

Framework for Returning to Classroom Instruction

(updated 7/21/2020)

Maine's Framework for Returning to Classroom Instruction will be subject to ongoing development and will evolve as additional information and guidance is provided about the pandemic.

This framework provides options, ideas, and considerations for organizing the work of reintegrating back to in-person, classroom instruction. In general, these steps are not intended to be used as requirements or mandates, rather they should be viewed as customizable starting points and resources for school administrative units (SAUs) in the difficult work of planning for the fall. Each SAU's Collaborative Planning Team, led by the superintendent, is responsible for the development and review of their Emergency Operations Plans. Your Collaborative Planning Team should include school nurses, administrators, educators, and representatives from transportation, food service, local emergency responders, and your local or regional community health experts. This team will need to determine procedures for the safe reopening of schools within that unit in the fall. It is important to include any applicable executive orders, state laws or local ordinances, required safeguards in Part I of this document, and the common expectations for hybrid and remote instruction.

The pillars of this framework include safety, equity, and accessibility for all students and staff, and we encourage innovation and honor the professional integrity of Maine educators in the development of your district- and building-specific plans.

This framework is organized in this way:

- Part I - Physical Health and Safety Considerations
- Part II - Social, Emotional, Behavioral, and Mental Health Considerations
- Part III - Academic Programs and Student Learning Considerations
- Part IV - Common Expectations for Hybrid and Remote Learning Models
- Part V - Additional considerations

Part I: Physical Health and Safety

A. Determining when it is safe to return to in-person instruction:

Maine DOE will assist SAUs in determining when it is advisable to return to in-person instruction. Determinations will be based on the following two factors:

1. Maine Counties' Risk of COVID-19 Spread for Schools

To inform local school administrative unit (SAU) decisions about whether and how to bring students back into the classroom, Maine Department of Health and Human Services (DHHS) and Center for Disease Control and Prevention (Maine CDC) have developed a system to categorize counties. This categorization is based on a holistic assessment of quantitative and qualitative information. It includes, but is not limited to, recent data on case rates, positivity rates, and syndromic data (e.g., symptoms of influenza or COVID-19).

- Categorization as “red” suggests that the county has a high risk of COVID-19 spread and that in-person instruction should not be conducted.
- Categorization as “yellow” suggests that the county has an elevated risk of COVID-19 spread and that hybrid instruction models should be adopted.
- Categorization as “green” suggests that the county has a relatively low COVID-19 risk and that in-person instruction can be adopted – although a SAU may opt for hybrid instruction if its buildings or readiness make adhering to the Required Health and Safety Measures for All Schools a challenge.

The initial three-tiered health advisory system will be initially posted on July 31, and updated every two weeks. These recommendations are advisory. Given the large and varied nature of counties in Maine, SAUs within a county may adopt a reopening policy that differs from this county-based categorization of COVID-19 risk. Maine DHHS and Maine CDC will not review SAU-specific plans.

This categorization system is solely for the purpose of informing decisions regarding pre-K to adult public education. It is calibrated to the related actions for schools. For example, the categorization of a county as yellow for hybrid learning in schools may not necessitate the closure of other establishments, such as restaurants and hair salons, and it is targeted to provide guidance for unique circumstances of schools.

2. School capacity for implementing the following health and safety requirements:

The following health and safety measures are **required** for schools to open safely, according to Maine DHHS/CDC guidance. These requirements apply in all risk levels, including “Green” designation.

Required Health and Safety Measures for All Schools

1) Symptom Screening Before Coming to School

- a. Students (parents/caregivers) and staff members must conduct [self-checks for symptoms](#) prior to boarding buses or entering school buildings each day. Schools should provide information to families in their primary language to support them in conducting this check.
- b. Any person showing symptoms must report their symptoms and not be present at school.
- c. Schools must provide clear and accessible directions to parents/caregivers and students for reporting symptoms and absences.

2) Physical Distancing and Facilities

- a. Adults must maintain 6 feet of distance from others to the extent possible. Maintaining 3 feet of distance is acceptable between and among students when combined with the other measures outlined in this list of safety requirements.
- b. 6 feet of physical distancing is required for students while eating breakfast and lunch, as students will be unable to wear masks at that time.
- c. A “medical isolation room” must be designated for students/staff who exhibit COVID-19 symptoms during the school day.
- d. Schools should evaluate their existing ventilation capabilities and ensure that they are maximizing their current capacity. Adequate ventilation is required for classrooms, with schools having flexibility in implementation such as using properly working ventilation systems or outdoor air exchange using fans in open windows or doors.
- e. Groups in any one area, room, or classroom must not exceed the Governor’s gathering size limits.

