

Iron Mountain Public Schools COVID - Guidelines

In partnership with Dickinson Iron District Health Department (DIDHD)

This information was developed for our staff, students, and families based on the latest guidance at the time.

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- You must wear a face covering when you are entering our building, common spaces, your
 office or classroom, have an appointment with someone outside IMPS. You may remove
 your face covering if you are in your office/classroom alone.
- 2. You must do a daily screening. For staff it is before you leave for work. For students, parents, or visitors it is prior to going on our bus or entering our facility.
- 3. All non-staff members must schedule an appointment or have approval prior to entering any of our buildings. No one is allowed in our building without successfully completing a screening. A Health Screening Worksheet can be found in these guidelines.
- 4. Whenever possible social distance (6 feet apart).
- 5. Wash or sanitize your hands upon entering our buildings.
- 6. Symptoms include: Temperature 100.4 degrees Fahrenheit or higher when taken by mouth, sore throat, NEW uncontrolled cough that causes difficulty breathing, diarrhea, vomiting, or abdominal pain, or new onset of severe headache.
- 7. Close contact is being within 6 feet for 15 minutes or longer.
- 8. Students grade 5-12 will wear face coverings at all times, except when they meet one of the exceptions explained in the District Safe Return to School Plan. Students in grades EK-4 will required to wear a face covering when they travel throughout the building and have contact with other students. If students in EK-4 are in their cohort for an extended period of time, they are not required to wear a face covering and if they do, will be able to take breaks during their cohort time.
- 9. Parents must screen their children at home prior to sending them to school.
- 10. Parents must ensure the district has updated contact information on file in the event the school needs to contact a parent/guardian.

COVID-19 Workplace Health Screening

the last 14 days, have you devany chronic illness:	eloped any of the following	symptoms that a	re new/differe	ent/worse fror
Subjective fever (felt feveri	sh):	☐ Yes	□ No	
New or worsening cough:		☐ Yes	□ No	
Shortness of breath or diffi	culty breathing:	□Yes	□ No	
In the last 14 days, have you dev	eloped any of the following	symptoms that a	re new/differe	ent/worse from
of any chronic illness:	croped any or the ronowing	symptoms that a	re new, amere	errey worse rror
Chills:		☐ Yes	□ No	
Headache:		☐ Yes	□ No	
Sore throat:		☐ Yes	□ No	
Loss of smell or taste:		☐ Yes	□ No	
Runny nose or congestion	:	☐ Yes	□ No	
Muscle aches:		☐ Yes	□ No	
Abdominal pain:		□ Yes	□ No	
Fatigue:		☐ Yes	□ No	
Nausea:		☐ Yes	□ No	
Vomiting:		☐ Yes	□ No	
Diarrhea:		☐ Yes	□ No	
Current Temperature: DISCLAIMER: This screening t				
your temperature is 100.4°F or his cian's office for direction. You should isolate at home for department. If diagnosed as a probaware of your diagnose. You must also have 24 hours we past 14 days, have you:	gher, please do not go into we minimum of 10 days since synable COVID-19 or test positivities or testing status.	ork. Self-isolate at nptoms first appeare, call your local he	home and cont	act your prima
	:	102		
Had close contact with an indiv Traveled Internationally?	iduai diagnosed with COVID-	17:	☐ Yes	□ No
nswer <u>YES</u> to either of these que y care physician's office if you have	symptoms or have had close	ontact with an indi	vidual for evalu	•
able diagnosis or test positive call y	our local nealth department t	o ensure they are av		
re:				

COVID-19 SCHOOL HEALTH SCREENING AGREEMENT — PARENTS/GUARDIANS

INSTRUCTIONS FOR PARENTS AND/OR GUARDIANS

For the health and safety of our students, the local public health department requires students be screened for symptoms of COVID-19 before entering the school. Due to the time and interruption to education doing this on site prior to school entry this would cause, the health department and the CDC do not recommend these screenings be done by the schools.

We ask that you complete the steps of the student screening below, prior to sending you child to school or any school activities or sports. We ask that you complete the form below indicating your understanding and agreement to perform symptom screenings on your child. Forms are available in the School Building Office and are to be returned as soon as possible to the Office.

By signing this form, I am committing to screening my child daily for the 2020-2021 school year, unless otherwise directed. I also understand that it is my responsibility to call Dickinson Iron ISD as soon as possible to let them know if my child is not going to school for potential COVID-19 symptoms.

I commit to screening my child	for COVID-19 symptoms and exposure
Parent(s)/ Guardian(s) Name:	
Address:	
Phone Number:	
Parent or Guardian Signature:	
Date:	

Before leaving for school, please make sure of the following screening. If your child has any of the following symptoms, that indicates a possible illness that may decrease the student's ability to learn and put them at risk for spreading illness to others.

I. SYMPTOMS
\square Temperature 100.4 degrees Fahrenheit or higher when taken by mouth
☐ Sore throat
□ New uncontrolled cough that causes difficulty breathing (for students with chronic allergic/asthmatic cough, a change in their cough from baseline)
\Box Diarrhea, vomiting, or abdominal pain
\square New onset of severe headache, especially with a fever
2. CLOSE CONTACT/POTENTIAL EXPOSURE
In the past 14 days has your child:
☐ Had close contact (within 6 feet of an infected person for at least 15 minutes) with a person with confirmed COVID-19: OR
☐ Had close contact (within 6 feet of an infected person for at least 15 minutes) with person under quarantine for possible exposure to COVID-19; OR
exposure to COTID-17, OK

If the answer is **YES** to any of the **symptom** questions, keep your child(ren) home from school.

If the answer is <u>YES</u> to any symptoms question and <u>YES</u> to any close contact/potential exposure question, call the school as soon as possible to let them know the reason your child(ren) won't be there today. Call your healthcare provider right away. If you don't have one or cannot be seen, go to <u>www.mi.gov/coronavirustest</u> or call 2-1-1 to find a location to have your child(ren) tested for COVID-19.

