



The Perfect Playground

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School Re-Opening Plan

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Program(s) provided at this site:

Related Service Only

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Website where this plan and any plan updates will be posted:

www.theperfectplaygroundny.com

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 – Reopening Guidance*. This plan will be revised and updated as needed to adjust to changing public health conditions caused by the COVID-19 virus and all of the new requirements and regulations which may emerge over time. We solicited input and involvement from the families we serve and our staff during the original drafting of our re-opening plan. We will rely on continued input from all stakeholders as we move forward implementing this plan and as we contemplate any additions or modifications.

We know our program must be as flexible and as responsive as possible to the needs of our students, families, staff members. We will closely monitor the conditions of our community as the COVID 19 pandemic continues and the effectiveness and appropriateness of our plan. Be assured that nothing has changed our sincere commitment to our students and our determination to provide the highest possible quality of educational programming and related services even during these difficult 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. By diligently working together and remaining focused on the outcomes we desire, we can find solutions to the many challenges ahead.

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

1. Communication/Family and Community Engagement
2. Health and Safety
3. Facilities
4. Social Emotional Well-Being
5. Attendance and Chronic Absenteeism
6. Teaching and Learning
7. Special Education

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

A. COMMUNICATION/FAMILY AND COMMUNITY ENGAGEMENT

1. What participants involved in the Reopening Plan's creation and may be involved in any possible future revisions

- Patrick DeMarco, Executive Director

2. Moving forward how we plan to consistently communicate with and provide information to each of the following groups?

- Updates to original plan that is posted on our website will be communicated in writing via email to parents/guardians/therapists.

3. The student's therapist will ensure that all students are taught or trained how to follow each of the following COVID-19 protocols safely and correctly

- Hand hygiene All providers must put plans in place to make sure that:
 - All parents and students present for the session wash their hands for at least 20 seconds using soap and water or use an alcohol-based hand sanitizer that is at least 60% alcohol before and after each session.
 - All related services providers wash their hands for 20 seconds using soap and water or use an alcohol-based hand sanitizer that is at least 60% alcohol before and after each session.
 - All related services providers who practice more hands-on interventions/services should put on gloves and leave them on for the entire session.
 - o Leave gloves on

until the end of the session. Remove by grasping the inside of the wrist end and pulling inside-out over your fingers, then discard into a plastic bag or lined trash can. Use alcohol-based hand sanitizer containing at least 60% alcohol or wash hands with soap and water for 20 seconds after removing gloves. o If gloves must be replaced for some reason during the session (for example, contact with stool or excessive body fluids such as saliva, mucus, vomit or urine), remove them, wash hands as described above, and put on a new pair of gloves o Please note that wearing gloves does not take the place of thorough handwashing.

- Proper face covering wearing Face Covering Requirements All related service providers must wear a face covering during the entire course of the session. Related service providers may supply students with alternate face coverings (such as face shields that are transparent at or around the mouth) for activities that require visualization of the movement of the lips and mouth. These alternate coverings may also be worn by the provider, for students who benefit from being able to see more of the provider's face (for example, due to a hearing impairment). Everyone who will be present for the session and is 2 years or older must wear a face covering if it can be tolerated. Related services providers should monitor the student's ability to keep the face covering/mask on and adjust intervention strategies to best meet the student's needs.
- Social distancing: To the extent possible while maintaining the efficacy of the intervention/service, related services providers should keep 6 feet of physical distance from the student and any other person present. Guidance for In-Person Contract and Independent Related Services during COVID-19 Pandemic Page 3 of 4 Issued: July 31, 2020 Anyone who is not participating in the session must maintain at least 6 feet of physical distance from others who are not members of the same household. Make sure that family and staff groupings are as static as possible by having the same group or individuals consistently interact.
- Respiratory Hygiene: Coughing into your elbow when possible and keeping the face mask on at all times when tolerated.

4. The student's therapist will work to encourage students, staff and visitors to adhere to Center for Disease Control (CDC) and Department of Health (DOH) regarding the proper use of face coverings when social distancing is not possible. Signs will be posted outside and throughout the inside of the clinic to remind everyone of protocols.