3) Masks/Face Coverings

- a. Adults, including educators and staff, are required to wear a mask/face covering.
- b. Students age two and above are required to wear a mask/face covering that covers their nose and mouth.
- c. Masks/face coverings must be worn by all students on the bus.
- d. Face shields may be an alternative for those students with medical, behavioral, or other challenges who are unable to wear masks/face coverings. The same applies to staff with medical or other health reasons for being unable to wear face coverings. Face shields worn in place of a face covering must extend below the chin and back to the ears.

4) Hand Hygiene

- a. All students and staff in a school must receive training in proper hand hygiene.
- b. All students and staff must wash hands or use sanitizing gel upon entering the school, before and after eating, before and after donning or removing a face mask, after using the restroom, before and after use of playgrounds and shared equipment, and upon entering and exiting a school bus.

5) Personal Protective Equipment

- a. Additional safety precautions are required for school nurses and/or any staff supporting students in close proximity, when distance is not possible, or when students require physical assistance. These precautions must at a minimum include eye protection (e.g., face shield or goggles) and a mask/face covering.
- b. Classrooms and/or areas that have been used by an individual diagnosed with COVID-19 must be closed off until thorough cleaning and sanitization takes place.

6) Return to School after Illness

- a. Sick staff members and students must use home isolation until they meet criteria for returning to school.

The full document of requirements and additional guidance can be seen [here](#).

Additional Considerations and Recommendations

A. Preparing prior to returning to school:

1. Engage your Collaborative Planning Team (CPT) in reviewing/updating the Infectious Disease Annex of your Emergency Operations Plan (EOP)
2. Assess school readiness to implement the [Maine CDC's guidance for schools](#)
3. Consider equity: access to healthcare and supplies, school resources
4. Develop a communication plan that ensures equitable accessibility of messaging/language (translated resources found [here](#))
5. Develop a plan for reevaluating and reinforcing strategies once utilized

B. Preparing the facilities:

1. Communicate and consult with business managers, as well as facilities, grounds, and maintenance teams.
2. Identify and procure necessary equipment, materials, supplies for supporting the health and safety guidelines.
3. Thoroughly clean buildings and classrooms.
4. Remove any furniture, toys, rugs, and other items that cannot be easily cleaned each day.
5. Disinfect high-touch areas (door knobs, desk tops, faucets, etc).

6. Mark 6' standing spaces on the floor near doors, bathrooms, sinks or other places where students may congregate and/or line up.
7. Mark one-way directions if possible; mark hallways to keep traffic flow to the right side where one-way passage is not possible.
8. Post signs to remind students to keep hands to selves; fun examples of 6' distance; face coverings; handwashing protocols; etc
9. Plan vehicle traffic flow, drop-off, and pick-up logistics and place signage as needed.
10. Install plexiglass shields for high traffic staff.
11. If needed, set up additional hand washing or sanitizing stations outside school entrances and at convenient locations outside classrooms and common areas.
12. Develop a communication plan to raise awareness among staff, families, and students regarding any new procedures and expectations.

C. Educating staff, families, and students PRIOR to reentry:

1. Consult with school health staff, nurses, and physicians.
2. Train custodial staff in enhanced cleaning and disinfecting protocols.
3. Train food services staff in new protocols.
4. Train all staff in teaching and reinforcing health and safety guidelines to students within their purview (classroom/cafeteria/office/gym/bus...)
5. Consider a virtual "open house" or pre-entry webinar for families to explain new protocols and rules; health and safety guidelines; drop-off and pick-up routines; limitations on building access by family and community members; recognizing covid symptoms.
6. Ensure all communications, signs and procedures are communicated through languages/visuals and modes that ensure the information is accessible for all students.
7. Offer kid-friendly videos to teach proper donning and doffing of face coverings, keeping 6' apart, and other health and safety guidelines.
8. Establish plans for training staff and students about the unique needs of others and their abilities or possible struggles related to maintaining safety protocols.
9. Establish protocols for face coverings.
10. Communicate expectations of staff and students (or family members as needed) for conducting a daily self-check. Use the following suggested self-check checklist, which should be modified to ensure accessibility for all (as CDC determines additional symptoms, these should be added to the checklist):
 - a. Do you feel sick with any symptoms consistent with COVID-19? (such as new cough, shortness of breath, or other)
 - b. Have you been around anyone who is unwell?
 - c. Have you been in close contact with a person who has COVID-19?
 - d. Within the past 24 hours, have you had a fever (100.4 and above) or used any fever reducing medicine?