If the answer is <u>YES</u> to any of the symptom questions, but <u>NO</u> to any close contact/potential exposure questions, your student may return based on the guidance for their symptoms (see "<u>Managing Communicable Diseases in Schools</u>"):

- Fever: at least 24 hours have passed with no fever, without the use of fever-reducing medications
- Sore throat: improvement (if strep throat: do not return until at least 2 doses of antibiotic have been taken);
- Cough/Shortness of breath: improvement
- Diarrhea, vomiting, abdominal pain: no diarrhea or vomiting for 24 hours
- Severe headache: improvement

DISCLAIMER: This screening tool is subject to change based on the latest information on COVID-19.

Source: Centers for Disease Control and Prevention; <u>Screening K-12 Students for Symptoms of COVID-19: Limitations and Considerations</u>

CONTACT TRACING

Contact Tracing is a public health tool that is used to help stop the spread of certain communicable diseases. For schools, it involves identifying others that may have had recent close contact with a person confirmed to have the virus and giving that information to the local public health department. The local public health department will provide guidance on how to stay safe, protect others, and quarantining to prevent further spread of the virus.

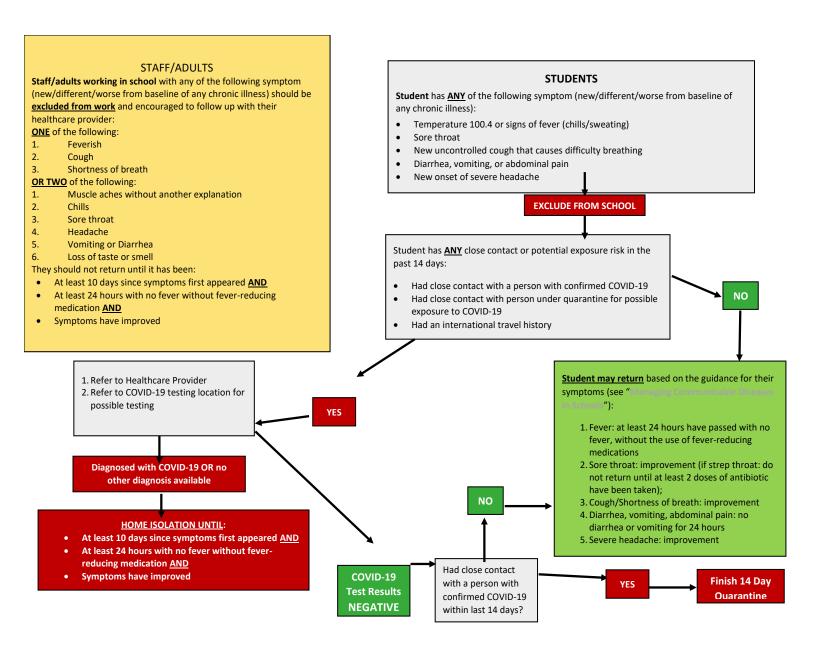
Quarantine separates people who were exposed to a contagious disease to see if they become sick. This is important because people who are infected with COVID-19 are very contagious two days before they have any symptoms of being sick, so unless they are kept separated from other people, they will spread the illness without even knowing it. Since close contacts are not yet known to be infected, the contacts to those contacts do not need to be in quarantine and do not need to be identified or contacted.

This form is to assist the local public health department of identifying close contacts within the school. Please return the information of close contacts to the local health department as soon as possible. This can also be shared with parents to identify close contacts of anyone outside of school that a student has been around.

Staff or student has a positive nasal/throat test.				
For symptoma	atic cases	For asymptomat	ic positive tests	
Date Symptoms	Started://	Test Date: / _	/	
48 hours prior t	o this: / /	48 hours prior to to	est date: / /	
Dates staff or s	tudent attended school starting from 48 I	nours from onset of	symptoms (or test date)	
////	through / /			
	acts* on those dates			
Date	Contact		Phone Number	

^{*} A close contact is someone being within 6 feet (about 2 arms' length) of an infected person for at least 15 minutes. Public health authorities may determine that distances beyond 6 feet can still result in high-risk exposures based on other considerations and circumstances in each particular case.

Health Department Decision Making Flow Chart

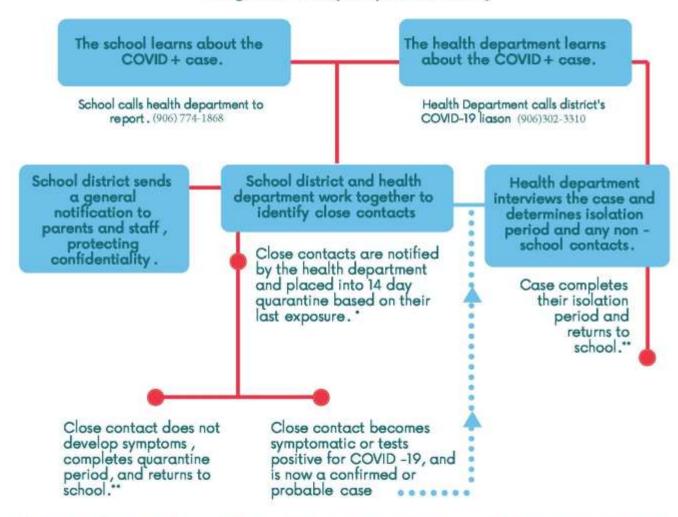




Process for a COVID-19 Case at School

What happens when someone at school gets COVID-19?

Student/Staff is confirmed positive for COVID -19 with diagnostic test (nose/throat swab)



[&]quot;If someone is placed in quarantine, they may decide to get a COVID-19 test, but a negative result will NOT shorten the length of the quarantine period.

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[&]quot;The health department can issue an official letter or other documentation releasing people from isolation or quarantine. Schools may use the this letter to determine when to allow return to school.



Process for COVID-19 Exposure at School

How to handle symptoms and household exposures?

1.

Does student have symptoms of COVID-19?

Yes, symptoms:

Are they at higher risk of getting COVID-19°?

Yes, at higher risk

The student is excluded from school until:

- 24 hours with no fever (without fever-reducing medication) AND
- Symptoms have improved AND
- 10 days since symptoms first appeared.