5. Signs will be posted in English and Spanish.

B. HEALTH AND SAFETY

NOTE: Students and staff will return to in-person instruction only when governmental authorities permit in-person education. Additionally any return to in-person instruction will necessitate that the school's leadership also determines the number of students and

staff allowed to return in person based on: the ability to maintain social distancing; the availability of PPE, including the availability of cloth face coverings and face masks; availability of safe transportation; local hospital capacity according to the local Department of Health

1. All Staff, Clients and Visitors will be prescreened using a survey and temperature check prior to admittance to the clinic. Anyone with a temperature of 100.4 or higher will not be permitted to enter. Anyone who has traveled to a COVID restricted state or country within the last 14 days will not be allowed to enter unless they present a note from their doctor stating they are clear of COVID. The office will check everyone's temperature using a temporal thermometer prior to entry.

Required Screening Protocols Providers/agencies must have plans to ensure that:

• Providers and families implement ongoing self-screening prior to the session to determine whether they or anyone else who intends to participate in the session:

o Has COVID-19 symptoms (e.g., fever, cough, shortness of breath or difficulty breathing, chills, muscle pain, sore throat, new loss of taste or smell)

o Has tested positive for COVID-19 in the past 14 days (diagnostic test, not a blood test for antibodies)

o Has been in close contact (10 minutes within 6 feet or any direct physical contact) with a person with COVID-19 symptoms (fever, cough, shortness of breath) or a confirmed COVID-19 infection within 14 days

o Has been told by a health care provider or the NYC Test & Trace Corps to remain home due to being exposed to COVID-19

o Is required to quarantine based on the New York State COVID-19 Travel Advisory (<https://coronavirus.health.ny.gov/covid-19-travel-advisory>)

o If any of the above is TRUE, those sessions must be conducted remotely, in line with the guidance issued on March 31, 2020, or rescheduled for at least 14 days out if it is not possible to conduct the sessions remotely.

• Within 24 hours of student's scheduled therapy session in the clinic, the family will need to respond via survey/questionnaire if anyone in the household:

o Has a fever, cough, shortness of breath or difficulty breathing, chills, muscle pain, sore throat, new loss of taste or smell, etc.

o Has tested positive for COVID-19 in the past 14 days (diagnostic test, not a blood test for antibodies)

o Has been in close contact (10 minutes within 6 feet or any direct physical contact) with a person with COVID-19 symptoms (fever, cough, shortness of breath) or a confirmed COVID-19 infection within 14 days

o Has been told by their health care provider or the NYC Test & Trace Corps to remain home due to being exposed to COVID-19

o Is required to quarantine based on the New York State COVID-19 Travel Advisory (<https://coronavirus.health.ny.gov/covid-19-travel-advisory>)

o If any of the above is TRUE, in person services would not be allowed to occur. During the 14-day quarantine period, the therapist would work with the family to schedule therapy sessions to occur remotely.

• If a session is cancelled due to concerns about COVID-19, the parent/guardian will need to provide the office with a doctor's note or negative COVID test before the student is allowed to resume in person services.

• It is important to be able to seamlessly shift back to providing services remotely. In the event that the service can no longer be delivered in person, follow the guidance on remote service provision.

4. Since all clients are accompanied by a parent or guardian, if the child/client presents with a temperature of 100.4 or higher their parent/guardian will be asked to take them home. That child/client will not be allowed into the clinic and will not receive their services until cleared by a medical doctor. Services will be switched to remote teletherapy services until cleared by doctor to return in person.

5. One of our Administrative Assistants will sit in the clinic on the side entrance (which will now be converted to the main entrance) She will take the temperature of each employee and child/client. Anyone who presents with a temp of 100.4 or higher will be denied entry into the clinic. They will need a note from the medical doctor before they can return. Schools are prohibited to record or track student or staff temperatures or other health information.

6. Parents will have to fill out an affirmation email each day they are set to attend therapy prior to arriving. This affirmation email will ask specific questions about their child's health as well as attesting to their recent travel schedule.

7. The Clinic will post signs outside the facility to note specific loading/unloading waiting and temperature check areas. Additionally, inside there will be signs for proper social distancing, face coverings, hand washing, coughing and cleaning procedures.

