



# Massachusetts Department of Elementary and Secondary Education

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## MEMORANDUM

**To:** Superintendents, Charter School Leaders, Assistant Superintendents, Special Education Directors, Collaborative Leaders, and Leaders of Special Education Schools

**From:** Russell Johnston, Senior Associate Commissioner and State Director of Special Education

**Date:** July 9, 2020

**Subject:** Guidance on Fall 2020 Special Education Services

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On June 25, 2020, the Department of Elementary and Secondary Education (“Department”) released its [Initial Fall Reopening Guidance](#), which prioritizes the safe return of students back to school by following a comprehensive set of health and safety requirements. The Initial Fall Guidance also asks schools and districts to prioritize and begin planning for in-person instruction, while simultaneously preparing blueprints for both remote learning and a hybrid school model (a combination of in-person and remote learning), should local conditions change this school year. This document supplements the Initial Fall Reopening Guidance by providing further information on supporting students with disabilities during the upcoming school year. It also provides necessary information in support of schools and districts, as they develop the portion of their reopening plans specifically related to special education.

Schools and districts were unexpectedly required to rapidly transition to remote models of special education service delivery when in-person learning was suspended from mid-March 2020 until the end of the 2019-2020 school year. Now, with more planning time and an emphasis on returning to in-person services in the school year ahead, this document is designed to provide guidance on these critical points:

- School districts must provide a free and appropriate public education (FAPE) consistent with the need to protect the health and safety of students with disabilities and those individuals providing education, specialized instruction, and related services to these students. Students with disabilities, particularly preschool-age students and those with significant and complex needs, should be prioritized for receiving in-person instruction during the 2020-2021 school year. These students should receive as much in-person instruction as is feasible within the health and safety parameters in effect at each particular time. Even if schools or districts are operating in a hybrid or remote model, educators and administrators must make every effort to continue to provide up to full-

time in-person instruction to such students. If in-person instruction cannot be provided and students with disabilities must receive instruction remotely in full, or in part, through a hybrid model, they must receive special education instruction and related services necessary to provide FAPE through an Instruction and Services model of delivery (e.g., structured lessons, teletherapy, video-based lessons, etc.) instead of relying solely on a Resources and Supports model (e.g., packets and assignments). For students with more significant and complex disabilities, providing one-on-one in-person instruction in the home or in a community-based setting should also be considered and made available as feasible, if it is not possible to provide instruction in an in-school setting.

- When school resumes in-person, with health and safety requirements in place, general education, special education, and English language education staff members must collaborate in order to determine the unique modifications that will be necessary to ensure the least restrictive environment (LRE) is in place for students with disabilities. This will require careful planning and scheduling.
- Family engagement is a critical component of school reopening. It is essential to reach out to parents and establish ongoing communication in a manner that works for the family. Parental input is always valuable, but is particularly critical during this time, when parents are ordinarily best positioned to observe their children and provide feedback on their children's experiences. Data from parents on primary areas of need, their children's ability to access remote learning, and other observations about their emotional and social well-being during the state of emergency will be essential to determining how to meet students' needs when schools re-open.
- It will also be important for families to provide input and to fully understand how the school or district plans to provide special education services to their children in the new school year.
- For limited English proficient parents and guardians, the school or district must provide interpreters, translate special education notifications sent to families, as well as schedules, learning plans, IEPs, and Progress Reports. Districts and schools must also use interpreters at all IEP Team meetings. The school or district should arrange for parents to have a specific contact person(s) within the child's special education Team and provide access to interpretation, if needed to communicate. The communication should be provided in language understandable to the general public. Many limited English proficient parents will require ongoing support in their own language so that they know what to expect from the school or district and how to support their child.

This document covers other important topics such as positive approaches to behavior, monitoring student progress, and transition services that the Department wants schools and districts to have at the forefront of their planning for the reopening of schools in the Fall. The Department recommends that schools and districts start to implement this guidance immediately and continue to develop additional supports throughout the school year to further enhance the quality of learning for students with disabilities.

## Delivery of IEP Services

Students must receive all services documented in their IEPs through in-person instruction, remote instruction, or a combination of both, with a strong emphasis on providing in-person instruction to the greatest extent possible, while abiding by the current necessary health and safety requirements. In particular, the Department urges schools and districts to prioritize in-person instruction for two particular groups of students with disabilities: preschool-aged students, and students with significant and complex needs. Remote learning is often more challenging for these students.

