# STRONG START 2020

## REOPENING GUIDANCE FOR DIRECT SERVICE PROVIDERS

**SUPPORT FOR STUDENTS WITH DISABILITIES**

## INTRODUCTION

School systems must provide a free and appropriate public education (FAPE) consistent with the need to protect the health and safety of students with disabilities in their least restrictive environment. As schools prepare for the 2020-2021 school year, direct service providers can use this guide to ensure students continue to receive special education and related services across delivery methods (traditional, hybrid, or virtual) without interruption.

## PLAN DIRECT SERVICES

School systems and IEP teams can use this guide to build a plan to deliver special education and related services across instructional delivery methods. Service providers must intentionally plan to incorporate technology and remote learning strategies with in-person learning to prepare students for seamless transitions between remote learning and face-to-face services should the need arise.

**DEPARTMENT of EDUCATION**
*Louisiana Believes*

## REVIEW CASELOADS

Direct service providers must be familiar with the individualized needs and supports of each student on their caseload. Providers should complete the actions below:

- Review current service provider caseloads to determine any adjustments, if necessary.
- Review beginning of the year screening information, progress monitoring data, and other assessment, as needed, to understand present levels of performance.
- Review IEPs and, if applicable, contingency plans and compensatory services plans.
- Review alignment of student needs to IEP goals and services.
- Consult the IEP team, including parents, to determine if any amendments are needed.
- Determine appropriate methods of service delivery (traditional in-person, home-based in-person, virtual, or hybrid). This may not be the same for every student, goal, service or every session.

## ASSESS STUDENT/FAMILY NEEDS

Communicate with families to understand needs and create flexible service delivery plans adaptable to different learning scenarios. Providers can take the specific steps below:

- Review student and family responses to school system surveys to understand and address areas of need, as appropriate.
- Identify and deploy technology, equipment or materials needed for continued learning at-home learning (e.g., manipulatives, augmentative devices, physical therapy equipment).
- Consider adjustments to service delivery based on student needs, such as in-person service delivery opportunities for students who need access to specialized services, support and equipment.
- Train students and families on the use of devices and technology, as appropriate.
- Establish a **communication plan** to answer questions, submit assignments, and exchange feedback (e.g. video messaging via Marco Polo).
- Communicate with families about the academic and social/emotional needs of students and make adjustments as needed.

## PLAN FOR TECHNOLOGY USE

Students must be equipped with the skills needed to continue to access services in all learning scenarios. Service providers can prepare students through intentional preparation and planning that includes the **use of technology** during therapy sessions. Direct service providers should do the following:

- Understand and use learning platforms before providing services to students. Experience learning from the student's perspective by pairing with another provider to "dry run" a session as the therapist and the student.
- Collaborate with colleagues to share best practices and innovative uses of **technology, especially for young learners**.
- Know the features of devices that are needed to deliver direct services such as webcams, screenshare, and interactive features (e.g. on-screen drawing, keyboard control sharing).
- Determine whether any new tools or technology is needed to deliver synchronous (real-time) or asynchronous (self-paced) services.
- Establish technology **routines** to build student skills and independence.
- Train other teachers, adults and/or paraprofessionals to assist students with technology to support inclusive practices, promote student independence and ensure safety.
- Provide and continue technology support critical for young children **learning at home** and students with significant cognitive disabilities, who may be novice technology device users (e.g. computer, iPad, mobile phone).

## IMPLEMENT SERVICES

Direct service providers should incorporate the use of the tools that students will have available and be expected to use during remote learning. Strategies for incorporating manipulatives and technology into current sessions may include the following:

- Build in hands-on experiences, including opportunities for movement, to increase engagement, especially for young children and students with movement needs.
- Provide direct instruction and model how to use manipulatives, specialized equipment, virtual service platforms, including security and **accessibility** features.
- Give students opportunities to practice skills with manipulatives and access online therapist-created activities, assigned web-based instructional videos, interactive therapy sessions, etc.
- Teach students how to use equipment to video themselves practicing therapy skills, share documents and upload work products.
- Keep service logs and **progress monitoring data** in a format accessible regardless of physical location.
- Share data and information with other providers and IEP team members to ensure continuity of services and data collection.

Direct service providers may have to change methods of service delivery on short notice, and should consider creating at least 14 days worth of plans and/or pre-recorded lessons with accompanying kits, activities and materials, etc. in the event they are unable to deliver services themselves.

## DELIVER IN-PERSON SERVICES

Direct service providers must adhere to the health and safety **standards adopted by BESE** and school system protocols. This may require **modifications** to traditional direct services delivered in-person at school or at home to maintain safe distance and limit interactions with numerous static groups throughout the day.