8. The clinic will limit just one therapist and child to each treatment room. No group sessions will be provided. Each room will be cleaned by the therapist prior to the start of each new treatment session. Each room will be fitted with a plastic shield between therapist and client. Materials that cannot be cleaned and sanitized will not be used in the therapeutic treatment area. Toys with soft or porous surfaces (e.g., plush toys,

wooden blocks, board books etc.) will not be used in therapeutic settings as they cannot be properly disinfected.

9. All employees, adult visitors, and students must wear a cloth face covering whenever social distancing cannot be maintained. Signs will be noted throughout the inside and outside of the clinic.

10. Students may remove masks while in the treatment room with the therapist if the therapist is in agreement and sitting behind the plastic divider.

11. The Clinic will keep extra masks and gloves on site for use by clients/children and staff as needed. Therapists will also be provided with face shields and gowns if needed.

12. Contact Tracing In order to protect students and staff during the COVID-19 pandemic, DOHMH will support schools by investigating confirmed COVID-19 cases. DOHMH and the NYC Test + Trace Corps, will perform contact tracing as recommended by the CDC, which is a key strategy for preventing further spread of COVID-19. DOHMH will support with rapid identification of close contacts within a school to identify individuals who need to quarantine.

A positive case can be reported to a school in several ways: • NYC Test + Trace Corps finds through case interview • Staff or parent alert school • Staff or parent alert DOHMH hotline NYC Test + Trace Corps and DOHMH will begin investigating self-reported positive COVID19 test results from a school community within three hours. One Confirmed Case in a School: • DOHMH will notify the principal and Central NYCDOE of confirmed case. • Principal notifies Building Response Team, superintendent, and informs affected teacher(s). • Building Response Team notifies Borough Safety Director. • All students and teacher(s) in class(es) with a confirmed case are assumed close contacts and are instructed to quarantine for 14 days since their last exposure to that case. • In schools where students travel between classes, the school must require quarantine for individuals in all classes attended by the confirmed case. • Learning continues remotely for students who are in quarantine. • A negative COVID-19 test result for a student does not reduce the 14-day quarantine period. • NYC Test + Trace Corps contact tracing will interview the case and school administration to establish if there were any other additional close contacts. • NYC Test + Trace Corps contact tracing will interview staff members to verify levels of contact with the confirmed case. • If a staff member is deemed NOT a close contact, then the staff member can opt to return to school. Health and Safety 2020–2021 NYC Schools Reopening Plan 32 • If a staff member is considered a close contact, then the staff member is required to complete the 14-day quarantine. • Schools must communicate, to all families and students when a case is confirmed: • Families of students who are confirmed close contacts of the positive case must receive a letter stating that their child has been in close contact with a COVID-19 positive individual; this letter gives clear direction to

quarantine for 14 days; • Families of students who are not considered close contacts must receive a letter stating that there was a confirmed case of COVID-19 at the school but that their child is not considered a close contact therefore there is no need to quarantine. If a child who has attended our clinic tests positive for COVID, the facility will shut down for 24 hours to disinfect. All staff and clients who were in the facility within 48 hours of that client's last visit will be notified.

13. Returning to School After COVID-19 Exposure Individuals exposed to COVID-19 must quarantine in order to stop the spread of the virus; this includes both students and staff members who test positive for COVID-19 and those who are considered close contacts of a positive case. Anyone with a positive COVID-19 test (staff, teacher, student) must isolate for a minimum of 14 days and cannot return to school/work until the following criteria are met: • Presents clearance from a healthcare provider evaluation AND • The individual has been symptom-free for 24 hours without the use of medication. Per NYC Test + Trace Corps and DOHMH, all students and teacher(s) in class(es) with a confirmed case are assumed close contacts and must be instructed to quarantine for 14 days since their last exposure to that case. In schools where students travel between classes, the school must require quarantine for individuals in all classes attended by the confirmed case. Learning will continue remotely for all students who are in quarantine due to this incident. Health and Safety 2020–2021 NYC Schools Reopening Plan 31 Any individual who is considered a close contact of a positive case can only return to school when all the following criteria are met: • The individual has completed a 14-day quarantine regardless of symptoms or test results since their last exposure to that case AND • Presents clearance from a health care provider evaluation AND • The individual has been symptom free for 24 hours without the use of medication.