If the answer is yes to any of the questions, stay home.

D. Responding to a positive case of COVID-19

1. Work with school administrators, nurses, and other healthcare providers to identify an isolation room or area to separate anyone who exhibits COVID-like symptoms. School nurses and other healthcare providers should use [Standard and Transmission-Based Precautions](#) when caring for sick people. See: [What Healthcare Personnel Should Know About Caring for Patients with Confirmed or Possible COVID-19 Infection](#).
2. Establish procedures for safely transporting anyone sick home or to a healthcare facility.
3. Notify health officials, staff, and families immediately of a positive case while maintaining confidentiality and other applicable federal and state privacy laws.
4. Close off areas used by a sick person and do not use before cleaning and disinfection.
5. Advise sick staff members and children not to return until they have met CDC [criteria to discontinue home isolation](#).
6. Inform those who have had close contact to a person diagnosed with COVID-19 to stay home and self-monitor for symptoms and to follow [CDC guidance](#) if symptoms develop. If a person does not have symptoms, follow appropriate CDC guidance for [home isolation](#).

Part II: Social, Emotional, Behavioral, and Mental Health

A. Prior to re-entry:

1. Consult/communicate with mental health staff, counselors, social workers, educators.
2. Communicate plans, schedules, and updates to staff, families, and community – there's no such thing as too much communication when it comes to helping people feel safe. Consider a direct contact for each family.
3. Provide (virtual) forums in which families and students can ask questions or share concerns and ideas.
4. Reach out to higher needs students and families throughout the remote learning period and have social workers or counselors develop individualized support plans as needed.
5. Plan for school-wide trauma informed practices. The [Maine School Safety Center](#) can provide free training and resources.
6. Consider and mitigate impacts of adjusting to new cultures, new languages, and new community resources and supports for students and families who are Black, Indigenous, People of Color (BIPOC) families of color or who have an immigrant/refugee status.

B. Structuring re-entry to support the unique needs of your school community:

1. Consult with mental health staff, counselors, social workers, educators.
2. Consider differentiated approaches based on age, grade, and developmental levels; consider looping models for flexibility.

3. Provide frequent check ins with staff; encourage mindfulness and use of employee assistance plans for well-being.

C. Ongoing:

1. Encourage vigilance with respect to student and staff mental health; engage staff in professional development to increase awareness of the signs of anxiety and depression.
2. Utilize a multi-tiered system of supports for social/emotional needs.
3. Make widely available a list of resources to support children and/or adults experiencing distress. Normalize conversations around mental health to dispel stigma around asking for help. Cultural brokers may be necessary to navigate sensitive conversations for some students and their family members.

Part III: Academic Programs and Student Learning

A. Engage staff in professional development over the summer in preparation for remote, in-person, and hybrid instruction models.

1. Access free webinars and live sessions on remote learning and hybrid learning models at DOE ([website](#)).
2. Create a planning team for instruction to draft curriculum plans for rapidly transitioning between possible scenarios: all in-person learning; some staff and students remote; all remote learning.
3. Encourage visionary risk takers to create nontraditional models and plans - this is a time for innovation and big thinking.

B. Consider flexible grouping, multi-age classrooms, looping, interdisciplinary courses and units:

1. Build in learning and practice for remote learning when students are in-person so that everyone is prepared.
2. Emphasize project-based, interdisciplinary learning activities which can provide both organic formative assessment opportunities, high engagement, and efficient delivery of many skills and concepts.
3. Plan to provide equitable services (consider low-tech and no-tech options in addition to online learning; quasi-independent projects that can be completed with minimal resources at home) for each critical skill/concept/set of standards.
4. Keep equity at the forefront of decision-making around grouping.
5. Conduct needs assessments for students regarding access to technology, an adequate at home learning space, basic needs such as nutrition, to gauge their abilities and needs to access remote learning.
6. Develop plans in collaboration with building leaders, teacher teams, curriculum staff, and MTSS staff.

C. Formative Assessment:

1. Involve, consult, and communicate with teachers, MTSS, and curriculum staff.

2. Consider offering projects and assignments prior to the start of the school year that include embedded assessments to provide some baseline data for class groupings and accelerated learning plans.
3. Use formal assessments sparingly and efficiently to reduce stress. Avoid permanent or long-term ability groupings or placements; hold high expectations and offer scaffolded opportunities for all students to reach and exceed grade-level goals.