For the purposes of this document, students with complex and significant needs include:

- Students already identified as “high needs” through the IEP process on the IEP form entitled “[Primary Disability/Level of Need-PL3](#).” *Such students must meet at least two of these criteria:*
  - Services provided outside of the general education classroom;
  - Service providers are special education teachers and related service providers;
  - Special education services constitute more than 75% of the student’s school day;
- Students who cannot engage in remote learning due to their disability-related needs;
- Students who primarily use aided and augmentative communication;
- Students who are homeless
- Students in foster care or congregate care; and/or
- Students dually identified as English Learners.

Even if the rest of the school has entered into a hybrid or remote model of instruction, schools and districts must make every effort to maintain in-person instruction for students with disabilities, particularly those with complex and significant needs and preschool-aged students. For example, if a school or district needs to implement a hybrid model of instruction for its students, teachers may be able to simultaneously maintain full-time in-person instruction for students in self-contained special education classes. In such situations, schools and districts should first attempt to maintain full-time in-person instruction (i.e., having the students remain in school for the entirety of their school day). If this is not possible, schools and districts are encouraged to provide as many in-person services as possible on a part-time basis (such as having the students come into school for related therapies, social skills groups, or Applied Behavior Analysis (ABA) services). Finally, in-person services may be provided in the home or in community-based settings where feasible for students with significant and complex needs, if it is not possible to provide services in the school setting. In sum, schools and districts must make their best efforts to take all necessary steps to ensure that students with disabilities, particularly preschool-aged students and those with complex or significant needs, receive as many services as possible in-person, whether full-time, part-time or in a student’s home or community-based setting (if feasible).

## Learning Models

The sections below describe expectations for providing special education services through the three learning models schools and districts are expected to prepare prior to the reopening of school: in-person learning, hybrid learning and remote learning. While each model is described below, the Department re-emphasizes the importance of prioritizing in-person learning for students with disabilities, particularly preschool-aged students and those with complex and significant needs, if the school or district is unable to safely provide full-time in-person learning for all students.

### 1. Full-time In-person Learning (while meeting current health and safety requirements)

- Considerations for maximizing in-person learning for students with disabilities should be made when developing schedules.
- When considering staffing alternatives for reducing class size, students with disabilities must receive specialized instruction and supports from qualified professionals.
- Flexible solutions for reducing the mixing of student groups should be considered to ensure students with disabilities are receiving services safely in the least restrictive environment.
- When considering the use of alternative school spaces or external facility spaces, considerations for providing students with disabilities with inclusive learning must be made and placement of students with disabilities in groupings or cohorts that support learning goals in the least restrictive environment should be prioritized.
- When planning for full-time in-person learning, schools and districts should carefully consider the specific needs of their students with disabilities. While having classes outdoors may be a possibility for many students, this option may not be suitable for some students with disabilities. For example, students with visual impairments may have light sensitivity and/or outdoor settings may be too distracting.
- Identify staff trained in various areas of special education to be included in the COVID-19 Response Team.
- Provide additional training time for educators who will provide direct physical support to students with disabilities on the use of the additional protective supplies they will need, including appropriately donning and doffing disposable gowns, face shields, etc.
- Consider using strategies to pair peer models with students with disabilities to promote social interaction.

Districts and schools should partner with parents to support a smooth transition to re-opening of school, given the introduction of the new social distancing protocols and schedules. It is particularly important that educators work closely with parents of children who experience difficulty with changes in routine (for example, students with autism) or children who experience anxiety with such changes. (For example, schools and districts may create social stories or video introductions from providers and teachers, recorded tours of new buildings or programs, or

provide opportunities for students to ride new bus routes and visit new school buildings in person before the school year begins.)

