



ARP ESSER Health and Safety Plan Guidance & Template

Section 2001(i)(1) of the American Rescue Plan (ARP) Act requires each local education agency (LEA) that receives funding under the ARP Elementary and Secondary School Emergency Relief (ESSER) Fund to develop and make publicly available on the LEA's website a *Safe Return to In-Person Instruction and Continuity of Services Plan*, hereinafter referred to as a *Health and Safety Plan*.

Based on ARP requirements, 90 percent of ARP ESSER funds will be distributed to school districts and charter schools based on their relative share of Title I-A funding in FY 2020-2021. **Given Federally required timelines, LEAs eligible to apply for and receive this portion of the ARP ESSER funding must submit a Health and Safety Plan that meets ARP Act requirements to the Pennsylvania Department of Education (PDE) by Friday, July 30, 2021, regardless of when the LEA submits its ARP ESSER application.**

Each LEA must create a Health and Safety Plan that addresses how it will maintain the health and safety of students, educators, and other staff, and which will serve as local guidelines for all instructional and non-instructional school activities during the period of the LEA's ARP ESSER grant. The Health and Safety Plan should be tailored to the unique needs of each LEA and its schools and must take into account public comment related to the development of, and subsequent revisions to, the Health and Safety Plan.

The ARP Act and U.S. Department of Education rules require Health and Safety plans include the following components:

1. How the LEA will, to the greatest extent practicable, implement prevention and mitigation policies in line with the most up-to-date guidance from the Centers for Disease Control and Prevention (CDC) for the reopening and operation of school facilities in order to continuously and safely open and operate schools for in-person learning;
2. How the LEA will ensure continuity of services, including but not limited to services to address the students' academic needs, and students' and staff members' social, emotional, mental health, and other needs, which may include student health and food services;
3. How the LEA 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 policy on each of the following safety recommendations established by the CDC:

- a. Universal and correct wearing of [masks](#);
- b. Modifying facilities to allow for [physical distancing](#) (e.g., use of cohorts/podding);
- c. [Handwashing and respiratory etiquette](#);
- d. [Cleaning](#) and maintaining healthy facilities, including improving [ventilation](#);
- e. [Contact tracing](#) in combination with [isolation](#) and [quarantine](#), in collaboration with State and local health departments;
- f. [Diagnostic](#) and screening testing;
- g. Efforts to provide COVID-19 [vaccinations to school communities](#);
- h. Appropriate accommodations for children with disabilities with respect to health and safety policies; and
- i. Coordination with state and local health officials.

The LEA's Health and Safety Plan must be approved by its governing body and posted on the LEA's publicly available website by July 30, 2021.* The ARP Act requires LEAs to post their Health and Safety Plans online in a language that parents/caregivers can understand, or, if it is not practicable to provide written translations to an individual with limited English proficiency, be orally translated. The plan also must be provided in an alternative format accessible, upon request, by a parent who is an individual with a disability as defined by the Americans with Disabilities Act.

Each LEA will upload in the eGrants system its updated Health and Safety Plan and webpage URL where the plan is located on the LEA's publicly available website.

The ARP Act requires LEAs to review their Health and Safety Plans at least every six months during the period of the LEA's ARP ESSER grant. LEAs also must review and update their plans whenever there are significant changes to the CDC recommendations for K-12 schools. Like the development of the plan, all revisions must be informed by community input and reviewed and approved by the governing body prior to posting on the LEA's publicly available website.

LEAs may use the template to revise their current Health and Safety Plans to meet ARP requirements and ensure all stakeholders are fully informed of the LEA's plan to safely resume instructional and non-instructional school activities, including in-person learning, for the current school year. An LEA may use a different plan template or format provided it includes all the elements required by the ARP Act, as listed above.

* The July 30 deadline applies only to school districts and charter schools that received federal Title I-A funds in FY 2020-2021 and intend to apply for and receive ARP ESSER funding.

