

Required Documentation
American Rescue Plan Safe Return
to In-Person Instruction and Continuity of Services

PART I.

Describe how the district 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.

Masks in Schools

Masks are required for all students, staff, and visitors when inside any Auburn-Washburn facility. Mask exceptions signed by a qualified, licensed medical doctor for students and staff will be reviewed on a case-by-case basis. Mask exceptions for qualified educational purposes during a designated time of the school day will also be reviewed on a case-by-case basis.

Masks on School Buses

Masks are mandated on school buses due to a Federal Order. Order under Section 361 of the Public Health Service Act (42 U.S.C. 264) and 42 Code of Federal Regulations 70.2, 71.31 (b) 71.32(b), Requirement for Persons to Wear Masks While on Conveyances and at Transportation Hubs, includes school buses.

Masks Outdoors and at Outdoor Events

Masks are not required outdoors during the school day nor while attending at school-related outdoor events.

Mask Exceptions

Mask exceptions must include a document signed by a qualified, licensed medical doctor which includes primarily an MD and DO. A Nurse Practitioner (ARNP) or Physician's Assistant (PA) may also provide the signed document under the supervision of an MD and DO.

- If a form is needed or requested: [Request for Mask Exception, 2021-2022](#)

Mask exceptions for qualified educational purposes during a designated time of school day will also be reviewed on a case-by-case basis.

- Examples for exceptions or situations in which accommodations need to be made:
 - Individuals with asthma, chronic obstructive pulmonary disease (COPD), or other respiratory disabilities may not be able to wear a face mask because of difficult or impaired breathing.
 - Individuals with post-traumatic stress disorder (PTSD), claustrophobia (an abnormal fear of being in enclosed or narrow spaces), severe anxiety may feel afraid or terrified when wearing a face mask. These individuals may not be able to stay calm or function when wearing a face mask.

- Individuals with autism are sensitive to touch and texture. Covering the nose and mouth with fabric can cause sensory overload, feelings of panic, and extreme anxiety.
- Individuals who are deaf or hard of hearing, or communicating with a person that is deaf and hard of hearing. In these cases, the ability to see the mouth is essential for communication. Masks can be uncomfortable for individuals who wear hearing aids or cochlear implants.
- Individuals with a speech communication disorder. Wearing masks can at times make communication more difficult. Masks can muffle sound, making it more difficult to understand speech and some higher-pitched voices. Masks take away the ability to read lips and see facial expressions which assist with understanding what is being heard. Speaking with a mask can be hard for individuals with communication problems, like aphasia and voice problems.
- An individual with an English Second Language or is an English Language Learner that needs to hear the distinct sounds of the English language which may be impaired through a mask.
- An individual who has cerebral palsy may have difficulty moving the small muscles in the hands, wrists, or fingers. Due to their limited mobility, they may not be able to tie the strings or put the elastic loops of a face mask over the ears. This means that the person may not be able to put on or remove a face mask without assistance.
- An individual who uses mouth control devices such as a sip and puff to operate a wheelchair or assistive technology or uses their mouth or tongue to use assistive ventilators may be unable to wear a face mask.
- An individual with Dyslexia that compensates for mildly to profoundly impacted phonological (sound) processing. Due to dyslexia, masking can have significant effects on sound. Furthermore, multi-sensory instructional supports that focus on the lips, mouth, and tongue placement can be concealed by a mask.

Exception requests may originate from parents/legal guardians, professional recommendations sought by parents/legal guardians, and/or concerns from school personnel. Exception requests benefit from a clear discussion on concerns, needs, and instruction throughout the school day. Requests may also lead to appropriate accommodations or could lead to a mask exception for strategic times during the day through the spectrum of a school day.

(B) Modifying facilities to allow for physical distancing (e.g., use of cohorts/podding).

Physical Distancing

Spaces will be arranged to distance students as much as possible. The following quarantine exemption from the Shawnee County Health Department will serve as a guide on how to arrange spaces:

- Elementary and middle school students in the classroom or during recess/gym and both individuals wore their masks correctly for the entire duration of the close contact.

- Elementary and middle school staff in close contact with a student in the classroom or during recess/gym and both individuals wore their masks correctly for the entire duration of the close contact.
- High school students in the classroom or during gym/weightlifting and both individuals were spaced 3-feet apart and wore their masks correctly for the entire duration of the close contact.
- High school staff in close contact with a student in the classroom or during gym/weightlifting and both individuals were spaced 3-feet apart and wore their masks correctly for the entire duration of the close contact.

(C) Handwashing and respiratory etiquette.

