



Autism Initiative ABA Supports Health and Safety Plan for Face-to Face Services

The protocols and guidance provided in this document should be reviewed and upheld by consultants when, upon prior approval, providing face-to-face services, which may include, training, consultation, coaching, modeling and guided practice.

Purpose and Guiding Principles

- Minimize risk
- Implement PDE/DOH/CDC pandemic guidelines to minimize and mitigate risks and community spread
- Have necessary documentation for contact training if needed
- Continue to provide quality training and technical support with measurable outcomes

<p>Face to Face Options should only be considered if:</p>	<ul style="list-style-type: none"> • Virtual delivery does not meet the training/technical support need • Consultants’ location, host site, and necessary travel locations (including overnight stays) are in green phase and in compliance with PA DOH face covering, social distancing, and group size directives. • All participants are confirmed to be free of: <ul style="list-style-type: none"> ○ Positive COVID 19 test (last positive test was over 14 days) ○ Symptoms or suspicion of COVID 19 ○ Compromised immune or chronic health condition
<p>Prior to Face-to Face Session</p>	<ul style="list-style-type: none"> • Review PAI health and safety plan guidelines (see below) • Review host district health and safety plan • Consultants and host staff will discuss and review health and safety guidelines as well as expectations to reduce the possible spread of COVID 19. Such discussions should include verification of: <ul style="list-style-type: none"> ○ Contact of administrator should any urgent communication be necessary ○ Number of participants and level of social distancing ○ Cleaning/sanitizing procedures for both staff and any materials used ○ Procedures to follow if anyone develops symptoms during session ○ Lunch break options if applicable to avoid communal spaces and shared items ○ Face covering by all participants • Should health and safety plan expectations cannot be met by consultants or host staff, then a virtual option will be offered as an alternative
<p>During the Session</p>	<ul style="list-style-type: none"> • Maintain and comply PAI and host health and safety plan guidelines • PAI Health and Safety Guidelines: <ul style="list-style-type: none"> ○ Hands must be washed or sanitized prior to and each hour while working with each student

	<ul style="list-style-type: none">○ Protective gloves may be worn as deemed necessary when working with students (if worn, must be discarded after use with each student)○ A face covering (i.e., mask, face shield) must be worn as per CDC and DOH guidance○ Face covering may be removed for eating or drinking○ To the extent possible, avoid sharing materials.○ If materials are shared, sanitize between uses○ When possible, avoid entering or using communal areas and/or using items that are for public use (e.g., water cooler, microwave, etc.) <ul style="list-style-type: none">● Consultants may terminate session and reschedule if anyone is displaying visible signs of illness or if the consultant feels unsafe with conditions
Post Session	<ul style="list-style-type: none">● Disinfect teaching materials to include devices/computers after the session (Links for safe computer cleaning: https://support.apple.com/en-us/HT204172 https://fireflycomputers.com/how-to-sanitize-a-chromebook)● Wash/sanitize hands after session● Disposable masks should be discarded daily and cloth masks should be laundered regularly as per CDC guidance and/or when soiled.● Clothing should be clean and laundered each day● Complete post face-to-face support survey



PaTTAN Autism Initiative Consultant Screening Tool for Face-to-Face Supports

Enter First and Last Name

Your answer

Do you have any personal circumstance such as a weakened immune system, chronic health condition, or caring for someone with a weakened immune system or chronic health condition that restricts you from providing face-to-face training or consultation?

Yes

No

If there is anything else you would like to share, please include it here

Your answer



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PaTTAN Autism Initiative Face-to-Face Support Request

Consultant(s) who will provide the face-to-face support (please enter first and last name all consultants who will be present)

Your answer

Date Service will be provided (may enter more than one)

Your answer

School District/IU

Your answer

School Building

Your answer



Teacher of record

Your answer

Has a Virtual Option been Considered?

Yes

No

Rationale for request of face-to-face support

Classroom needs require in-person modeling of procedures

Student with significant problem behavior resulting in hands-on training for staff

Student skill set requires modeling of procedures and protocols for training purposes

Other:

If "other" was selected as rationale, please explain below

Your answer

District/IU visitation policy reviewed

Yes

No



List any special considerations to be managed regarding district visitation policy (if none write N/A)

Your answer

District/School Health and Safety Plan reviewed

Yes

No

List any special considerations to be managed regarding district health and safety plan (if none write N/A)

Your answer

Have any of the PaTTAN consultants or host staff involved traveled outside of Pennsylvania in the last 14 days?

Yes

No

Have any of the PaTTAN consultants involved, host staff, or anyone in their household tested positive or suspected of having COVID-19 in the last 14 days?

Yes

No



Have any of the consultants involved, host staff, or anyone in their household had contact with someone with or under investigation for COVID-19 in the last 14 days?

Yes

No

Additional comments/considerations:

Your answer

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PaTTAN Autism Initiative Post Face-to-Face Survey

Consultant(s) who provided the face-to-face support (please enter first and last name all consultants who were present)

Your answer

Date Service was provided

Your answer

School District/IU

Your answer

School Building

Your answer



Teacher of record

Your answer

Did all PaTTAN consultants involved follow district visitation policies?

- Yes
- No

Did all PaTTAN consultants involved follow district Health and Safety Plan?

- Yes
- No

Did all PaTTAN consultants involved follow the PAI Health and Safety Plan?

- Yes
- No

Was there anyone present during your session who traveled outside of Pennsylvania in the last 14 days?

- Yes
- No



Was there anyone present during your session who has tested positive or

suspected of having COVID-19 in the last 14 days?

- Yes
- No

Was there anyone present during your session who has come in contact with someone who has tested positive or under investigation for COVID-19 in the last 14 days?

- Yes
- No

Did you or anyone present during your session develop any symptoms at the time of the visit such as cough, sneezing, fever, or other symptoms of illness?

- Yes
- No

Additional comments:

Your answer

Submit

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Revised Health and Safety Plan Governing Body Affirmation Statement

The Board of Directors of the **Tuscarora Intermediate Unit 11** reviewed and approved the Revised Phased School Reopening Health and Safety Plan on **September 10, 2020**.

The plan was approved by a vote of:

 8 Yes

 0 No

Affirmed on: **September 10, 2020**

By:



(Signature* of Board President)

 Janice R. Metzgar

(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.