Additional Resources

LEAs are advised to review the following resources when developing their Health and Safety Plans:

- [CDC K-12 School Operational Strategy](#)
- [PDE Resources for School Communities During COVID-19](#)
- [PDE Roadmap for Education Leaders](#)
- [PDE Accelerated Learning Through an Integrated System of Support](#)
- [PA Department of Health - COVID-19 in Pennsylvania](#)

Health and Safety Plan Summary: Boys' Latin of Philadelphia Charter School

Initial Effective Date: July 27, 2021

Date of Last Review: April 6, 2022

Date of Last Revision: April 6, 2022

- 1. How will the LEA, to the greatest extent practicable, support prevention and mitigation policies in line with the most up-to-date guidance from the CDC for the reopening and operation of school facilities in order to continuously and safely open and operate schools for in-person learning?**

Boys' Latin of Philadelphia ("Boys' Latin") works closely with school stakeholders to develop the Boys' Latin of Philadelphia Health and Safety Plan. The health and safety of students and employees is our top priority. Our plan addresses this priority and the school's mission: preparing boys for success in college and beyond. Our plan is grounded in four practices to ensure the health and safety of students and employees: (1) encouraging vaccination; (2) sanitizing, disinfecting, and ventilation; (3) health screening and monitoring; and (4) encouraging the universal and correct use of face masks. Consistent implementation of these layered prevention strategies to reduce the transmission of COVID-19 supports the safe delivery of in-person instruction.

Encouraging Vaccination:

Vaccination, including booster shots, remains the number one way to protect students and employees and reduce interruptions in learning. Anyone who is eligible should be vaccinated and receive all recommended doses. The school strongly encourages all eligible students and employees to receive all recommended COVID-19 vaccine doses, including booster and additional primary doses for some immunocompromised individuals.

Sanitizing, Disinfecting, and Ventilation:

Hand Hygiene and Respiratory Etiquette:

Our plan teaches and reinforces handwashing and respiratory etiquette. Students, employees, and visitors must handwash with soap and water for at least 20 seconds. Hand sanitizer containing at least 60% alcohol is available outside of each classroom and office for use when handwashing is not possible. Extra hand hygiene is encouraged especially when infection or germ-spread is likely. Students, employees, and visitors are encouraged to cover coughs and sneezes with a tissue when not wearing a mask and immediately wash their hands after blowing their nose, coughing, or sneezing. Touchless sinks, drinking fountains, and soap, hand sanitizer, and paper towel dispensers are available throughout each school building.

Cleaning and Maintaining Healthy Facilities:

Please note that transmission from a contaminated environment is an uncommon mode of transmission of COVID-19. The school expanded its contracted cleaning services to support additional sanitizing and disinfecting. The school facilities are thoroughly sanitized over the summer to prepare for the return to school. All school facilities are cleaning with cleaning products that are EPA-approved for use against COVID-19. Frequently touched surfaces in all school facilities are cleaned and disinfected regularly. This includes tables, desktops, chairs, doorknobs/handles, light switches, remote controls, countertops, handles, desks, phones, keyboards, toilets, faucets, and sinks. All school buildings are closed between 6:30PM and 6:30AM to allow for a thorough nightly cleaning. Classrooms and offices are equipped with disinfectants. In the event a student, employee, or visitor develops COVID-19 symptoms at school, all areas used by the sick person are cleaned and disinfected following the departure of the sick person from the school's facilities.

Enhancing Ventilation:

To improve ventilation, the heating, ventilation, and air conditioning ("HVAC") systems in each school building are enhanced with hospital-grade filters and increased maintenance. More specifically, the HVAC systems in all facilities are regularly checked to assure the systems are working properly. If it can be adjusted, all HVAC systems are set to provide at least six air exchanges per hour or the maximum possible setting, and to maximize the amount of outside air circulated by the system. Filters with minimum efficiency reporting values ("MERV") of 13 or higher are installed in all HVAC systems. When appropriate and possible, windows and/or doors on opposite sides of rooms within the school's facilities are opened.

Health Screening and Monitoring:

Symptom Monitoring Before School:

Prior to departing for school, students, employees, and visitors are expected to complete a self-check for COVID-19 symptoms and stay home when sick or following a suspected or known exposure to COVID-19. The school employs a flexible attendance policy to encourage adherence to this policy. Please note that symptoms may appear two to 14 days after exposure to the virus. Anyone can have mild or severe symptoms. Individuals with these symptoms may have COVID-19: fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, and/or diarrhea. Please note that this list of symptoms does not include all possible symptoms and the school will update the list per PDPH guidance.

Symptom Monitoring at School:

Employees or visitors who develop COVID-19 symptoms while at school are required to leave the school's property immediately. Students who develop COVID-19 symptoms while at school are isolated immediately and the student's emergency contact is contacted to retrieve the student from the school isolation space as soon as

possible. The student isolation area is located in the nurse's office. Isolating students are at least six feet apart from other students and employees in the nurse's office. The nurse or other employee monitoring the student isolation area should wear a N95, KN95, KF94, or should double mask.

Screening Testing:

The school offers screening testing to students who are not up to date with their COVID-19 vaccinations when community transmission is at moderate, substantial, or high levels. Additionally, the school offers screening testing to all employees who are not up to date on their COVID-19 vaccinations at any level of community transmission. Screening testing is offered once weekly.