### Consider Physical School Environment

Direct service providers must continue to provide services across learning scenarios and at the same time recognize the need for students to safely interact. When possible, providers should take the following actions:

- Ensure services are provided in a space separated from other groups. For example, consider larger spaces (cafeterias or gyms) divided with walls or partitions, or deliver services outdoors, as appropriate, based on students' unique needs.
- Consider shortening the length of sessions that require close contact to less than 15 minutes[1] and increase the frequency of the sessions (instead of 2x/week for 30 minutes consider 4x/week for 15 minutes).
- Communicate with others providing services to ensure appropriate physical distance can be maintained in the classroom environment or other service location.
- Limit movement around the classroom and school building. This may mean that different service providers are assigned to different floors, grades or static groups.
- Plan and communicate routines for picking up and dropping off students and traveling to and from service provision to maintain safe distance and limit interactions across student groups.
- Limit transfer of materials from one student to another and sanitize spaces between sessions.

### Consider Students and Groups

Direct service providers must consider safety protocols when scheduling group therapy sessions. Group composition considerations include the following:

- Limit contact with other adults and students not on the provider's caseload.
- Limit contact as much as possible between teachers and students from different static groups.
- Consider virtual small group services, if appropriate, when grouping students across static groups is unavoidable.
- Use **creative staffing** and support structures to implement inclusive practices (i.e., peer tutoring, teaching assistants, adaptive educational materials).
- Ensure therapy rooms are cleaned after each session. Consider alternating small-group in-person and virtual sessions to ensure time for rooms to be cleaned.

### Consider Home-based Service Needs

Home-based in-person direct services may need to be modified from a typical home service delivery model, consistent with the need to protect the health and safety of students, families and providers. Providers should build on existing home-based service procedures and protocols to incorporate the additional health and safety **standards adopted by BESE**. Protocols for home-based services must continue to establish clear expectations for families, students and therapists. The Centers for Disease Control and Prevention has issued **guidance** for Direct Service Providers working in community and home-settings.

1    **Public Health Guidance for Community-Related Exposure** from the Centers for Disease Control and Prevention

## DELIVER VIRTUAL SERVICES

Direct service providers must know the variety of service delivery methods available in virtual educational environments. Virtual delivery of services, with appropriate training and **planning**, can and should be equivalent to the quality of services provided in person. This includes developmentally appropriate **service delivery** for our youngest learners. Full or partial virtual service delivery can meet some students' needs and enable seamless transitions between methods of delivery, if needed.

### Consider Synchronous Learning (Real-Time)

Synchronous learning occurs in real-time between the direct service provider and individual or **small groups of students** receiving services. Direct service providers using synchronous methods of service delivery can consider the following:

- Conduct direct services with interactive audio and video connection live to create an in-person experience similar to that achieved in a traditional in-person session.
- Provide direct services within the general education setting via video conference or breakout rooms.
- Deliver services to a small group, while the students in the group each participate from separate locations.
- Deliver services in person to some students while at the same time other students participate with the group remotely.
- Facilitate activities that also support both formal and informal social interaction between peers.
- Consider opportunities to include parents, as appropriate, such as a "show off time" at the end of a session where the student can demonstrate their skills to their parents.

### Consider Asynchronous Learning (Self-Paced)

Asynchronous learning occurs in collaboration and communication with a therapist at a pace appropriate for each individual student. This allows students to participate in virtual learning at their own pace, using materials accessible on demand. Immediate access to learning provides families with flexibility to accommodate out-of-school schedules and provides students with multiple opportunities to practice and re-watch lessons or parts of lessons as needed. Direct service providers utilizing asynchronous methods of service should consider the following:

- Interact frequently with students to provide feedback and monitor progress.
- Deliver lesson activities and skills practice through capture and share methods for images and videos.
- Record live sessions for a student to watch anytime, anywhere, and more than once.
- Pre-record student specific video sessions that teach concrete skills and are accessible for frequent repeated practice.
- Provide other physical materials or tools for students to use in the home to encourage practice outside of therapy sessions (e.g., resistance bands, pencil grips). This can be supplemented with easily accessible video modeling of activities provided through virtual platforms or USB drives.
- Build video libraries or files for use during service disruptions.

## ADDITIONAL DIRECT SERVICE RESOURCES

For additional guidance in building service delivery skills for virtual delivery of direct services or a list of vetted organizations that provide direct services virtually, review Louisiana's **Partnerships for Success Guide**.

The Early Childhood Technical Assistance Center (ECTA) has created a hub of **EC tele-therapy and distance learning resources** and **Complex Child**, a free monthly online magazine written by parents of children with complex healthcare for service providers and families.

Direct service provider professional organizations have developed a suite of resources and guidance for specific service provider areas:

- **Occupational Therapy**
- **Physical Therapy**
- **Speech-Language Pathology**
- **Social Work**
- **Counseling**

- **School Psychology**
- **Clinical Psychology**
- **School Nurses**