## **2. Remote Learning**

- All schools and districts are required to have a comprehensive plan for delivering special education instruction and services remotely. This model must be available for individual students who are not returning in-person, and for all students in the event of future classroom or school closures due to COVID-19.
- Remote learning in school year 2020-2021 is expected to be more robust than the models of remote learning implemented in the Spring of 2020 when schools and districts did not have time to fully plan for the changes in instruction and service delivery due to emergency school closures.
- During the Spring of 2020, the Department described two models of service delivery that could be used to satisfy the requirement to provide a FAPE to students with disabilities: Resources and Supports (e.g., sending packets and assignments home coupled with frequent communication with parents) and Instruction and Services (e.g., structured learning time, teletherapy and video conferencing). With the ability to plan for the possibility of remote service delivery during the 2020-2021 school year, schools and districts must be prepared to provide services through “Instruction and Services” mode of delivery. The “Resources and Supports” delivery model can only be used on a temporary basis for a limited period of time (no more than two weeks), until which time the school or district has overcome the hurdles preventing service delivery through an “Instruction and Services” delivery model.
- In accordance with 603 CMR 27.08(3)(b), as adopted by the Board of Elementary and Secondary Education on June 30, 2020, remote learning models shall include the following requirements:
  - Procedures for all students to participate in remote learning, including a system for tracking attendance and participation;
  - Remote academic work aligned to state standards; and
  - A policy for issuing grades for students’ remote academic work. Teachers and administrators shall regularly communicate with students’ parents and guardians, including providing interpretation and translation services to limited English proficient parents and guardians.
- For school year 2020-2021 Instruction and Services must include the following components:
  - A regular and consistent schedule of classes, interventions, services and therapies as required by the student’s IEP, offered synchronously or asynchronously;
  - Structured learning time designed so that the student can access state standards; and

- Frequent interactions with teachers and other staff members to ensure participation.

The consistent schedule of classes, interventions, services and therapies must include time spent interacting directly with teachers and related service providers on a regular basis, as well as some independent work time, as appropriate, and opportunities for interacting with classmates. Synchronous remote lessons or tele-therapy sessions can be provided via telephone or video conferencing. Students might also benefit from asynchronous pre-recorded videos of lessons to follow at home. For students receiving the majority of their daily instruction through special education, teachers and therapists should assign supplemental work (beyond lessons taught synchronously or asynchronously) during the school day that can be accomplished independently with guidance from and accountability to the teacher or therapist.

- Schools and districts must support the infrastructure needed to put in place the required Instruction and Services, including availability of computer devices and internet connectivity in students' homes, appropriate communication platforms, and educator and parent training. Parent training topics might include the use of devices and electronic learning and communication platforms, troubleshooting technology issues, expectations for structured learning time, supporting students' social/emotional needs, etc., and trainings need to be offered in parent's primary language

### **3. Hybrid Learning**

- When planning for hybrid learning models, consideration for continuing to maximize in-person learning for students with disabilities should be prioritized. Preschool-aged students with disabilities and students with significant and complex needs should be considered for continuous in-person learning to the greatest extent possible. For example, even if most students are not in school each day, schools should consider scheduling small groups of students with significant and complex disabilities for daily in-person instruction. Where appropriate, peers without disabilities should also be included to ensure inclusionary services.
- Learning and services provided remotely via a hybrid learning model must follow the guidance provided in the section below on Remote Learning. Similarly, learning and services provided in-person must follow guidance provided in the section above on Full-time In-person Learning while meeting the current health and safety requirements.
- In-person services offered within the student's home or in a community-based setting, particularly for students with significant and complex needs, can also be considered as part of a hybrid model to ensure that as many services as possible are provided in-person instead of remotely.

## **Promoting Inclusive Services and the Least Restrictive Environment (LRE)**

When planning for the physical distancing requirements for students and adults in a classroom, schools and districts should be mindful of the additional special educators and related service providers who will need to enter the classrooms throughout the school day to provide services to students with disabilities in the least restrictive environment. As such, the following should be considered:

- Schools and districts should carefully develop classroom assignments and service delivery schedules for students with disabilities so that they receive services consistent with their IEPs in the least restrictive environment, as defined in [603 CMR 28.02\(12\)](#), while also maintaining the current health and safety protocols.  
For example, special education teachers and related service providers (speech language pathologists, occupational therapists, etc.), could provide special education services in the general education setting (“B Grid”) services remotely from within the school building via video conference, instead of coming into the classroom to provide services. This practice would help to minimize foot traffic in and out of classrooms while also providing access to services that support the inclusion of students with disabilities.  
To support this model, schools and districts could train paraprofessionals to serve as facilitators for push-in services. Training should address technology-related issues, such as device use, electronic platform use, troubleshooting procedures, and other student-specific needs and strategies.
- If service providers are not able to provide special education services in the general education setting remotely within the school building via video conference, those educators or related service providers should schedule services in a manner that maintains physical distancing requirements and avoids overlapping with other staff in the classroom or physical setting. Some classrooms might need to have a marginally reduced number of students in order to accommodate the additional educators and staff members who are needed to support students with disabilities throughout the school day.
- Schools and districts are encouraged to partner with parents to think creatively about how they can maintain opportunities for inclusion for students with disabilities. For example, students with disabilities often benefit from peer models, and providing inclusive groupings of students or using technology might help to support peer-to-peer connections while maintaining physical distancing requirements.