Quarantining:

When a student or an employee is identified as a close contact of a COVID-19 positive individual, the student or employee must participate in Mask-to-Stay or quarantine. Close contacts are defined as those individuals that have been within six feet of a COVID-19 positive individual for 15 minutes within a 24-hour period, masked or unmasked. Please note that all close contacts should mask after an exposure, regardless of vaccination status, and monitor themselves for fever and cough, shortness of breath, and other COVID-19 symptoms for 10 days after their last exposure to the COVID-19 positive individual.

Through Mask-to-Stay, close contacts mask for 10 days after the date of last exposure to the COVID-19 positive individual to stay in school, ideally with rapid or molecular testing within 48 hours of the date of last exposure and again on or after day five. The parent/guardian of a student may request that their student complete the 10-day quarantine period at home, with testing recommended on or after day five. Please note that at-home quarantines are only recommended for students who are unable to mask.

In the event of an ongoing household exposure, a student who is completing their quarantine at home must quarantine while the COVID-19 positive individual is isolating and for an additional 10 days after the COVID-19 positive individual ends isolation.

In alignment with PDPH guidance, the school does not conduct universal case investigation and contact tracing. Rather, students and employees who test positive for COVID-19 are instructed to identify and notify their close contacts.

Isolating:

Students and employees who test positive for COVID-19 must isolate at home for 10 days from the positive test collection date or the symptom onset date. If symptoms develop, the isolation period is recalculated from the date that symptoms started, even if that date is after the positive test date. Ending isolation is contingent on

symptom improvement as well as absence of fever for 24 hours without fever reducing medication.

Case Reporting:

Students, employees, and visitors (if applicable) report all suspected or known cases of COVID-19 to the school. The school collaborates with the local health department, PDPH, to the extent allowable by privacy and other applicable laws, to confidentially provide information about people diagnosed with or exposed to COVID-19. The school monitors the number of COVID-19 cases among students and employees, the number of students and employees in quarantine, and levels of community transmission. If 10% of the school's population is positive, the school contacts PDPH for further guidance. At times the school may elect to or be directed by PDPH to pause in-person learning. Please note that most pauses are functional and due to employee shortages. However, longer pauses may be recommended for the entire school or a specific cohort in exceptional circumstances when large numbers of cases or close contacts present logistical and safety concerns.

Encouraging the Universal and Correct Use of Face Masks:

The school strongly encourages students, employees, and visitors to mask at all times and in all school facilities and on all modes of transportation. The school requires students and employees to mask following exposure to COVID-19. If five percent or more of the school's population is positive for COVID-19, the school requires all students, employees, and visitors to mask for 10 days. Double masking with a cloth mask over a surgical mask or, if preferred, a well-fitted KN95, KF94, or N95 mask is more protective than a single cloth or surgical mask. For those who wear a single mask, a surgical mask is preferred instead of a cloth mask alone. When feasible, the school provides surgical masks or respirators to students and employees who wish to mask at school.

All student athletes and musicians are strongly encouraged to mask when not actively participating/playing. Students in the following groups who participate in athletics are strongly encouraged to mask during practice and play: all individuals aged 2-11 regardless of vaccination status; individuals aged 12-17 who have not completed a two-dose primary vaccine series; and individuals aged 18 or older who are not up to date on their COVID-19 vaccinations. Students in the following groups who participate in singing are strongly encouraged to be masked, be situated at least three feet away or greater from each other, and all facing in the same direction: all individuals aged 2-11 regardless of vaccination status; individuals aged 12-17 who have not completed a two-dose primary vaccine series; and individuals aged 18 or older who are not up to date on their COVID-19 vaccinations.

- 2. How will the LEA ensure continuity of services, including but not limited to services to address the students' academic needs, and students' and staff members' social, emotional, mental health, and other needs, which may include student health and food services?**

Our plan ensures the continuity of services for students and employees. Through our one-to-one laptop program, all students receive a school-issued laptop to support their in-person and remote learning. The school provides Internet service via mobile hotspots to students as needed. Our learning management system, Schoology, serves as an online hub for students, families, and employees to access in-person and remote learning tools like Google Classroom and Zoom, and monitor students' academic progress, attendance, and behavior. Curriculum and instruction are intentionally designed to support in-person and remote learning. Virtual information technology support is available to all members of the school community. Training on all educational technology is provided at the beginning of the school year and ongoing to support success in the in-person and remote learning environments. The school's plan to transition to remote learning, in the event it is needed, is clearly and proactively communicated to all members of the school community to support a smooth transition between in-person and remote learning. In periods of remote learning, one week's worth of school breakfast and lunch will be distributed weekly on the designated day, and virtual social and emotional supports will be provided via the school's social workers.