D. Students with disabilities, students who are English Learners, students who are black, indigenous and people of color (BIPoC), and other special populations may be particularly impacted. Access, resources and supports should be considered broadly and include:

- a. Access to technology
 - Access to academic skills necessary to engage with content
 - Access to executive skills necessary to participate in remote learning
 - Cognitive needs that may impact access to remote learning
 - Access to communication to support engaging with virtual curriculum (e.g. verbal/written communication skills)
 - Behavior and social/emotional supports required to access remote curriculum.
2. Make a plan for considering what will be needed to recover learning loss that may have occurred as a result of remote learning. These might be termed COVID Impact Recovery Services.
3. Consider what assessments may be used to measure student progress attained through the end of the third quarter and what was the expected growth through the end of the 2019-2020 school year. Consider the following:
 - a. Formative academic measures (Math, ELA, Science)
 - b. Social and Emotional Skills
 - c. Progress monitoring and intervention data prior to March 2020 and current
 - d. Executive Skills
 - e. Access issues (Was the child able to meaningfully participate in remote learning?)
4. Identify the structures teams will use to review progress data for all students and then how each sub-group of students performs in relation to the general student population. In some cases, this will be reviewed by existing teams (IEP teams, grade level teams, MTSS teams, ELL teams, multidisciplinary)
5. Calculate what recovery education will be needed to close the identified gaps.
6. Continue to monitor progress and communicate with teachers, parents and administrators about decisions regarding learning loss and the recovery education that will be provided. Document the outcomes of the conversations.
7. Further considerations: If a student's educational, social/emotional, or behavioral needs have changed to the degree that the student's ongoing services or supports are no longer sufficient to access their educational programming, the student's specialized team (EL Team, MTSS/RTI Teams, IEP Team) should meet to determine if student's current needs require more support.

Part IV: Common Expectations for Hybrid and Remote Learning Models:

While it is our goal to have all students back at school for in-person instruction in the fall, we

recognize that it may be necessary for some schools and SAUs to start the year – or to be prepared for transitioning to – a hybrid or remote learning model, in the event that health and safety recommendations require smaller group sizes and a greater degree of physical distancing.

All Maine schools/SAUs should have three plans for the fall: returning to in-person instruction (with health and safety guidelines in place) for all students where there is low risk of the Covid-19 ; a “hybrid” instruction plan; and a remote instruction plan. The goal of a hybrid education model is to reduce the numbers of students and staff in one place at the same time when there is a moderate risk of transmission of Covid-19. The goal of a fully remote plan is to mitigate the impact when community health metrics indicate a high level of risk.

When a school or SAU lacks the capacity to meet the health and safety guidelines required for a “green” or “low risk” designation based on Maine DHHS / CDC public health analysis, or when a school/SAU receives a “yellow” or “moderate risk” designation based on Maine DHHS / CDC public health analysis, a hybrid model may be used to reduce group size and increase capacity for physical distancing.

Hybrid models use a combination of in-person instruction and remote instruction, with a percentage of students in the building and classrooms while others are learning remotely. It is important to develop a plan that prioritizes in-person opportunities for learners with the greatest needs and that offers support for the youngest students, who need safety, supervision, and routine.

Examples of hybrid models include:

- Providing for grades PK-5 or PK-8, utilizing larger spaces or spreading out into other buildings to reduce crowd sizes and to increase capacity for physical distancing. Older students would be provided with education continuity through remote learning.
- Engaging all students PK-12 in an alternating schedule that includes remote learning and in-person instruction. Some students are in school while others learn remotely, and then they transition back and forth between these two modalities. Schools and SAUs planning to offer rotating schedules should develop plans to support students with disabilities. They should also ensure a daily schedule that offers safe supervision for younger students if needed. This could be accomplished by developing a childcare program through the school or by partnering with childcare agencies.
- Offering students and families the option to choose remote learning for an agreed-upon period of time (for a quarter or semester, for example). This plan could reduce crowd sizes and expand capacity for physical distancing, with reduced numbers of students in the building.
- Customized hybrid models that support students and teachers who are at high risk - for example, synchronous lessons could be provided by a teacher who uses a platform such as Zoom to teach lessons while a substitute, volunteer, or other “teacher avatar”

supports classroom management and logistics. Students in the classroom and students learning remotely could all participate with a teacher who is leading activities remotely.

Schools and SAUs should develop plans for transitioning between in-person and hybrid models and between hybrid and remote learning models, in order to provide continuity of education for all students.