## **Parent Engagement**

The Department strongly recommends that schools and districts cultivate excellent two-way communication with families. For example, schools and districts should ensure that classroom teachers, special education teachers, or related service providers communicate regularly with parents. The frequency and type of communication will vary depending on the child’s individual needs, language and technology access barriers families may face supporting their children with remote learning and the preferred mode of communication. The Department recommends that

school personnel document all of their communication with parents. All written and oral communication must be provided in the primary language of the home and in language that is understandable to the general public. This includes translating special education notifications sent to families, as well as translating schedules, learning plans, IEPs, Progress Reports and using interpreters at IEP Team meetings.

Ongoing engagement will help educators, related service providers, and parents develop a comprehensive plan for students to receive individualized instruction and related services. IEP team members must consider information from parents regarding their children's experiences during the state of emergency, including primary areas of need, ability to access remote learning during these past months, and other information critical to meet students' needs as schools re-open. Keep in mind that school closure can be traumatic, students may have regressed, **and may have developed new disability-related areas of need, e.g. anxiety.** Since most students will have spent several months in the full-time company of their family or caregivers, schools and districts should take the opportunity to obtain as much data and information from parents and caregivers as possible. Schools and districts should use all available data to anticipate the student's present areas of need and levels of need during re-entry. In addition, it will help school personnel and families be prepared to quickly pivot should in-person services suddenly become unavailable. Ongoing engagement will also promote and sustain important connections between students and their teachers, a source of vital support and stability for students. Engagement between teachers and parents can occur through scheduled phone conversations, "office hours" when parents know they can reach teachers via phone or email, webinars for parents, etc.

Schools and districts should explain to parents how decisions will be made relative to health and safety issues as they come up during the 2020-21 school year. Parents need to know at the start of the school year that schools and districts must take into account many different factors in totality when making decisions about adjustments to health and safety guidelines. Certain issues cannot be divulged to parents due to student privacy and confidentiality protections (such as the ways in which an individual student's health needs might require unique health and safety protocols in a particular classroom). Student privacy and confidentiality must remain core to parent communications and should be respected by all parties.

Parent engagement is particularly crucial when determining if and how special education services will be provided differently as a result of the changes to the overall learning environment associated with any of the three models of instruction schools and districts might employ during the 2020-21 school year (in-person, hybrid or remote learning models). Teachers or IEP liaisons should contact the parents of their students as soon as possible to discuss how a given student's IEP services will be delivered if different than described in a student's IEP, giving particular consideration to potential changes to how and where special education services will be provided. Using input from that discussion, teachers or liaisons must provide parents with written notification containing specific information about how IEP services will be provided promptly at the start of the 2020-21 school year. For example, if during in-person learning, a student will receive related therapies via video conferencing while in the general education classroom, parents must receive written notification describing this different mode of delivering



IEP services. Examples of this written notification include the use of DESE's suggested Documentation of Modified In-Person, Remote or Hybrid Services template (forthcoming), Notice of Proposed School District Action (N1), letter or other written documentation.

If special education services are provided differently than as they are described in a student's IEP, parents must be notified in writing with specific information about how those services will be provided after they have discussed such matters with a teacher or IEP liaison. Written parent notification describing any differences in how special education services will be delivered should include how, where and when specialized services are being provided, and should be dated to reflect when services that are being provided differently begin. Parental consent is not required to implement modified in-person, hybrid or remote special education services; however, such documentation should describe the school's and district's efforts to provide services as closely aligned to the way they are described in the IEP as possible. Schools and districts can provide notification of remote services to families in multiple ways, e.g., U.S. mail, email, student information systems, or online communication platforms if schools and districts determine that parents can access online communications effectively. It is also critical to note that these notifications must be provided in the primary language of the home. Furthermore, special education interpreters must be fluent in the primary language of the home and in English and familiar with special education terminology so that information is accurate and conveyed in a manner that is understandable to the parent.