The conditions surrounding the COVID-19 pandemic are dynamic. We will continue to closely monitor the situation and adjust our plan as needed or, at a minimum, every six months. All revisions will be informed by stakeholder input, approved by our board, and shared with the school and broader communities.

3. **Use the table below to explain how the LEA 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 policy on each of the following safety recommendations established by the CDC.**

ARP ESSER Requirement	Strategies, Policies, and Procedures
a. Universal and correct wearing of masks ;	The school strongly encourages students, employees, and visitors to mask at all times and in all school facilities and on all modes of transportation. The school requires students and employees to mask following exposure to COVID-19. If five percent or more of the school's population is positive for COVID-19, the school requires all students, employees, and visitors to mask for 10 days. Double masking with a cloth mask over a surgical mask or, if preferred, a well-fitted KN95, KF94, or N95 mask is more protective than a single cloth or surgical mask. For those who wear a single mask, a surgical mask is preferred instead of a cloth mask alone. When feasible, the school provides surgical

ARP ESSER Requirement	Strategies, Policies, and Procedures
	<p>masks or respirators to students and employees who wish to mask at school.</p> <p>All student athletes and musicians are strongly encouraged to mask when not actively participating/playing. Students in the following groups who participate in athletics are strongly encouraged to mask during practice and play: all individuals aged 2-11 regardless of vaccination status; individuals aged 12-17 who have not completed a two-dose primary vaccine series; and individuals aged 18 or older who are not up to date on their COVID-19 vaccinations. Students in the following groups who participate in singing are strongly encouraged to be masked, be situated at least three feet away or greater from each other, and all facing in the same direction: all individuals aged 2-11 regardless of vaccination status; individuals aged 12-17 who have not completed a two-dose primary vaccine series; and individuals aged 18 or older who are not up to date on their COVID-19 vaccinations.</p>
<p>b. Modifying facilities to allow for physical distancing (e.g., use of cohorts/podding);</p>	<p>In alignment with the updated guidance for schools released by PDPH on 3/18/2022, physical distancing is no longer recommended or required.</p>
<p>c. Handwashing and respiratory etiquette;</p>	<p>Our plan teaches and reinforces handwashing and respiratory etiquette. Students, employees, and visitors must handwash with soap and water for at least 20 seconds. Hand sanitizer containing at least 60% alcohol is available outside of each classroom and office for use when handwashing is not possible. Extra hand hygiene is encouraged especially when infection or germ-spread is likely. Students, employees, and visitors are encouraged to cover coughs and sneezes with a tissue when not wearing a mask and immediately wash their hands after blowing their nose, coughing, or sneezing. Touchless sinks, drinking</p>

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	fountains, and soap, hand sanitizer, and paper towel dispensers are available throughout each school building.
<p>d. Cleaning and maintaining healthy facilities, including improving ventilation;</p>	<p><i>Cleaning and Maintaining Healthy Facilities:</i> Please note that transmission from a contaminated environment is an uncommon mode of transmission of COVID-19. The school expanded its contracted cleaning services to support additional sanitizing and disinfecting. The school facilities are thoroughly sanitized over the summer to prepare for the return to school. All school facilities are cleaning with cleaning products that are EPA-approved for use against COVID-19. Frequently touched surfaces in all school facilities are cleaned and disinfected regularly. This includes tables, desktops, chairs, doorknobs/handles, light switches, remote controls, countertops, handles, desks, phones, keyboards, toilets, faucets, and sinks. All school buildings are closed between 6:30PM and 6:30AM to allow for a thorough nightly cleaning. Classrooms and offices are equipped with disinfectants. In the event a student, employee, or visitor develops COVID-19 symptoms at school, all areas used by the sick person are cleaned and disinfected following the departure of the sick person from the school's facilities.</p> <p><i>Enhancing Ventilation:</i> To improve ventilation, the heating, ventilation, and air conditioning ("HVAC") systems in each school building are enhanced with hospital-grade filters and increased maintenance. More specifically, the HVAC systems in all facilities are regularly checked to assure the systems are working properly. If it can be adjusted, all HVAC systems are set to provide at least six air exchanges per hour or the maximum possible setting, and to maximize the amount of outside air circulated by the</p>

