



Remote Use of Paraprofessional Supports for Students with Disabilities During the COVID-19 Pandemic

Michael F. Giangreco, Ph.D.
University of Vermont
Center on Disability & Community Inclusion
Michael.Giangreco@uvm.edu

Preface

The events associated with the COVID-19 pandemic, and its implication for continuing to provide a free appropriate public education, are new to all of us. The education community and families have rapidly stepped up in substantial and creative ways to support students with the full range of disabilities under these unusual circumstances. While that is encouraging, there is no denying the enormity of the challenge and the reality that there are no easy or one-size-fits-all solutions. As many have said, "We're all in this together."

One piece of the special education support system is the paraprofessionals who work with our students who have disabilities. These individuals provide valuable supports in schools and can be part of the supports offered during these times of social distancing and remote instruction. Especially in situations where a relationship has already been established during earlier face-to-face instruction in schools, the engagement of paraprofessionals can provide a sense of personal connection, continuity, and provide instruction that may help avoid regression of previously learned skills/concepts and hopefully advance progress.

Below are a series of key points to consider as you decide how to most effectively utilize your paraprofessional workforce. These are merely initial thoughts compiled after recent conversations with colleagues who are acknowledged at the end of this document. **I invite you to email me with additional key points or other ideas** related to the use and deployment of paraprofessionals during this period of remote instruction, that I may add to this document with your permission and credit you in the acknowledgements. As substantial contributions are received from other colleagues, it is my intention to edit this document and post updated versions on the web site of the Center on Disability & Community at the University of Vermont: <https://www.uvm.edu/sites/default/files/Center-on-Disability-and-Community-Inclusion/ParaprofessionalPlanningCOVID19.pdf>

Key Points

1. As most schools have already done, teachers, special educator, or other designated school personnel (e.g., school counselors, school psychologists, principals) start by ensuring direct communication with families of your students with disabilities and involving them as partners

in decisions about what would be helpful under these atypical conditions. Given the range and uniqueness of each family's circumstance, special education's dedication to individualization is a foundational strength at this time and should be maintained. This individualization and collaboration should account for the reality that each family has different and fluctuating capacities to be responsive to requests from school for supporting and monitoring student school work. Multiple factors competing for parental time (e.g., parents' own work, multiple children with varying needs, others living in the household) and other pandemic-related stressors (e.g., challenges to physical and mental health within the family, loss of employment, food insecurity, economic challenges) are combining to interfere with the capacity of many families to support remote educational activities. While schools are doing their part to provide remote education, some families may be only partially able to respond in ways that school personnel might desire. As educators, we need to keep these types of realities in the forefront of our interactions with families so we can truly achieve our aims of supporting them during these unprecedented circumstances and not inadvertently add to their stress.

2. I think we can all agree, and should openly acknowledge, that remote instruction by paraprofessionals has limitations. It can only address a subset of essential duties carried out by paraprofessionals when they work face-to-face in schools; this is also the case for other educational professionals and related services providers. Not all paraprofessional supports are compatible with virtual, distance, or online platforms.
3. In cases where remote instruction is not sufficient to meet student needs (provide FAPE, a Free Appropriate Public Education), IEP teams should, upon the return to in-school programming, consider compensatory educational opportunities as an option to make up for potentially lost educational benefit. It is important to note that in cases where schools may not be able to fully offer FAPE under distance conditions, this is not a fault of the school -- it is simply an unexpected circumstance over which educational teams had no control (both in terms of the pandemic and school closures). In general, compassionate understanding seems to be the pervasive mutual approach to interactions and problem-solving I am hearing about and experiencing -- I hope we can continue this heightened sense of caring and constructive ethic when we return to school-based service delivery.

Some educational agencies are suggesting a qualitative approach to considering the potential for compensatory services. For example, the Vermont Agency of Education, has offered the following guidance to Vermont schools: "The LEA shall make an individualized, fact-specific determination based upon what is reasonably calculated to provide the educational benefits that likely would have occurred from special education services if not for the school dismissal." and offer a [5-step decision-making process](#) regarding compensatory services (Vermont Agency of Education, 2020, p. 10).

Compensatory education could take the form of extended school year services and/or extended school day services, to be determined on an individualized basis with the IEP team. This may not be necessary, appropriate, or desired in all cases. Again, individualization is essential because some students may not have the physical, attentional, or emotional stamina to benefit from an extended school day. A secondary caution when returning to in-school instruction is that it may not be appropriate, desirable, or even feasible, to simply increase the frequency or duration related services sessions. Students attend school to receive an education and related services are provided when they are *necessary* to provide access to, or support, that education. It could interfere with a student's education if related services inadvertently replaced primary educational services. Lastly, some families may not find compensatory education desirable for their child, even if they may be eligible. Some parents have shared the perspective that when schools reopen, they think the best option for their child is to return to the type of schedule and routines that existed pre-pandemic -- they just want things "back to the ways they were before".

