors will be appropriate and successful with the student?
- How will protocols for the care given to students be enhanced for new safety guidelines? (e.g., staff training, regular practice of expectations)
- How will staff manage requirements to provide direct assistance with self-care, toileting, feeding, transferring, managing drool, etc.?
- How will staff implement current Behavior Intervention Plans (BIPs)? Do they need to be revised to address behaviors (e.g., spitting and biting, etc.) that may pose health and safety threats to others?
- What are plans to manage hand over hand instruction? What are staff training needs for these enhanced protocols? Does the student need direct instruction/supervision/prompts for proper handwashing? Can students with significant needs for direct contact be assigned to rooms with sinks available to staff?
- Is there any need for trauma-informed care or mental health training to respond to student and staff member mental/emotional needs related to COVID-19?

It is important to note that as the service delivery model changes for the NPS, it will necessitate reviewing each student's IEP to ensure it can be implemented as written or to determine whether the IEP must be amended or revised. The process for providing a FAPE in changing service delivery models is discussed in Technical Assistance Bulletin #20-09: [Recovery Efforts:](#)

[Addressing the Provision of FAPE through Alternative Service Delivery Models for Students with Disabilities during the Reopening of Schools.](#)

Additional school operations/service delivery model information can be found in the Resource section of this document. See resources 1, 3, and 7.

Transportation

Transportation may present new challenges as LSSs/PAs/NPSs align practices and protocols with new health and safety recommendations. To protect the health and safety of students, drivers, and attendants, a well-developed NPS recovery plan should include detailed information regarding safe transportation services aligned with CDC recommendations for school transportation. Collaboration will also be key in developing the transportation-related section of a NPS recovery plan, and representatives from the NPS and the Transportation Department and Special Education Department from each LSS should be included in planning efforts.

Access to transportation will need to be provided consistent with a FAPE. It is important to remember that transportation for students in a nonpublic placement is, typically, an IEP related service; therefore, the IEP team is responsible for the planning for transportation for each student on a case-by-case basis. It is also recommended that the NPS and LSS representatives review the [Considerations for Transportation Needs for Students with Disabilities during School Recovery Planning](#) flowchart issued by the Division of Early Intervention and Special Education (DEI/SES). This document provides an overview and outline of steps to support transportation-related considerations for students with disabilities. As a reminder, it is essential to consider both compliance and safety factors in transportation decision making options. Furthermore, cost associated with the daily IEP related service transportation are not allowed in the NPS budget.

The following points should be addressed and considered during planning related to transportation:

- Any new student transportation-related services need (including safe transportation of medically fragile students)
- Student transportation options
 - Parent transportation
 - If the parent, NPS, and LSS mutually agree, the parent may transport their child to and from school. Under these circumstances, the parent will be eligible to be reimbursed by the LSS.
 - This matter should be addressed appropriately by the IEP team and documented in accordance with the school district policies and procedures for parent reimbursement for transportation service.
 - Questions to consider:

- Is there a written agreement, including approval with required signatures, that addresses transportation reimbursement costs for individual student transportation prior to individual student transportation implementation between the LSS and NPS?
 - What are the required protocols for parents to drop off and pick up students?
 - What is the emergency plan for a parent that fails to pick up and cannot be reached?
- Use of NPS transportation vehicle
 - When a NPS has the capacity to safely transport students, the LSS and NPS may consider a separate contract to utilize the vans and/or buses of a NPS program.
 - All transportation services provided by the NPS must be provided in compliance with all transportation and vehicle requirements and/or guidelines, including COMAR, State, and local policies.
 - Questions to consider:
 - How will the recommended distance requirements be implemented and supervised in accordance with the school district policies and procedures?
 - How will the requirement to wear a mask be implemented and supervised in accordance with the school district policies and procedures?
- Use of local school system bus
 - Questions to consider:
 - What is the capacity of the LSS to provide transportation?
 - How many school buses, school bus drivers, and bus aides are available?
 - Will additional schedules and less capacity on buses due to social distancing requirements negatively impact the ability of the LSS to provide transportation?
 - How will specific social distancing requirements be implemented on a school bus?
 - If designing a partial return for the student population in an alternative mode, what is the impact of the master schedule on transportation? (Ensure that the transportation plan does not deny a student access to instruction because of the lack of availability of transportation. For example, if the plan is for the NPS to serve different LSSs on alternate days, can the LSS transport the identified students to attend school on those scheduled days? Bus capacity, route challenges, driver availability, etc. are essential planning considerations).

- How do bus capacity for riders, contracts of drivers, and bus routes impact the master plans of the school receiving students from multiple LSSs?
- How do public school staffing plans impact the availability of support for drivers requiring individual student information and the provision of additional training for those drivers that experience challenges during a route?
- What assurance will be put in place that both NPS and LSSs transportation personnel will always be available when students are on the school bus?
- Use of public transportation
 - Questions to consider:
 - Is public transportation open to non-essential travel?
 - Does public transportation continue to be an appropriate safe plan for the student?
 - Does the student have an appropriate level of independence to engage in safe behaviors, including social distancing and wearing protective face coverings, on public transportation, in accordance with public transportation ridership requirements?
 - Is explicit travel training required for the student to independently ride public transportation?
 - Does the student need supervised practice prior to independently using public services again?
 - Can the student get to and from school with new or revised public transportation schedules?
 - What information can the parent provide about the student's use of public transportation during the extended closure? Address the inclusion of any new skills requiring instruction in the IEP.
- Scheduling considerations
 - Alternating local school system service days (e.g., Baltimore City – Monday; Harford County – Tuesday; etc.)
 - Blended service delivery model (e.g., student reports to NPS twice per week and receive virtual instruction three times per week)
 - Blended transportation model (e.g., parent transport to NPS twice per week, LSS transport three days per week)

Additional transportation information can be found in the Resource section of this document. See resource 5 and 6.