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	<p>system. Filters with minimum efficiency reporting values (“MERV) of 13 or higher are installed in all HVAC systems. When appropriate and possible, windows and/or doors on opposite sides of rooms within the school’s facilities are opened.</p>
<p>e. Contact tracing in combination with isolation and quarantine, in collaboration with the State and local health departments;</p>	<p><i>Quarantining:</i> When a student or an employee is identified as a close contact of a COVID-19 positive individual, the student or employee must participate in Mask-to-Stay or quarantine. Close contacts are defined as those individuals that have been within six feet of a COVID-19 positive individual for 15 minutes within a 24-hour period, masked or unmasked. Please note that all close contacts should mask after an exposure, regardless of vaccination status, and monitor themselves for fever and cough, shortness of breath, and other COVID-19 symptoms for 10 days after their last exposure to the COVID-19 positive individual.</p> <p>Through Mask-to-Stay, close contacts mask for 10 days after the date of last exposure to the COVID-19 positive individual to stay in school, ideally with rapid or molecular testing within 48 hours of the date of last exposure and again on or after day five. The parent/guardian of a student may request that their student complete the 10-day quarantine period at home, with testing recommended on or after day five. Please note that at-home quarantines are only recommended for students who are unable to mask.</p> <p>In the event of an ongoing household exposure, a student who is completing their quarantine at home must quarantine while the COVID-19 positive individual is isolating and for an additional 10 days after the COVID-19 positive individual ends isolation.</p>

ARP ESSER Requirement	Strategies, Policies, and Procedures
	<p>In alignment with PDPH guidance, the school does not conduct universal case investigation and contact tracing. Rather, students and employees who test positive for COVID-19 are instructed to identify and notify their close contacts.</p> <p><i>Isolating:</i> Students and employees who test positive for COVID-19 must isolate at home for 10 days from the positive test collection date or the symptom onset date. If symptoms develop, the isolation period is recalculated from the date that symptoms started, even if that date is after the positive test date. Ending isolation is contingent on symptom improvement as well as absence of fever for 24 hours without fever reducing medication.</p> <p><i>Case Reporting:</i> Students, employees, and visitors (if applicable) report all suspected or known cases of COVID-19 to the school. The school collaborates with the local health department, PDPH, to the extent allowable by privacy and other applicable laws, to confidentially provide information about people diagnosed with or exposed to COVID-19. The school monitors the number of COVID-19 cases among students and employees, the number of students and employees in quarantine, and levels of community transmission. If 10% of the school's population is positive, the school contacts PDPH for further guidance. At times the school may elect to or be directed by PDPH to pause in-person learning. Please note that most pauses are functional and due to employee shortages. However, longer pauses may be recommended for the entire school or a specific cohort in exceptional circumstances when large numbers of cases or close contacts present logistical and safety concerns.</p>

ARP ESSER Requirement	Strategies, Policies, and Procedures
f. Diagnostic and screening testing;	The school offers screening testing to students who are not up to date with their COVID-19 vaccinations when community transmission is at moderate, substantial, or high levels. Additionally, the school offers screening testing to all employees who are not up to date on their COVID-19 vaccinations at any level of community transmission. Screening testing is offered once weekly.
g. Efforts to provide vaccinations to school communities ;	Vaccination, including booster shots, remains the number one way to protect students and employees and reduce interruptions in learning. Anyone who is eligible should be vaccinated and receive all recommended doses. The school strongly encourages all eligible students and employees to receive all recommended COVID-19 vaccine doses, including booster and additional primary doses for some immunocompromised individuals.
h. Appropriate accommodations for students with disabilities with respect to health and safety policies; and	The school provides reasonable accommodations, as appropriate, to students with disabilities with respect to health and safety protocols.
i. Coordination with state and local health officials.	The school actively participates in collaborative efforts with local and state health officials who desire coordination related to responses to the COVID-19 pandemic.

Health and Safety Plan Governing Body Affirmation Statement

The Board of Directors/Trustees for **Boys' Latin of Philadelphia Charter School** reviewed and approved the Health and Safety Plan on **August 10, 2022**.

The plan was approved by a vote of:

 9 **Yes**

 0 **No**

Affirmed on: **August 10, 2022**

By:

DocuSigned by:

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(Signature of Board President)*

A. Wesley Wyatt IV

(Print Name of Board President)

*Electronic signatures on this document are acceptable using one of the two methods detailed below.

Option A: The use of actual signatures is encouraged whenever possible. This method requires that the document be printed, signed, scanned, and then submitted.

Option B: If printing and scanning are not possible, add an electronic signature using the resident Microsoft Office product signature option, which is free to everyone, no installation or purchase needed.