14. Cleaning and disinfection will include all high touch surfaces: desks & chairs, conference tables, door handles and push plates, conference tables, light switches, restroom fixtures, partitions and hardware, buttons on hardware, gym padding, and physical therapy equipment.

15. Adhere to hygiene, cleaning, and disinfection requirements from the Centers for Disease Control and Prevention (CDC) and NYS Department of Health (DOH) and maintain logs on site that document date, time, and scope of cleaning and disinfection.

- Provide and maintain hand hygiene stations: handwashing with soap, running warm water, and disposable paper towels; alcohol-based hand sanitizer containing 60% or more alcohol for areas where handwashing is not available/practical.
- Make hand sanitizer available throughout common areas on site.
- Employees/staff and children must perform hand hygiene immediately upon entering the program.
- Require staff and children to practice hygiene in the following instances:
 - o Upon arrival to the first program activity

- o Between all program activities
- o After using the restroom
- o Before departing the last program activity

16. Health related considerations **prior** to reopening:

- a) Virginia Venuto our Office Manager can be contacted at frontdesk@tppnyc-ssg.com She will be available to contact in regard to Clinic COVID-19 protocol.
- b) The clinic will be limited to only one therapist and child per room.
- c) Parents will be sent an email questionnaire to fill out prior to arrival each day. This attestation must be completed in addition to the thermal thermometer screening prior to admittance to the clinic for therapy each day.
- d) If the parent/guardian does not have internet or computer access to fill out the questionnaire each session they will be allowed to complete a paper copy supplied to them by Virginia as temperatures are being verified.
- e) Parents/Guardians must accompany their child until the child has had their temperature checked and granted access to the clinic for therapy. They must wait in their car until the therapy session has ended. At which time the therapist will text the parent to come to the front door and wait outside for the therapist to hand the child off to the parent/guardian. All children and staff will be supplied with PPE as needed. Parents/Guardians are not to be more than 5 minutes away from clinic to ensure they have the ability to pick the child up on time or to come back quickly if the child feels sick and needs to leave early. One warning will be issued and in person services will be stopped if the parent/guardian is late or unable to make it back to pick the child up within 5 minutes a second time.
- f) Virginia Venuto will check our PPE Supply Cabinet each day to confirm we have enough supplies and reorder additional PPE as needed. The clinic will provide Face Shields, Masks, Gowns, Gloves and Hand Sanitizers.

C. FACILITIES

1. The waiting room will be closed during this COVID Protocol Period. All parents/guardians will now bring their children to the door on the right side of the building for a thermal temperature check and parent/guardian survey submission. If the client/child meets the qualifications for entry they will be escorted into the clinic by their treating therapist and will walk directly to their treatment room. After therapy the therapist will text the parent/guardian to meet them at the front of the building (next to the posted name of the treating therapist) to hand off the child and prevent the need to have the parent/guardian enter the waiting room.

2. Therapists will be asked to keep windows open in their treatment rooms whenever possible as well as their doors to increase air flow in the clinic.
3. Each treatment room will have a plastic desk divider to shield the therapist and child.
4. Each room will have hand sanitizer to utilize upon entry into the clinic.
5. The HVAC System has been provided with MEER 17+ filtration filters. These are higher rated than HEPA filters.
6. All high touch area's in the therapists treatment room will be wiped down between treatment sessions.

E. Arrival/Dismissal Process

1. Floor decals will be provided to direct parents/guardians on the proper arrival and dismissal locations. These decals/signs will inform about proper social distancing spaces and temperature checks.
2. Children will now need to enter the facility on the right side of the building and will exit through the front/main door. The waiting room will be closed to parents/guardians and visitors.
3. Parent/Guardians will be sent a text by the treating therapist 5 minutes before the end of the session to let the parent/guardian know to wait outside to receive their child in the designated waiting area. The waiting area will be marked with decals to keep social distancing priorities.
4. Parent/Guardians need to give themselves extra time on arrival to account for temporal thermometer and questionnaire checks.
5. All children will be required to have a mask on as they enter the clinic and will be asked to either wash their hands or use the hand sanitizer prior to beginning therapy. Hand sanitizer will be applied at the exit door for all children and staff to use as they exit the facility.