They have received a negative COVID-19 test AND have met the criteria for return to school in "Managing Communicable Diseases in Schools"

No, not at higher risk:

The student /staff person may return based on the guidance for their predominate symptoms (see "Managing Communicable Diseases in Schools").

2

Are they a close contact of a known COVID + case?

Yes, close contact:

The student /staff person is excluded from school until 14 days past last known exposure to COVID+ person. If one or more negative tests are received, it does not change the length of the quarantine period, and does not allow them to return to school early.

3.

Are they a household member or close contact of a person with symptoms or a pending COVID-19 test?

Yes:

Household members, classmates, and other close contacts of a symptomatic but undiagnosed person, or a quarantined person may continue to attend school and should monitor for symptoms. They do not need to be excluded from school. If symptoms develop, they should call their medical provider to be tested for COVID -19. If the household member or contact tests positive, they should follow step 2, above.

*Students at higher risk of exposure to COVID -19 include those who in the past 14 days, had close contact with a person with confirmed COVID -19, had close contact with person under quarantine for possible exposure to COVID -19, or has a history of travel.

If the answers to the above questions are "no", and the person is not being isolated or quarantined for COVID-19, the staff or student may attend school.

This is a summary document that may not cover all scenarios . If you are concerned about a less common COVID-19 exposure situation at school, please contact your local health department for guidance.

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COVID-19 Privacy and Contacts

What happens when someone at school gets COVID-19?

The school and health department learn about someone with COVID-19 (someone diagnosed with COVID-19 is a "case").

privacy is important. Only a select few at the school will know the identity of the person. They help the health department figure out who were close contacts to the case. The person's identity is kept confidential to respect their privacy as well as following regulations of FERPA (for schools) and HIPAA (for the health department).

2. Close contacts are identified and notified.

What is a close contact? It typically is someone being within 6 feet (about 2 arms' length) of an infected person for at least 15 minutes.



A person with COVID-19 is considered contagious starting 2 days (48 hours) before they started having symptoms. If they never have symptoms, they are considered contagious starting 2 days (48 hours) before their COVID-19 test was performed.

Close contacts are at risk of getting sick, and must be identified and be in quarantine. Quarantine separates people who were exposed to a contagious disease to see if they become sick.



...but what about contacts to close contacts?

Since close contacts are not yet known to be infected, the contacts to those contacts do not need to be in quarantine and do not need to be identified or contacted.

EXAMPLE

Bob sits next to Fred in class. Fred gets sick with COVID-19. Bob needs to be quarantined, even though he is healthy at this time. Bob plays on the football team, and Fred does not. No one on the football team has been near Fred. Therefore, the football team does not need to be quarantined. Hopefully, Bob will not get sick and will be back to school and football in a couple of weeks.



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Cohorts help to limit COVID-19 contacts

Cohorts: Keep close contacts to a minimum

One technique to minimize the number of people that need to be excluded from school is to group children together consistently.



EXAMPLES

Meet the Tadpole Pod!

- This group of second graders has been assigned to a "pod". Their classroom has 4 pods of 5 children each.
- This group of students sits next to each other in the classroom, while still staying as far apart as practicable.
- They eat lunch together, travel the halls together, and go to recess together.



Meet the Wildcat Bubble.

- · This group of ninth graders has been assigned to a "bubble". There are many bubbles of 9th graders at their school.
- This group of students sits next to each other in the classroom, while still staying as far apart as practicable. They stay in the same room for math, English, and history, and their teachers come to them. They eat lunch together.

Cohorting can happen at many levels.







Small groups of 4-8 students -- breaking up a classroom, in space or time





Classroom level - keeping classrooms as contained as possible

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Because cohorts keep the number of different people interacting to a minimum , it's a way to limit the number of close contacts that need to be quarantined if one person develops COVID-19.

How does COVID-19 spread?

DROPLETS



Respiratory droplets are small particles that enter the air when we cough, sneeze, laugh, sing, yell, and talk. Basically, they are little flecks of spit. Droplets tend to settle out of the air after traveling several feet from the person that released them. Droplets can also spread directly by kissing or sharing personal items like drinks, vape pens, silverware, or other things that go from one person's mouth to another.

We can reduce the spread of respiratory droplets to each other by wearing face coverings, avoiding large crowded groups, and staying more than 6 feet apart from each other.



AEROSOLS Aerosols are even smaller particles that are created when we breathe, talk, sing, sneeze, or cough. They are lighter and can stay in the air much longer than respiratory droplets but dry up more quickly.

> We can reduce the spread of aerosols by increasing outdoor air ventilation or filtering air that is being recirculated.

OBJECTS



Objects can spread the COVID-19 virus when respiratory droplets or aerosols settle on them, leaving germs behind or if someone has the coronavirus on their hands from touching their nose or mouth than touches an object. COVID-19 appears to stay on object for one to three days.

We can reduce the spread of COVID-19 by objects by frequent handwashing, not touching our face, frequent cleaning and disinfection, and use of automatic or touchless controls.

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What are the chances of catching COVID-19?

While the definition of a close contact for COVID-19 is being 6 feet away from an infected person for 15 minutes or more, other factors can also come into play.

INTENSITY OF EXPOSURE

The intensity of exposure refers to how much virus you were exposed to.

- Was the sick person really contagious when you were exposed to them?
- Were they coughing and sneezing without a mask on versus having no symptoms with a mask on? Did you kiss them?
- Did you share personal items like a drink or a vape pen?
- Did you sit right next and have a face to face conversation to them or were you 6 feet away with your back to them?

The more virus you are exposed to, the more likely you are to get sick



DURATION OF EXPOSURE



The duration of exposure refers to how long were you exposed. If you were in a classroom with someone contagious for COVID-19 for 6 hours a day while they were contagious for several days, yet your seat was not within 6 feet of them, you may still have had a long enough duration of exposure to that person, particularly to aerosols and objects in that classroom.

PERSONAL HEALTH

Your personal health, like how good your immune system is, also plays a part in whether or not you will get infected, as does whether you were using all the COVID-19 risk reduction methods possible.



AGE



Age also seems to play a part in risks for COVID-19. Children may be at lower risk of catching COVID-19 and children may be a lower risk of spreading COVID-19 to others, both to other children and adults.