4. The COVID-19 pandemic has highlighted the **importance of maintaining the same recommended principles and practices as when paraprofessionals are deployed effectively face-to-face**. In other words, we should not expect or ask paraprofessionals to function as teachers and/or special educators during these atypical circumstances. This means (at least) the following:
 - a. The instruction provided by paraprofessionals should be **supplemental** to remote instruction provided teachers, special educators, and/or related services providers (e.g., speech/language pathologists, occupational therapists, physical therapists), **not** the primary or exclusive remote instruction offered. Students with disabilities, including those with intensive support needs, **should not** be receiving the bulk of their remote instruction from paraprofessionals. Our students with disabilities deserve the same access to their general education teachers, across subjects, as their peers without disabilities.
 - b. If supplemental instruction is provided by paraprofessionals it should primarily focus on:
 - (a) practicing already acquired skills with a focus on individually appropriate dimensions (e.g., accuracy, quality, latency, response rate),
 - (b) minimizing educational regression,
 - and (c) strengthening maintenance and generalization of learned skills. Primary and first instruction remains an appropriate role of the teachers and special educators.
 - c. Paraprofessionals should only be assigned to remote tasks they are qualified to undertake and for which they have been appropriately prepared. These tasks may

- include both instructional (e.g., individual tutoring, small group supplemental instruction) and non-instructional roles (see item 6 below).
- d. The work of paraprofessionals should be directed and overseen by an appropriately qualified professional (e.g., teacher, special educator, speech/language pathologist). A designated professional educator should be assigned for each paraprofessional to guide their work, with a consistent and regular schedule should be established for contact between them. Although the frequency and format (e.g., phone call, video chat, email check-in) of these regular contacts will vary, teams are encouraged to establish consistent categories to frame these interactions (e.g., establishing an agenda, reporting on student progress, plans for archiving student data, time for questions, planning for the upcoming lessons or other duties, sharing good news).
 - e. In most circumstances it makes sense for instruction provided by paraprofessionals to be synchronous, since asynchronous learning should be planned by a highly qualified professional (e.g., teacher, special educator).
 - f. All remote instruction provided by paraprofessionals should be based on written plans that include a data collection component prepared by a highly qualified teacher and/or special educator. Paraprofessionals should **not** be asked to develop lesson plans, although they may have creative and useful contributions to share with the teachers and special educators.
 - g. It should be noted that during the pandemic some schools have reported using paraprofessionals exclusively for noninstructional roles and have relied on teachers, special educators, and related services providers for all remote instruction. Other schools have included some paraprofessionals in their remote instructional plans (e.g., tutoring, supplemental instruction).
5. Based on plans developed by qualified professionals in collaboration with families and the student whenever possible, paraprofessionals can contribute to connection and continuity by facilitating social peer interactions of the sort that might have occurred in school during lunch, free play opportunities, or on the playground during recess. This may involve implementing social connections online (e.g., via a videoconferencing platform) among a student with a disability and classmates with or without disabilities. While the paraprofessional may be helping arrange and facilitate such student-to-student connections, they can again follow recommended practice as if they were in school, by stepping back as much as possible, so as to not dominate the social interaction or inadvertently interfere with peer interactions.

6. Noninstructional roles of paraprofessionals during a pandemic may vary based on a variety of factors (e.g., local needs, paraprofessionals skills and interests, employment contracts). Sometimes these roles are within the parameters of existing employment agreements and sometimes paraprofessionals may be given the option to shift to a different employment category or role within the school district if a need exists. Examples of how paraprofessionals have been utilized in noninstructional roles during this current pandemic, before and/or after stay-at-home orders, include: (a) assisting teachers and special educators by preparing/gathering/compiling materials (e.g., homework packets, lesson-related materials), (b) audio and/or video recording materials (e.g., lesson-related readings and instructions, messages of support), (c) converting materials for posting online (e.g., videos to digital formats such as mp4), (d) cleaning school equipment and spaces, (e) delivering meals, (f) distributing essential supplies, (g) providing child care for essential community workers and/or families with critical needs, (h) hosting online story hours where they read books to students either live or recorded so they are available asynchronously, (i) hosting virtual dance parties, (j) convening online, interactive cooperative activities and games, (k) facilitating co-curricular activities, and (l) phone check-ins with families.