### **Developing Positive Behavior Supports and Safe Learning Environments**

Schools and districts should continue to create safe and supportive learning environments and provide proactive support to prevent unwanted behaviors in each of the three learning models planned for the 2020-2021 school year. Proactive direct instruction for school- and class-wide routines, social skills instruction, individualized social stories, and other preventative measures will be necessary, particularly following the disruption to normal school routines. Schools and districts should engage in conversations with parents about how their child is doing emotionally and behaviorally, and partner with parents in planning for the transition to in-person learning. Schools and districts may also need to provide additional supports for promoting positive behavior and reducing challenging behavior as schools reopen. Students will reacclimate to learning and school life at different rates. Additional considerations regarding how anxiety and/or trauma may impact the reintegration into normal school life should be considered, including providing Tier 1, Tier 2, and Tier 3 supports available to students under a [multi-tiered system of support](#).

Under the present circumstances, schools and districts should utilize disciplinary action as a last resort for students with disabilities exhibiting behavioral challenges. Wearing of masks, maintaining social distance, adapting to new routines and protocols, and other nuances related to changes in the learning and the school environment may be challenging or frightening for students with disabilities. Retraining and development of strategies that directly address student concerns regarding the pandemic itself and/or other current events should be integrated into lessons and/or classroom routines.

Before administering discipline, it is critical that special educators and school administrators determine if behaviors deemed inappropriate are a result of situations brought about by the pandemic, or if such behaviors are caused time away from in-person learning. Appropriate planning for newly-identified concerns should be part of reentry planning. In addition, restorative practices and other diversionary strategies should be utilized in place of punitive measures to help focus on correcting the concerning behavior. Additional de-escalation training and/or training on trauma-sensitive practices for staff including school resource officers may be needed to support the transition back to full-time in-person learning in an environment altered by public health and safety needs, and the potential of increased behavioral concerns.

### **Early Childhood Special Education and Preschool Children**

Preschool children with and without disabilities are particularly in need of in-person services so that they can develop the socialization, motor and communication skills that are vitally important at this age. Schools and districts should prioritize in-person instruction for this age group but should also be prepared to adjust to hybrid or remote services if necessary. As stated previously in this document, providing services in a student's home if feasible might be a beneficial option, particularly if it is not possible to provide services in the school setting.

In general, public preschools should follow DESE guidance, but can consult guidance provided by the Department of Early Education and Care (EEC) for additional information. However, for public preschools that enroll children who are eligible for and receive a voucher for [financial assistance for childcare that is issued by EEC](#), districts and schools should check in with their EEC regional funded program monitors for additional information.

District and school leaders should work with families to ensure family engagement strategies are in place, especially for families and children who are new to schools. For example, co-developing protocols and [social stories](#) that help children learn social distance guidelines with families can be helpful. For additional guidance for IEP matrices across environments to assist children and families to address goals throughout the day, please see this guidance on the [Florida Technical Assistance and Training System](#).

Below are additional recommendations to consider when addressing the unique needs of preschool children with disabilities:

### **Transition from Early Intervention**

An extension of Early Intervention (EI) services is available for children who turned 3 between March 15, 2020 and August 31, 2020. For those students, EI services can continue until special education eligibility determination can be completed and the child has transitioned to special education, or until October 15, 2020. Because as a result of the pandemic, many districts may have been unable to conduct evaluations, convene IEP meetings, and initiate services by the child's third birthday, districts can expect an increased number of children needing to complete the eligibility determination process and an increased number of children needing special education services. School and district leaders should be prepared to complete the transition

process, have completed assessments, and an IEP signed for this group of students by October 15, 2020.

In partnership with EI providers, districts should develop a plan that explicitly outlines the transition process for each child with extended EI services and who are potentially eligible for school-based services. Additional resources are available in the Technical Assistance Advisory [SPED 2019-1: Transition from Early Intervention Programs to Early Childhood Special Education](#). Districts should establish policies and procedures addressing the potential increase in assessments and the increase of children requiring special education services and should consider allocating additional staff, as necessary to complete assessments. There are several currently available [tools that can be used to complete remote or face-to-face eligibility determinations](#).

### **Natural Environments and LRE for Preschool Children**

In addition to public preschool programs, the LRE for preschool children includes natural environments which are comprised of childcare centers, community centers and the home. By developing IEP Activity Matrices, childcare center staff and families can see how IEP goals can be addressed in a variety of environments. For sample IEP Activity Matrices, see the [Florida Technical Assistance and Training System](#).