Summary

NPS Recovery Plans will be as unique as each individual NPS program and its student population. NPSs are encouraged to continually monitor the implementation and

effectiveness of their Recovery Plan. It is expected that plans will need to be modified, revised, and/or updated as we move through the recovery phase to full school operations. Ongoing and consistent communication with all stakeholders, including families, LSSs, other placing agencies, service providers, and school staff, will be critical regarding plan implementation and necessary revisions, updates, or changes.

Resources

1. *Maryland Together: Maryland's Recovery Plan for Education*

<http://marylandpublicschools.org/newsroom/Documents/MSDERecoveryPlan.pdf>

The Maryland State Department of Education's (MSDE) *Maryland Together: Maryland's Recovery Plan for Education (Recovery Plan)* provides guidance and options for LSSs to consider as they develop their plan to transition from online learning and return to face-to-face instruction. As noted by Dr. Salmon, the *Recovery Plan* is not prescriptive and encourages LSSs to develop a plan that works for unique local circumstances, accounts for lost instructional time, and ensures ongoing health and safety efforts for students, families, and staff.

As such, sections of the *Recovery Plan* speak directly to recommendations for recovery phase planning for students with disabilities served by NPS programs. Page 21 of the *Recovery Plan* provides information and resources to address the unique considerations related to students with disabilities and outlines several specific considerations related to NPSs. Page 30 provides guidance from the Nonpublic School Approval Branch, outlining considerations in determining the most appropriate process for students to return to the nonpublic special education school setting.

2. *Maryland Together: Maryland's Recovery Plan for Child Care*

<http://www.marylandpublicschools.org/newsroom/Documents/MSDEChildCareRecoveryPlan.pdf>

The MSDE *Maryland Together: Maryland's Recovery Plan for Child Care* provides guidance that can be used by early childhood leaders as they continue to serve Maryland's children or begin to reopen. Section III. Guidance for Operating Child Care Programs, adapted from the CDC's Interim Guidance for Child Care Programs, outlines various "Safety Actions" that support providing a safe and healthy environment for children and staff. These "actions" are applicable to NPSs, and it is recommended that programs consider the specific actions outlined in their plan.

3. Centers for Disease Control and Prevention (CDC), COVID-19, Childcare, Schools, and Youth Programs: Plan, Prepare, and Respond.

<https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/index.html>

This link provides various guidance, resources, and tools for schools to support a safe and healthy physical environment. Included are sections for schools that are open, schools that

are planning to open, resources related to worker safety, checklists for teachers, a school reopening decision tool, and numerous other materials and links.

4. Centers for Disease Control and Prevention (CDC), COVID-19, Considerations for Schools, (Updated May 19, 2020)
<https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/schools.html>

This link provides information for schools to consider to help protect staff and students, as well as slow the spread of COVID-19. Considerations include guiding principles, behaviors that reduce the spread of the virus, maintaining healthy environments, maintaining healthy operations, and preparing for when someone gets sick.

5. National Association for Pupil Transportation (NAPT)
<https://www.napt.org/covid>

Marcella E. Franczkowski, M.S., Assistant State Superintendent for the MSDE, Division of Early Intervention and Special Education Services (DEI/SES) and Linda F. Bluth, Ed.D, consultant to the MSDE, DEI/SES, presented a webinar entitled "Transportation's Role in Planning for Students with Special Needs." The webinar provides information related to transportation matters and considerations for students with disabilities. Webinar details, including the recorded webinar, the PowerPoint presentation, and the *Considerations for Transportation Needs for Students with Disabilities during School Recovery Planning Flowchart*, may be found under the Webinar Recordings Heading.

6. [Guidelines for Reopening School Transportation](#), Gallagher, Updated April 10. 2020.
7. Maryland Learning Links
<https://marylandlearninglinks.org/covid-19/>

The MSDE, DEI/SES, has published special education resources related to COVID-19 and beyond on the Maryland Learning Links website. Located on this site are the recently released COVID-19 Technical Assistance Bulletins supporting the development, implementation, and evaluation of services, as well as family resources and process information. Check this website often for updated materials.

8. Specialized Health Needs Interagency Collaboration Project (SHNIC)
<https://www.kennedykrieger.org/community/initiatives/specialized-health-needs-interagency-collaboration>

The Specialized Health Needs Interagency Collaboration Project (SHNIC) is a collaborative partnership between the MSDE and the Kennedy Krieger Institute. The goal of SHNIC is to provide community education that facilitates the inclusion of children, ages birth - 21 years old, with specialized health needs. Through free, on-site training and technical assistance, the SHNIC team teaches the skills to safely and effectively manage the needs of students,

which helps them integrate into their schools and communities. NPSs, LSSs, parents, health departments, and related community services agencies may access SHNIC services. With parent consent, (keep in mind confidentiality requirements) the NPS/LSS may connect with SHNIC on a case by case basis for students with significant health needs for individualized consultation and skills training for medical devices.