If paraprofessionals are asked to conduct phone check-ins with families, it is recommended that a script be provided and paraprofessionals be oriented to clear boundaries of the communication, since this type of direct communication with families is typically not a recommended role for paraprofessionals, but rather is the role of teachers and special educators. That said, if this temporary shift in role is deemed locally appropriate during a pandemic, clear and limited parameters regarding the nature and extent of the communication is essential and should include scripted responses paraprofessionals can use when asked questions beyond the purposes of the check-in (e.g., who the parent can call or what web site they can access). In some schools paraprofessionals have been assigned to call designated families, especially those with fewer economic resources, to survey them about their access to online learning opportunities (e.g., computers/tablets, internet service). Schools' responsiveness to the collected information (e.g., providing computers, internet hot spots) can seek to mitigate discrepancies in access and reduce, or at least not exacerbate, the existing marginalization of economically disadvantaged students.

7. It is the school's responsibility to ensure that paraprofessionals have the equipment, materials, and internet access (e.g., Wi-Fi) needed to engage in the tasks we are asking of them in an effort to support students. We should not, for example, assume that they necessarily have in their homes access to the necessary computer equipment and internet connectivity required for certain tasks, especially since we know paraprofessionals come from a diverse range of backgrounds and personal circumstances. As many schools have done for students, they may need to provide paraprofessionals with resources such as computer equipment, Wi-Fi hot spots, and/or accompanying technical support.

8. Remind teachers and special educators that coordinated communication with the families of their students is part of their role, not an appropriate paraprofessional role. Paraprofessionals need to know what to do if parents contact them or ask them program or service related questions when they are having approved remote instructional contact. Paraprofessional should be provided with a short, explicit, scripted message developed by the school district they can share with parents directing them to the appropriate faculty member or administrator contacts. This message should mirror whatever message went to parents already about who to contact related to their child's special education program. Under any circumstances where paraprofessionals are in communication with families, whether that is an interaction that was planned by the school (e.g., the check-in described in item 7) or an unsolicited contact from a parent to a paraprofessional, the paraprofessionals should be oriented to share the parent contacts and substantive information to their supervising special educator or designated case manager in a timely fashion.

9. Continue to provide targeted professional development for paraprofessionals remotely, which may occur in synchronous or asynchronous formats.

Resources

An extensive listing of literature about special education paraprofessionals in schools (1990-2020), arranged chronologically with the most recent first, can be found at:

<https://www.uvm.edu/cess/cdci/selected-paraprofessional-references>

Professional literature and related resources about special education paraprofessionals in inclusive school, including alternatives to overreliance on paraprofessionals, developed at the Center on Disability & Community Inclusion can be found at:

<https://www.uvm.edu/cess/cdci/evolve-plus-materials-and-resources>

Although not directly related to paraprofessionals, the multi-organization, *Comprehensive Integrated Three-Tiered Model of Prevention* (Ci3T) team, in response to the COVID-19 circumstances, has developed a new set of resources to support educators and families to facilitate online and continuous learning.

<http://www.ci3t.org/covid>

The document referenced here is not exclusively related to paraprofessionals, but provides relevant information associated with their utilization during unanticipated, extended school closures.

Vermont Agency of Education (2020). *Special education during school closure due to a novel coronavirus outbreak: Continuity of education plan guidance 2.1.*

<https://education.vermont.gov/sites/aoe/files/documents/edu-special-education-during-school-closure-due-to-a-novel-coronavirus-outbreak.pdf>

Acknowledgements

Thank you to the following colleagues who contributed to discussions during this COVID-19 pandemic that informed the initial development of this document: Peter DiNuovo (New York City Board of Education), Michael L. Woods (Hardwood Union Middle & High School, Duxbury, VT), and Ritu Chopra (University of Colorado, Denver). Thanks also to the colleagues who contributed ideas that were added to updated versions of this document: Glenn Patterson (University of Vermont), Jessica Little (North Santa Cruz County SELPA, CA), Susan Bruhl (Mount Abraham Union School District, Bristol, VT), Emily E. Sobeck (Franciscan University of Steubenville, OH), Christina Saccoccio (Ellington Public Schools, Ellington, CT), Denise Uitto (retired from University of Akron, Wayne College), Kathleen Lane (University of Kansas), Tracy Harris (Vermont Agency of Education), Leo Eckman (School District of South Milwaukee, WI), Kristen Bottema-Beutel (Boston College), and Chris Knowles (University of Oregon).