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Who might be a close contact?





CLASSMATES

Classmates sitting or often within 6" feet of someone with COVID-19, either in the classroom or on the bus, for 15+ minutes.



LUNCH MATES

Lunch mates of person with COVID-19 if sitting within 6 feet for 15+ minutes. This is a higher risk time as face coverings cannot be worn.



PLAY MATES

Playmates on the playground or in gym within 6" feet of someone with COVID-19 for 15+ minutes.



TEAMMATES

Sports teammates within 6° feet of someone with COVID-19 for 15+ minutes.



OPPOSING TEAMMATES

Opposing teammates in sporting events that shared time on the field or court and were within 6 feet of someone with COVID-19 for 15+ minutes



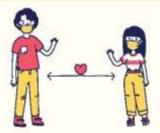
OTHER CLASSMATES

Any others that had interactions with someone with COVID-19 lasting over 15 minutes in confined areas such as bathrooms, office room, where distancing of 6° feet is difficult.



ENTIRE CLASSROOMS

If the contagious individual is a teacher and was frequently less than 6 feet away from students while teaching, the entire class may need to be on quarantine.



Public health authorities may determine that distances beyond 6 feet or less than 15 minutes can still result in highrisk exposures based on other considerations and circumstances in each particular case.



OTHERS

Any other person outside of school that had similar exposure to a contagious individual is considered a close contact.

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Students should not go to school or any school activities or sports if having symptoms of COVID-19. If they start having symptoms of COVID-19 while at school, they will need to be sent home. They may return based on the guidance for their diagnosis (See "Managing Communicable Diseases in Schools") unless they are at risk for COVID-19 exposure.

As long as there are cases of COVID-19 in the community, there will be no way to prevent all risks of COVID-19 spread in schools. The goal is to keep the risk as low as possible and keep school and school activities as safe as possible.



If your child has been placed into isolation or quarantine for COVID-19, not attend school.

SYMPTOMS OF COVID-19 (CDC VERSION FOR K-12)

(If new, different, or worse than any longstanding conditions)

- Temperature 100.4 or signs of fever (chills/sweating)
- Sore throat
- New uncontrolled cough that causes difficulty breathing
- Diarrhea, vomiting, or abdominal pain
- New onset of severe headache



IS YOUR CHILD AT RISK FOR EXPOSURE TO COVID-19?

Students are at higher risk for COVID-19 if in the past 14 days:

- Had close contact with a person with confirmed COVID-19
- Had close contact with person under quarantine for COVID-19
- Have a history of travel



If "YES" to any questions in Section 1, and "NO" to all questions in Section 2, student should stay out of school until they meet criteria for return based on their symptoms



If "YES" to any question in Section 1, and "YES" to any question in Section 2, student should stay out of school, and be evaluated by their healthcare provider and possibly receive COVID-19 testing

If "NO" to all questions in Section 1, and "YES" to any questions in Section 2, students need only be excluded from school if they have had close contact to someone with confirmed COVID-19, as they should be in quarantine.

If you are asked to get a medical evaluation for your child, you may call your health care provider, or to follow up with a local clinic or urgent care center. You can also call 2-1-1 or go to www.mi.gov/coronavirustest to find the closest testing location. While testing is not required, students may need to be excluded from in-person instruction for a longer period of time.

SEE NEXT PAGE

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information, but is subject to change at any time.

HOW LONG MUST THEY STAY OUT OF SCHOOL?

If your child has symptoms of COVID-19, and tests positive for COVID-19

Keep out of school until it has been at least 10 days from the first day they had symptoms, have had 24 hours with no fever and other symptoms have improved. There is no need to get a "negative test" or a doctor's note to clear the child or staff to return to school if they meet these criteria.

If your child has symptoms of COVID -19, has risk for exposure to COVID -19, and no testing has been done (or results are pending)

Keep out of school until it has been at least 10 days from the first day they had symptoms, they have had 24 hours with no fever and other symptoms have improved.

If your child has symptoms of COVID -19, has risk for exposure to COVID -19, and tests negative for COVID-19

Your student may return based on the guidance for their symptoms (see "Managing Communicable Diseases in Schools"):

- Fever: at least 24 hours have passed with no fever, without the use of fever-reducing medications
- Sore throat: improvement in symptom (if strep throat: do not return until at least 2 doses of antibiotic have been taken);
- Cough/Shortness of breath: improvement in symptom
- Diarrhea, vomiting, abdominal pain: no diarrhea or vomiting for 24 hours
- Severe headache: improvement in symptom

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COVID-19 RETURN TO SCHOOL GUIDE

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DISCLAIMER: This information was developed based on the latest guidance at the time. Visit cdc.gov/coronavirus or Michigan.gov/coronavirus for the most up to date information.

Legal disclaimer: The contents of this document are made available to you for informational purposes only and should not be construed as legal, financial or medical advice on any matter. This material may not reflect the most current COVID-19 developments and is subject to revision. In no event will Dickinson-Iron District Health Department be liable for any decisions made or action taken in relation upon the information provided through this document.

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Child or staff that has been exposed to COVID-19 but has no symptoms:

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29

For Staff

International Travel

COVID-19 SCHOOL CHECKLIST

Follow the instructions of the MI SAFE SCHOOLS: Michigan's 2020-2021 Return to School Roadmap for the Phase your region is in.

COVID-19 SCREENING

FOR SCHOOL STAFF AND ADMINISTRATION

Per EO 2020-145: Conduct a daily entry self-screening protocol for all employees or contractors entering the workplace, including, at a minimum, a questionnaire covering symptoms and suspected or confirmed exposure to people with possible COVID19.

A hard copy of an example workplace-screening tool is found in above.

You can also use a virtual screener. One option from the state is https://misymptomapp.state.mi.us/login

FOR STUDENTS

It is recommended that students are screened daily before arrival to school. The school should determine the screening method to use depending upon local school conditions.

Due to the time and interruption to education doing this on site prior to school entry this would cause, the health department and the CDC does not currently recommend universal symptom screenings (screening all students grades K-12) be conducted by schools. Parents or caregivers should be strongly encouraged to monitor their children for signs of infectious illness every day prior to sending students to school.