Handwashing removes pathogens from the surface of the hands. Students and staff will practice handwashing and respiratory etiquette (covering coughs and sneezes) to keep from getting and spreading infectious illnesses. Schools will monitor and reinforce these behaviors and provide adequate handwashing supplies.

(D) Cleaning and maintaining healthy facilities, including improving ventilation.

Cleaning and Disinfecting

Effective cleaning and disinfecting schedules will be maintained in schools and on buses. Adjustments will be made, school by school, to address specific needs that surface.

Ventilation and Indoor Air Quality

Indoor air quality has been upgraded by adding air purification systems in duct work at each facility and the frequency of filter replacements has been doubled. Indoor air quality exceeds American Society of Heating, Refrigerating, and Air-Conditioning Engineers Standards. Ventilation systems are routinely serviced and meet code requirements.

(E) Contact tracing in combination with isolation and quarantine, in collaboration with the State, local, territorial, or Tribal health departments.

A partnership with the Shawnee County Health Department was established in March 2020 which turned into weekly meetings thereafter. The Shawnee County Health Department trained school nurses on contact tracing protocols so they could trace in their schools and contact parents. Communication to/from our school district and the Shawnee County Health Department was helpful.

(F) Diagnostic and screening testing.

Many diagnostic and screening sites were established in Shawnee County so accessibility was not a concern. Staff, students, and family members were encouraged to get tested if they had symptoms or where a close contact to a positive case. Around March 2021, our school district was given 1,000 test kits so we could proactively give them to those who needed to be tested.

Moving into the 2021-22 school year, the district launched a “Test to Learn / Test to Play” program that provided testing in-school for eligible students.

(G) Efforts to provide vaccinations to school communities.

The following three things occurred to provide vaccinations to our school community:

1. We partnered with the Shawnee County Health Department to provide staff with the opportunity to get vaccinated in March 2021. Approximately 85% of our staff were vaccinated by mid-April 2021.
2. We partnered with the Kansas Department of Health and Environment to host a vaccination clinic at our high school in April 2021 for students 16 years of age and older.
3. We partnered with the Shawnee County Health Department to host three vaccination clinics at our high school in June, July, and August 2021 for students 12 years of age and older.

(H) Appropriate accommodations for children with disabilities with respect to health and safety policies.

Guidelines provided from the Center for Disease Control, Kansas Department of Health and Environment, and Shawnee County Health Department were followed. At times, depending on disability, additional accommodations were implemented to ensure health and safety.

Additional accommodations were created in partnership with trained staff in our schools and with families.

(I) Coordination with State and local health officials.

Weekly meetings took place with the Kansas State Department of Education and the Shawnee County Health Department. Due to these weekly meetings, we were able remain informed on factual knowledge not only locally but also across Kansas. Much of the information discussed and learned in these meetings was taken back to leaders in each school so the appropriate action could be taken to ensure safety for students and staff.

Part II.

Describe how the district will ensure continuity of services, including but not limited to:

(A) services to address students' academic needs

During the 2020-21 school year, the following three Phases of Education were established:

- 1) Phase 1: Remote learning for those who needed to learn from home (off-site)
- 2) Phase 2: Hybrid learning for those schools without the space necessary to have all students on-site with room to physical distance.
- 3) Phase 3: On-site learning when it was safe to have all students on-site for in-person instruction each day.

A primary focus in each school was to provide effective and meaningful teaching and learning opportunities to students regardless of the Phase of Education students were in. During the

year, summative and formative assessments were given to frequently monitor academic progress. Based on academic data, our team will modify and adjust learning targets to meet student needs. In addition, many summer learning opportunities were provided for summer 2021 to engage students in both remediation and enrichment activities.

Our goals for the 2021-22 school year are to keep students and staff safely in school every day and to provide learning environments conducive to achieving our Mission and Vision that can be summarized by: Inspiring, Challenging, and Preparing Every Child, Every Day.

(B) students' and staff social, emotional, mental health

School based mental health teams closely monitored attendance, grades, behaviors, and interactions during the school day to see how students were handling the environment. Many calls were made to parents and team meetings routinely took place to discuss the social-emotional needs of students. Students were encouraged to reach out if something was bothering them or if the Phase of Education they were in was not meeting their needs. Home visits became common as the 2020-21 school year progressed to help ensure students were doing well. Having all students in-school in-person every day in the 2021-22 school year has provided tremendous benefits to students.

(C) other needs, which may include student health and food services.

Free breakfasts and lunches have been and will continue to be provided to all students since April 2021. Families are encouraged to allow their students to take advantage of the free breakfast and lunch program so students receive healthy foods each day.

In many schools, pantries and/or “angel funds” have been created and made available to students and their families. Pantries include things like: toiletries, clothes, coats, gloves, food, etc.