If children are attending childcare or Head Start programs, and IEP services are being provided, collaboration with the childcare staff is critical to ensure a smooth transition and delivery of IEP services. Public preschool staff and childcare staff should collaborate to ensure that special education services are being provided within current EEC guidelines as outlined below:

[The Requirements refer to “coordinating space and facilitating support services for children, including when identified on an Individualized Education Program \(IEP\) or Individualized Family Service Plan \(IFSP\).” Programs should interpret this to mean setting aside appropriate space for the remote services or tele-health services to take place, rather than attempting to receive visits from outside adults into the program.](#)

The Department recognizes that schools and districts face unique challenges related to preschool programming for children without disabilities and therefore providing in-district inclusive education might be impacted. Districts that have part-time preschool programs and those that charge tuition are at an exceptional disadvantage. An updated process for seeking an alternative compliance waiver under [603 CMR 28.03\(5\)](#) for inclusionary programs for young children during the COVID-19 pandemic is forthcoming.

### **Kindergarten Screening**

Kindergarten screening requirements are set forth in [603 CMR 28.03\(1\)\(d\)](#). Districts are required to screen three- and four-year old children for the Child Find process and for all children who are of age to enter kindergarten. The Department recognizes that because of the rapid shift to remote operation in the spring, kindergarten screening may have been delayed for some children. We recommend that schools and districts resume the screening process this summer (e.g., family interviews) using phone calls or virtual meetings. It may be helpful to complete in-person

screening when children return to school in the fall and have an opportunity to first adjust to being in the classroom environment. The exception to delays in screening protocols is if a student has a suspected disability and/or already has been referred for a special education evaluation; in these cases, the district should move forward in a timely manner with evaluation procedures.

### **In-person Instructional Environments and Physical Distancing for Preschool Children**

When determining classroom arrangement to accommodate physical distancing requirements, schools and districts should factor in the additional special educators and related service providers who will need to enter the classroom to provide services for young children with disabilities in the least restrictive environment. In light of the Department's guidance that students at the elementary level remain in one classroom for the majority of the day, districts may want to consider whether pull-out services can be offered in accordance with the health and safety guidelines or, instead, if services should be pushed into the classroom.

Given the specific health and safety requirements, schools and districts should reconfigure space to discourage prolonged close contact and instead encourage activities that allow for children to spread out. Programs may use different means to divide classrooms as needed to support group sizes and promote distancing requirements. These may include movable walls, partitions, or other barriers that clearly define and separate areas, ideally clear partitions so that children can see and interact with each other, while maintaining physical distance. Barriers should be robust enough to keep children physically separated and prevent materials and toys from being shared.

- Schools and districts may also design their own strategies to implement this requirement, e.g., spacing chairs at tables, designing games and group activities where children may engage in play that can be spaced apart (for example, by using visual cues like hula hoops or developing social stories to support children in learning new rules), and increasing outdoor time.
- Visual supports and strategies for direct instruction for children to maintain physical distance and comply with other health and safety guidelines will be critical. For additional ideas related to supporting social/emotional instruction and positive behavior supports, visit the [Pyramid Model Consortium's](#) webpage.
- Educators may also develop individual bins with activities/materials that still foster social interactions such as music and dancing; additionally, educators could identify materials that stretch across learning centers so that children can be working together on projects while remaining physically distanced (e.g., mural size paper).
- The balancing of health and safety requirements with child development needs is something that will continue to evolve during this time of significant transition. The Department will rely on the expertise of educators to ensure daily schedules and activities are designed to foster physical distancing in the most effective way to mitigate virus spread while continuing to help children enjoy their day, support the development of social-emotional competencies, and foster learning.

## Hybrid/Remote Learning Considerations for Preschool Children

As described above, the Department recommends that young children be prioritized for in-person instruction. If remote instruction becomes necessary, balance screen time and non-screen time by considering shorter virtual sessions and consider providing flexible offerings of live, recorded, small group instruction.

- Pre-recorded enrichment activities aimed at providing practice and/or generalization opportunities can be provided outside of live learning time.
- Keep learning opportunities interactive and similar to the routine of what children already were familiar with (e.g., circle songs, etc.) and when appropriate, pair new learning with familiar activities.
- Given the remote aspect of learning in these circumstances, educators should be mindful of wait times to maximize opportunities for as many children to be engaged.
- In-person services offered within the student's home, particularly for preschool age students with complex and significant disabilities, can also be considered as part of a hybrid model to ensure that as many services are provided in-person instead of remotely.