It is recommended to set up an agreement or form for parents outlining the responsibility of the parent and the responsibility of the school. A recommendation for what parents should ask is outlined below:

STUDENT SCREENING

Before leaving for school, please make sure of the following screening. If your child has any of the following symptoms, that indicates a possible illness that may decrease the student's ability to learn and put them at risk for spreading illness to others.

SECTION ONE: SYMPTOMS
\square Temperature 100.4 degrees Fahrenheit or higher when taken by mouth
☐ Sore throat
□ New uncontrolled cough that causes difficulty breathing (for students with chronic allergic/asthmatic cough, a change in their cough from baseline)
\square Diarrhea, vomiting, or abdominal pain
\square New onset of severe headache, especially with a fever

SECTION TWO: CLOSE CONTACT/POTENTIAL EXPOSURE

In the past 14 days has your child:

 ☐ Had close contact (within 6 feet of an infected person for at least 15 minutes) with a person with confirmed COVID-19: OR
☐ Had close contact (within 6 feet of an infected person for at least 15 minutes) with person under quarantine for possible exposure to COVID-19; OR
\Box Had an international travel history

If the answer is **YES** to any of the questions in Section One, but **NO** to all the questions in Section Two, keep your child(ren) home from school until the following are fulfilled: for fever: at least 24 hours have passed with no fever, without the use of fever-reducing medications; sore throat/ cough: improvement (if strep throat: do not return until at least 2 doses of antibiotic have been taken); diarrhea, vomiting, abdominal pain: no diarrhea or vomiting for 24 hours; severe headache: improvement in headache.

If the answer is <u>YES</u> to any of the questions in Section One AND <u>YES</u> to any of the questions in Section Two Call your healthcare provider right away to get evaluated and tested for COVID-19. If you don't have one or cannot be seen, go to <u>www.mi.gov/coronavirustest</u> or call 2-1-1 to find a location to have your child(ren) tested for COVID-19.

If the answer is **YES** to any of the symptom questions, but **NO** to any close contact/potential exposure questions, your student may return based on the guidance for their symptoms (see "Managing Communicable Diseases in Schools"):

- Fever: at least 24 hours have passed with no fever, without the use of fever-reducing medications
- Sore throat: improvement (if strep throat: do not return until at least 2 doses of antibiotic have been taken);
- Cough/Shortness of breath: improvement
- Diarrhea, vomiting, abdominal pain: no diarrhea or vomiting for 24 hours
- Severe headache: improvement

CLOTH FACE COVERINGS HELP PREVENT THE SPREAD OF COVID-19

According to the Governor's Legal Counsel, face coverings are not required under Executive Order 2020-147 because classrooms are not an enclosed public space. That said, under EO 2020-142 when schools enter phase 4 and under their preparedness plan, they would have to follow rules in 2(b)(1)(a-e).

In phase 5, schools will have to comply with their local plans that have been approved by their Board of Education – we anticipate most districts will indeed have some sort of facial covering requirements.

Phase	Environment	Staff	Early Childhood	Grades EK-4	Grades 5-12
			(Ages 2-5)		
Phases I-4	Classrooms/Groups	Required, except during meals	Should be considered*	Should be encouraged*	Required, except during meals
	Common Spaces	Required, except during meals	Should be considered*	Required, except during meals	Required, except during meals

	Transportation	Required	Required	Required	Required
	Outside with social distancing	Not required	Not Required	Not Required	Not Required
Phase 5	All Environments	Staff/Students 5-12 Required except during meals and other exceptions noted in plan. EK-4 Students recommended.			
*Although cloth coverings are not required in these settings, they should be encouraged if tolerated.					

Note: Plastic face shields are not a replacement for a cloth face covering but may be used in conjunction with a cloth face covering in any of the above settings. In settings in which cloth face coverings are not required, plastic face shields may be worn alone, and may offer some degree of risk mitigation. DIISD allows for face shields in Phase 5.

Chance of Transmission	Asymptomatic COVID-19 Carrier	Uninfected Person
HIGHEST	2	2
HIGH	2	
MEDIUM		2
LOW		
LOWEST	€ 6 ft	

MANAGING COVID-19 IN THE SCHOOL

As long as there are cases of COVID-19 in the community, there will be no way to prevent all risks of COVID-19 spread in schools. The goal is to keep the risk as low as possible and keep schools/school activities as safe as possible. If students did not go to school, they would be at risk of COVID-19 illness from their interactions in the community. Yet going to school is very important to the development and well-being of our children. It gives them proper education, social and emotional skills, safety, reliable nutrition, physical/speech and mental health therapy, and opportunities for physical activity, among other benefits ¹. Our goals are to ensure that the benefits of in-person education far outweighs any risks.

DESIGNATED COVID-19 POINT OF CONTACT

Designate a staff person to be responsible for responding to COVID-19 concerns (e.g., school nurse) as well as a secondary person to help with difficult situations and cover absences. All school staff and families should know who this person is and how to contact them. Until further notice, building principals are the contacts for each building.

GATHERINGS, VISITORS, AND FIELD TRIPS

Pursue virtual group events, gatherings, or meetings, if possible, and promote social distancing of at least 6 feet between
people if events are held. Limit group size to the extent possible.

¹ Source: American Academy of Pediatrics (AAP). June 25, 2020. COVID-19 Planning Considerations: Guidance for School Re-entry https://services.aap.org/en/pages/2019-novel-coronavirus-covid-19-infections/clinical-guidance/covid-19-planning-considerations-return-to-in-person-education-in-schools/

- Limit any nonessential visitors, volunteers, and activities involving external groups or organizations as possible especially with individuals who are not from the local geographic area (e.g., community, town, city, county).
- Pursue virtual activities and events in lieu of field trips, student assemblies, special performances, school-wide parent meetings, and spirit nights, as possible.
- Pursue options to convene sporting events and participation in sports activities in ways that minimizes the risk of transmission of COVID-19 to players, families, coaches, and communities.