Overall Components of a Hybrid or Remote Learning Plan – (SAU and school-level expectations):

1. A plan for instruction that provides students with learning opportunities aligned to, and which result in demonstration of achievement towards, the MLR. Plans must include forward movement along learning progressions or through grade level expectations as well as reinforcement of prior learning and necessary intervention.
2. A daily schedule to include age-appropriate engagement expectations for students; live daily contact between teachers and students (and/or caregiver); direct instruction (either synchronously or asynchronously); independent student work; opportunity for questions and feedback during teacher office hours.
3. The daily schedule offers sufficient educational service/interaction to be reasonably expected to promote student progress toward quarterly/semester/trimester grade-level educational goals and objectives.
4. A plan to equitably provide students with necessary materials and resources to support engagement in lessons.
5. A plan to certify student attendance each day, and a plan to address lack of attendance/engagement. Mandated reporter requirements remain in place in remote learning environments, so school staff should also be familiar with these policies and protocols.
6. A plan for identifying and addressing social/emotional, behavioral, and mental health concerns.
7. A plan for coordination of schedules, assignments, and workload when students have different teachers for different subjects.
8. A plan for regular/ongoing formative assessment of student learning and engagement to inform and guide instruction and pacing.
9. A multi-tiered system of supports (MTSS) plan for ensuring differentiation, IEP implementation, and equitable access for special populations. Services and accommodations must be adapted for a remote learning environment.

10. A plan for grading and for certifying achievement. This plan should take into consideration the uneven/inequitable conditions in which students will be accessing their educational experiences – including inequitable access to: supervision, technology, materials, quiet study space, adult support, and other basic needs.

11. A plan for providing student nutrition.

12. A communication plan to assist students and caregivers of students in understanding what to expect, how to engage in remote learning, where to get questions answered.

13. School-board approval of the hybrid or remote learning plan.

Part V: Additional considerations:

Adult Education

- SAU leadership and adult education directors meet to develop and/or adapt local guidance to ensure that it is appropriate for adult educators, learners, and staff.
- Priority of services plans should be created to enable remote and classroom-based options for adults who need to complete their high school equivalency, job training, and college transition programs.
- Integrate Maine Governor's strategies, as well as DECD, CDC, and OSHA guidance for businesses, into district guidance to enable job training programs to continue. (For example, health care certification programs implement guidance for health care facilities.)

Career and Technical Education

- Create a plan to sanitize any hand tools that may have to be shared between students.
- Create a plan to address the public accessing the building such as daycares in Early Childcare Education programs as well as cafes in Culinary Arts.
- Create a plan to sanitize all areas between sessions in the middle of the day.
- Look for opportunities to utilize larger spaces, such as lab areas for classroom instruction.

Child Nutrition Programs

- Trained staff should teach and monitor all sanitation procedures while increasing the frequency of cleaning, maintenance of all sanitation charts, and review of HACAP with staff.
- Maintain all CDC standards for food service, masks/face shields, distance, hygiene
- Investigate alternative dining locations within the school or school grounds.
- Consider how meals will be offered to students not in attendance or half days.
- Improve ventilation by running exhaust fans more than normal in the kitchen.

- Remove self-serve ability (bars, milk coolers, and extras)

School Health Office

- Have a plan to decrease traffic to the school health office in order to prevent office congregation and possible exposure of healthy students to a symptomatic one.
- Create a process for triage and monitoring of symptomatic students and supervised isolation while waiting for dismissal.
- Create a standardized protocol for decision making in regards to ill students and staff. Communicate the protocol and consistently follow it.
- Clarify for all staff the role of the school nurse in the care and/or assessment of symptomatic adults in the building.

Transportation

- School bus contractors collaborate with SAUs to adopt cleaning and disinfecting protocols, referencing use of products with valid label claims against human coronavirus and product label instructions, that will be used when each run is complete for all school buses and school transportation vehicles.
- Consider supplementing local SAU transportation protocols with the School Transportation Aligned for the Return to School (STARTS) Task Force national recommendations that are estimated to release mid-July.
- Adopt local implementation procedures for transportation staff and students who ride the school bus to wear a cloth face covering and accommodate students with special or medical needs that may not be able to wear a cloth face covering. Follow U.S. DOT NHTSA guidance letter about school bus driver shields that is estimated to release mid-June.
- Work with local special education and McKinney-Vento staff and student families to develop a COVID 19 transportation protocol for each special needs and homeless student.