## Monitoring Student Progress

School districts, collaborative programs, and approved special education day and residential school programs must continue to issue Progress Reports at least as often as report cards or progress reports are provided for students without disabilities, in accordance with [603 CMR 28.07\(3\)](#). Progress Reports must be sent to families, guardians and state agencies involved with the student through mail, email, student information systems, or online communication platforms, and translated into the language of the home when required. The school must maintain documentation of when and to whom Progress Reports are issued.

Educators and service providers must collect data and use this data to monitor the student's progress to develop Progress Reports. If there are periods of remote learning, educators, service providers, parents, and students should review a student's IEP and identify the types of data that can be collected from the student, family, and home environment. Staff can reimagine their roles in a hybrid or remote context, e.g., by using a tracking sheet to collect data from student videos, interviewing parents and students, or using assessments. There are many resources to aid in this work, for example:

- [The Texas Education Agency Phase 4 Remote Learning Plan Monitoring](#)
- [Student Progress Monitoring Tool for Data Collection and Graphing](#)
- [Measuring and Reporting Progress Toward Mastery of Annual Goals](#)
- [Data Collection During Distance Learning](#)
- [Using Google Drive to Collect Data for IEP Goals](#)

## Transition Services

Although in-person participation in community-based programs and inclusive [concurrent enrollment programs at institutions of higher education](#) may be limited at this time, schools and districts should make best efforts to develop plans collaboratively with community-based providers, colleges, parents/guardians, and students in order for students to access as much transition programming as possible. Current health and safety requirements must remain a priority when making decisions as to the extent that transition services are able to be accessed in community-based settings; however, it is highly recommended that in-person transition services resume as soon as it is safe to do so with the proper health and safety measures in place.

## Initial Evaluations, Reevaluations and IEP Team Meetings

The Department recognizes that due to the closure of school buildings and settings and the unexpected suspension of in-person education in March, annual review Team meetings, evaluations and/or parts of evaluations may have been postponed. As we plan to return to in-person services and instruction, schools and districts will need to plan for addressing the backlog of assessments and meetings while simultaneously addressing the need to maintain timelines for annual review Team meetings and evaluations for students who are newly referred and/or due for an evaluation. Schools and districts should continue to follow the direction on meeting special education timelines as described in the Department's [Implementation of Special Education Timelines During the COVID-19 State of Emergency](#).

IEP Teams must continue to conduct annual review Team meetings as they are due, in accordance with [603 CMR 28.04 \(3\)](#). Districts are advised to update the IEP as though the student will be attending school full time in-person; however, given the unpredictable nature of the COVID-19 virus, schools and districts must be prepared to be adaptable in their approach to delivery of IEP services, based on the current health information and trends at that time. As was the case when schools closed in March, any changes to service delivery should be documented in writing to the parent.

It is important to note that a change in the delivery of services due to a school's change in learning model, in-person, hybrid or remote, as a result of COVID-19 **does not result in a change in placement**. The services outlined in the IEP remain and are considered "stay-put." Schools and districts must maintain open communication and collaboration with families as they respond to the trajectory of the virus and make decisions about the opening and/or closing of school buildings and settings and the learning models to be utilized.

## Considerations for Students with Low Incidence Disabilities

- Students with high risk medical conditions
  - Parents/guardians of students with [high risk medical conditions](#) should be encouraged to consult their child’s healthcare provider to discuss the appropriateness of attending in-person instruction. This includes students who depend on mechanical ventilation and students with tracheostomies. School health professionals should work with primary healthcare providers to identify alternatives to nebulizer treatments in the school setting and to inform decision-making relative to how the student can safely access in-person instruction.
- Students with visual impairments
  - General considerations
    - Students with visual impairments do not acquire information incidentally and often need additional instructional time devoted to visual efficiency, technology, orientation and mobility (O&M), recreation and leisure, self-determination, independent living skills, career education and compensatory skills, including communication.
    - Consider grouping students who need braille and/or tech instruction in centralized locations for specialized instruction in order to reduce Teachers of the Visually Impaired (TVIs) moving between several locations.
    - Academics of braille can be provided remotely; however, technique of braille and writing and reading should be prioritized for in-person learning.
    - O&M should be prioritized for in-person learning. Reteaching may be necessary once in-person learning resumes.
  - Technology Considerations
    - Use technology or software that allows screen sharing easily with the TVI to “see what they are seeing.”
    - Provide braille notetakers with Wi-Fi access, braille curriculum materials, and braille production capability from home, if possible.
    - Be sure links and sites that are shared with the classroom are accessible to students with visual impairments.
    - Students with low vision may need a larger monitor to interact with class remotely and for others the visual multitasking required to participate in live remote classes may be too overwhelming. Pre-teaching and reinforcement may be needed to assist with processing the live lesson.