IDENTIFYING SMALL GROUPS AND KEEPING THEM TOGETHER (COHORTING)

While keeping students 6 feet from one another is one of the preferred mitigation strategies, it may be difficult to achieve in the school setting. If this is the case, schools can cohort students and staff. Another important tool to help contain the spread of COVID-19 in schools is cohorting students and staff. Cohorts are important because it limits how many students and teachers will be exposed to COVID-19 should someone at school be contagious. Cohorts may be by classroom and/or groups within the classroom.

It is recommended to keep the cohort together as much as possible throughout the whole day. The cohort would eat together in the cafeteria, have recess together on the playground, and so forth. Older students can stay with a cohort through their core classes. Limit mixing between cohorts as much as possible. Ensure that student and staff groupings are as static as possible by having the same group of children stay with the same staff (all day for young children, and as much as possible for older children).

STAGGERED SCHEDULING

- Stagger arrival and drop-off times or locations by cohort or put in place other protocols to limit contact between cohorts
 and direct contact with parents as much as possible.
- When possible, use flexible worksites (e.g., telework) and flexible work hours (e.g., staggered shifts) to help establish policies and practices for social distancing (maintaining distance of approximately 6 feet) between employees and others, especially if social distancing is recommended by state and local health authorities.

WHAT HAPPENS WHEN SOMEONE AT SCHOOL GETS COVID-19?

SCHOOL AND LOCAL HEALTH DEPARTMENT LEARN OF A STUDENT OR STAFF MEMBER DIAGNOSED WITH COVID-19

If you become aware of a case of COVD-19 in a student of staff member, notify the health department right away. The health department will notify your contact person when they become aware of a case. Only a select few at the school will know the identity of the person. Those few individuals are critical to helping the health department figure out who were close contacts to the case and determine what areas of the school need special attention for disinfection and cleaning. Other than those few individuals, the person's identity is kept confidential in respect of their privacy as well as following regulations of FERPA (for schools) and HIPAA (for the health department).

IDENTIFY CLOSE CONTACTS

A person with COVID-19 is considered contagious starting 2 days (48 hours) before they started having symptoms. If they never have symptoms, they are considered contagious starting 2 days (48 hours) before their COVID-19 nasal/throat swab test was performed. Close contacts to a person with contagious COVID-19 are at risk of getting sick. They must be identified and be quarantined.

WHAT IS A CLOSE CONTACT?

For COVID-19, a close contact is most often someone that has been within 6 feet (about 2 arms' length) of an infected person for at least 15 minutes, with or without a face covering. Every case is different, however, and the health department has to look at how COVID-19 is spread and how we get infected when figuring out close contacts. The health department helps determine close contacts every day and routinely investigates contacts to many types of contagious diseases.

EXAMPLES OF CLOSE CONTACTS IN THE SCHOOLS

Many things affect what a close contact is and this needs to be determined on a case by case basis with help from the local health department. However, at a minimum, the following examples should apply to most situations.

Assuming all COVID-19 prevention methods have been followed (everyone has been consistently and properly using face coverings, washing hands frequently, cleaning frequently touched items often, maintaining physical distancing as best as possible, not sharing items, etc.), a close contact might be:

- IF THE CONTAGIOUS INDIVIDUAL WERE A TEACHER: adults tend to be more contagious. If the contagious teacher was not keeping at least 6* feet away from students while teaching (i.e., walking around while lecturing, doing a lot of one on one, face to face instruction), the entire class might need to be on quarantine.
 - o If the teacher is not wearing appropriate face covering, the spread of droplets and aerosol is greater.
- CLASSMATES SITTING OR OFTEN WITHIN 6* FEET of the contagious individual, either in the classroom or on the bus, unless it only occurred one time and was less than 15 minutes.
 - This would typically be the one to two rows of students sitting closest to the contagious individual.
- LUNCHMATES of student if sitting within 6* feet of contagious individual.
 - This is a higher risk time as face coverings cannot be worn.
- PLAYMATES ON THE PLAYGROUND OR IN GYM within 6* feet of the contagious individual unless interactions are consistently kept very brief, no common items are shared, and locker room time is not shared.
- SPORTS TEAMMATES within 6* feet of the contagious individual unless interactions are consistently kept very brief, no common items are shared, and locker room time is not shared.
- OPPOSING TEAMMATES in sporting events that shared time on the field or court with the contagious individual unless
 it can be confirmed that there were no potential interactions within 6* feet between the contagious individual and specific
 teammates from the opposing team and no contact with shared items
- CLASSMATES OR OTHERS THAT HAD INTERACTIONS with the contagious individual lasting over 15 minutes in confined areas such as bathrooms, office room, where distancing of 6* feet is difficult.
- ANY OTHER PERSON OUTSIDE OF SCHOOL that had similar exposure to a contagious individual is considered a
 close contact.

*Public health authorities may determine that distances beyond 6 feet can still result in high-risk exposures based on other considerations and circumstances in each particular case.

It will be very helpful for parents to keep note of where their student is going and who they are spending time with outside of school. This will help greatly in finding close contacts should someone become infected. You may also understand from this list the importance of assigned seating and keeping students from mingling together as much as possible in order to keep the spread of disease to a minimum. We know kids don't like assigned seats or losing freedoms but please help encourage them and remind them why this is important.

LOCAL HEALTH DEPARTMENTS QUARANTINE CLOSE CONTACTS

Quarantine separates people who were exposed to a contagious disease to see if they become sick. This is important because people who are infected with COVID-19 are very contagious two days before they have any symptoms of being sick, so unless they are kept separated from other people, they will spread the illness without even knowing it. Since close contacts are not yet known to be infected, the contacts to those contacts do not need to be in quarantine and do not need to be identified or contacted. The large majority of close contacts do not get COVID-19, but, because it is very contagious, we must be cautious.

EXAMPLE OF A CONTACT OF A CONTACT:

Bob sits next to Fred in class. Fred gets sick with COVID-19. Bob needs to be in quarantine but is healthy at this time. Bob plays on the football team. No one on the football team has been near Fred. Therefore, the football team doesn't need to be notified about Fred being sick or worry about Bob being on quarantine at this time. Odds are, Bob will not get sick and will be back to school and football in a couple of weeks.