- Provide Bluetooth keyboards for students with visual impairments who have iPads to allow students to use accessibility keyboard shortcuts when in online platforms. Touchscreens have proven very difficult for students with visual impairments to use when accessing Google Meet or Zoom.
  - Reinforce technology skills such as using screen reading or magnification software, teaching keyboarding skills, and learning to navigate and use the Windows or Mac environment so that they are (1) more easily able to access remote learning and (2) more independent with their technology.
  - Provide accessible online typing program memberships to increase keyboarding skills for students with visual impairments to help ready them for more remote learning (Typio by Accessibyte is one option).
  - Provide check-ins with the district assistive technology specialist, the student/parent and the TVI to make sure equipment is working and to take care of any accessibility problems.
- Students who are deaf or hard of hearing (DHH):
  - Consider the needs of students who must be able to see the lips of the speaker.
  - Purchase clear masks or shields, as needed, for staff.
  - Consider the need for an interpreter in the classroom for deaf or hard of hearing students and determine the logistics of social distancing and classroom setups.
  - Face shields and masks distort voice and are difficult with FM systems. The Massachusetts Commission for the Deaf and Hard of Hearing is working on resources to address FM system use and will disseminate these when they are available.

### **Staffing, Specialized Safety Supplies/Protective Equipment and Training**

Due to the need to be closer than the minimum physical distancing requirements when instructing some students with disabilities, the Department recommends that school and district special education service providers follow the guidelines that the Center for Disease Control describes for “[direct service providers](#)”. Direct service providers include personal care attendants, direct support professionals, paraprofessionals, therapists, related services personnel, assistants, school nurses, health office staff, and any other staff who must come into close contact with students with disabilities.

Direct service providers are essential for the health and well-being of the students they serve. Direct service providers should be aware of and trained on how COVID-19 spreads, risk factors, and prevention actions. Additional preventive measures may need to be taken depending on the activity and the risk level of that activity. Please note that DESE provided [guidance on the provisioning of key safety supplies](#) on June 5, 2020 in order to help schools and districts determine the quantities of the protective equipment described below:



| <i>Classification of Individual Wearing protective equipment</i>   | <i>N95 or KN95 Respirator</i> | <i>Face Shield</i> | <i>Disposable Gowns</i> | <i>Disposable Gloves</i> | <i>Gowns/ Coveralls/ Other Body Covering</i> | <i>Cloth Face Covering</i> | <i>Disposable mask</i>                                |
|--|-------------------------------|--------------------|-------------------------|--------------------------|--|----------------------------|---|
| DSPs in care areas of students with suspected COVID-19   | X                             | X                  | X                       | X                        | X  |                            | X<br><br>(with face shield if N95/KN95 not available) |
| DSPs in the same facility but not in the care areas for students with suspected COVID-19   |                               |                    |                         |                          |  | X                          |   |
| DSPs providing personal care to students without suspected COVID-19 but who may potentially be exposed to bodily fluids                                      |                               | X (preferred)      |                         | X                        |  |                            | X   |
| DSPs performing or present during aerosol generating procedures such as nebulizer treatments, chest PT, suctioning, trach care                               | X                             | X                  |                         | X                        | X  |                            |   |
| Transportation personnel/monitors who must come in direct physical contact with passengers (e.g. buckling/unbuckling, performing wheelchair safety services) |                               |                    |                         | X                        |  | X                          |   |

Some students with disabilities will require unique supports that may make it less possible to practice physical distancing. In addition, some students with disabilities will not be able to wear cloth face masks as frequently or at all. In order to support such students safely, schools and districts must ensure that:

- Classrooms are adequately staffed, and in accordance with any approved student: licensed educator: aide ratios;
- Educators, related service providers, paraprofessionals and other staff members are prepared with any additional protective equipment that may be needed as unexpected situations arise, such as disposable gowns, face shields, etc.;
- When assessing the amount of protective equipment needed, considerations should be made for itinerant staff who interact with multiple groups of students in multiple locations, staff who perform tasks routinely that require close proximity and/or physical contact with students, and those who go out into the community to support students' educational programming;

- All staff members using additional protective equipment are [properly trained](#) to accommodate children's needs (See [BU SHIELD COVID-19 training resources](#) for videos, posters and other training materials); and
- Families are consulted as partners to ensure the health and safety of students.