CLEANING AND DISINFECTING

Close off areas used by a sick person and do not use these areas until after cleaning and disinfecting

Wait at least 24 hours before cleaning and disinfecting. If 24 hours is not feasible, wait as long as possible. Ensure safe and correct use and storage of cleaning and disinfection, including storing products securely away from children.

Review "Reopening Guidance for Cleaning and Disinfecting Public Spaces, Workplaces, Businesses, Schools, and Homes" developed by the CDC.

COMMUNICATIONS

Ensure the local health department is aware of the case. They may ask you to complete this form to help with contact tracing. The health department will then contact those individuals and tell them to quarantine. Letter and email communication templates have been provided by Dickinson-Iron District Health Department.

EXAMPLES OF SCHOOL SCENARIOS WITH ACTION STEPS

STUDENT/STAFF PERSON IS CONFIRMED OR SYMPTOMATIC^ PENDING RESULTS OR A CLOSE CONTACT.				
Scenario I:	Scenario 2:	Scenario 3:	Scenario 4:	
A student/staff person within the school is confirmed to have COVID-19 (tests positive for COVID-19 with a nasal/throat swab).	A student/staff person within the school is symptomatic and lab result for COVID-19 are pending.	A student/staff person within the school is symptomatic and no testing for COVID-19 are done.	A student/staff person within the school is a close contact to a confirmed COVID- 19 case.	
The student/staff person AND all household members of the student/staff person are immediately excluded from school. The confirmed positive student/staff person must isolate at home. The student/staff person must be excluded from school until 24 hours with no fever (without the use of fever-	FOR ALL STAFF and STUDENTS ONLY IF the test returns positive, see scenario I. The student person is excluded from school until results of the test are available. If test results are negative and the ill student close contact to someone with COVID-19, they must still finish their quarantine. If test results are negative and the ill student had no known exposure to COVID-19, the student/staff person may return based on the	For ALL STAFF and for STUDENTS only IF They Answered YES to any Questions in Section 2# of Screener: The student/staff person is excluded from school until: 24 hours with no fever (without the use of fever-reducing medication) and Symptoms have improved and 10 days since symptoms first appeared. For STUDENTS If They Answered NO	The student/staff person must quarantine for I4 days since last date of close contact. Household members, classmates, and teachers of the quarantined student/staff person may continue to attend school and should monitor for symptoms. They do not need to be excluded from school. If symptoms	
reducing medication) and	guidance for their predominate symptoms (see "Managing	to all of the Questions in Section 2 of the Screener:	develop, they should call their medical	

- Symptoms have improved and
- 10 days since symptoms first appeared.

Household members and the quarantined student/staff person who are close contacts are excluded for 14 days after their last date of close contact.

Communicable Diseases in Schools").

Household members and student/staff person who are close contacts of the *pending* case with no history of COVID-19 exposure (prior to lab results) should be monitored for symptoms while waiting for test results. They do not need to be excluded from school. If symptoms develop, they should call their medical provider to be tested for COVID-19.

The **student** may return based on the guidance for their diagnosis/predominate symptoms (see "Managing Communicable Diseases in Schools").

Household members and student/staff person who are close contacts: if the individual had close contact with a confirmed case of COVID-19 and suspicion for COVID-19 are high, they may need to be excluded from school. Consults with your health department.

Otherwise, household members and student/staff person who are close contacts do not need to be excluded from school. If symptoms develop, they should call their medical provider to be tested for COVID-19.

provider to be tested for COVID-19.

HOUSEHOLD MEMBER OF A STUDENT WITHIN THE SCHOOL IS CONFIRMED OR SYMPTOMATIC PENDING RESULTS OR A CLOSE CONTACT.

Scenario I:	Scenario 2:	Scenario 3:
Household member of a student within the school has been confirmed to have COVID-19.	Household member of a student within the school is symptomatic, pending results, and has had close contact with a known case.	Household member of a student within the school has had close contact to a known case of COVID-19.

[^]Symptoms for students: fever, feeling feverish, cough, difficulty breathing, sore throat, diarrhea, vomiting, abdominal pain, severe headache

[^]Symptoms for staff: New or worsening: fever, feeling feverish, cough, difficulty breathing, sore throat, muscle aches, vomiting, diarrhea, new loss of taste or smell (Source; Should we be screening employees, Content of screening questions)

^{*}Questions in Section 2: Had close contact (within 6 feet of an infected person for at least 15 minutes) with a person with confirmed COVID-19: OR Had close contact (within 6 feet of an infected person for at least 15 minutes) with person under quarantine for possible exposure to COVID-19; OR had recent international travel history in last 14 days.

^{*}Close contact with a confirmed COVID-19 case is defined as being within 6 feet of a person who has tested positive for at least 15 minutes with or without a mask. Public health authorities may determine that distances beyond 6 feet can still result in high-risk exposures based on other considerations and circumstances in each particular case.

Students who live in the same house as the COVID-19 positive person are excluded from school while the household member is in isolation (10 days). The student must quarantine for 14 days after the last date of close contact while they are contagious.

Students who live in the same household of the family member are excluded from school until test results are in.

If the household member is positive, see scenario 1. If the household member is negative, student may be able to return to school unless household member is determined to be a probable case of COVID-19.

Student can remain in school but should be monitored. They do not need to be excluded from school.

If COVID -19 symptoms develop in the household member, students should be excluded from school, and should be treated as in Scenario I pending results.

*Close contact with a confirmed COVID-19 case is defined as being within 6 feet of a person who has tested positive for at least 15 minutes with or without a mask. Public health authorities may determine that distances beyond 6 feet can still result in high-risk exposures based on other considerations and circumstances in each particular case.

HOW DOES COVID-19 SPREAD?

COVID-19 can spread by droplets (most likely), aerosols (less likely), and objects (least likely).

RESPIRATORY DROPLETS

Respiratory droplets are small particles that enter the air when we cough, sneeze, laugh, yell, and talk. They are little flecks of spit. Respiratory droplets tend to settle out of the air after traveling several feet from the person that released them. Respiratory droplets can also spread directly by kissing or sharing personal items like drinks, vape pens, silverware, or other things that go from one person's mouth to another. We can reduce the spread of droplets to each other by wearing face coverings, avoiding large crowded groups, and staying more than 6 feet apart from each other.

AEROSOLS

Aerosols are even smaller particles that are created when we breathe, talk, sing, sneeze, or cough. They are lighter and can stay in the air much longer than respiratory droplets but dry up more quickly. We can reduce the spread of aerosols by increasing outdoor air ventilation or filtering air that is being recirculated.

OBJECTS

Objects can spread the COVID-19 virus when respiratory droplets or aerosols settle on them, leaving germs behind or if someone has the COVID-19 virus on their hands from touching their nose or mouth than touches an object. COVID-19 appears to stay on object for up to one to three days. We can reduce the spread of COVID-19 through objects by frequent handwashing, not touching our face, frequent cleaning and disinfection, and use of automatic or touchless controls.

HOW DO WE GET INFECTED WITH COVID-19?

You can catch COVID-19 by more ways than being less than 6 feet away from an infected person for 15 minutes. Important things that have to be considered when deciding whether someone could be at risk for getting COVID-19 are the intensity, frequency, and duration of exposure to someone contagious with COVID-19. Basically, did you get exposed to enough virus that your immune system couldn't fight it off and you end up getting sick?

INTENSITY OF EXPOSURE

The intensity of exposure refers to how much virus you were exposed to. Was the sick person actually contagious when you were exposed to them? Were they coughing and sneezing without a mask on versus having no symptoms with a mask on? Did you kiss them? Did you share personal items like a drink or a vape pen? Did you sit right next to and have a face-to-face conversation with them or were you 6 feet away with your back to them? You can see how some situations can

cause you to be exposed to a lot more virus than other situations. The more virus you are exposed to, the more likely you are to get sick.

FREQUENCY OF EXPOSURE

The frequency of exposure refers to how often you had contact with someone who was contagious. If you had a brief face-to-face conversation with a teacher each day for several days while the teacher was contagious with COVID-19, those exposures may add up to be enough to overwhelm your system and lead to an infection.

DURATION OF EXPOSURE

The duration of exposure refers to how long were you exposed. If you were in a classroom with someone contagious for COVID-19 for 6 hours a day while they were contagious for several days, yet your seat was not within 6 feet of them, you may still have had a long enough duration of exposure to that person, particularly to aerosols and objects in that classroom.

PERSONAL HEALTH

Your personal health, like how good your immune system is, also plays a part in whether or not you will get infected, as does whether you were using all the COVID-19 risk reduction methods possible.

WHEN A STUDENT SHOULD STAY HOME AND WILL BE SENT HOME

Students should not go to school or any school activities or sports if having symptoms of COVID-19. If they start having symptoms of COVID-19 while at school, they will need to be sent home. The complete list symptoms are listed on the CDC website at https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html. The CDC recommends a shorter list be used for screening students to unnecessary exclusions of students who do not have COVID-19. Screening students for illness and return to school decisions should include:

- 1. Symptom Screen: Students with any of the following symptoms should be excluded from school:
 - Temperature 100.4 degrees Fahrenheit or higher when taken by mouth
 - Sore throat
 - New uncontrolled cough that causes difficulty breathing (for students with chronic allergic/asthmatic cough, a change in their cough from baseline)
 - Diarrhea, vomiting, or abdominal pain
 - New onset of severe headache, especially with a fever
- 2. Evaluation for COVID-19 Exposure Risks: To determine needed follow up and return to school for students with any of the above symptoms, determine if they have any of the following risks for COVID-19 in the prior 14 days:
 - Had close contact with a person with confirmed COVID-19
 - Had close contact with person under quarantine for possible exposure to COVID-19
 - Had an international travel history

If the student has one of the symptoms above and ANY of the exposure risks, the parent or guardian of the student will be instructed to call their health care provider, or if they do not have a health care provider, to follow up with a local clinic or urgent care center. The parent or guardian can also call 2-1-1 or go to www.mi.gov/coronavirustest to find the closest location to have the student tested for COVID-19

FOR STUDENTS THAT HAVE SYMPTOMS OF COVID-19 AND HAVE ANY OF THE HIGH-RISK EXPOSURES:

IF THE FINDINGS FROM THE HEALTH CARE PROVIDER AND TESTING FIND:

Child has symptoms of COVID-19 and tests positive for COVID-19 with a nasal/throat swab*:

- Keep out of school until it has been at least 10 days from the first day they had symptoms AND they have had 24 hours with no fever and have improving symptoms
- There is no need to get a "negative test" or a doctor's note to clear the child or staff to return to school if they meet these criteria
 - *if they have symptoms, they must stay out of school until test results are available

CHILD HAS SYMPTOMS OF COVID-19 AND NO TESTING FOR COVID-19 WAS DONE:

Keep out of school until it has been at least 10 days from the first day they had symptoms AND they have had 24 hours
with no fever and have improving symptoms.

CHILD HAS SYMPTOMS OF COVID-19 AND TESTS NEGATIVE FOR COVID-19*:

- If they were exposed to COVID-19 within past 14 days (i.e., a close contact to a case of COVID): They must complete their full 14-day quarantine.
- Otherwise, they may return based on the guidance for their symptoms (see "Managing Communicable Diseases in Schools")
 *if they have symptoms, they must stay out of school until test results are available

FOR STUDENTS THAT HAVE SYMPTOMS OF COVID-19 AND HAVE NONE OF THE HIGH RISK EXPOSURES:

Keep out of school until they have met the guidance for their symptoms (see "Managing Communicable Diseases in Schools")

FOR STAFF

Symptoms recommended for employee screening per the MI Symptom Screener include any of the following that are new/different/worse from baseline of any chronic illness:

One of:

- Feverish
- Cough
- Shortness of breath

OR Two of:

- Muscle aches without another explanation
- Chills
- Sore throat
- Headache
- Vomiting or Diarrhea
- Loss of taste or smell

Any adult working in the schools with any of these symptoms should be **excluded from work** and encouraged to follow up with their healthcare provider. They should not return until it has been:

- At least 10 days since symptoms first appeared and
- At least 24 hours with no fever without fever-reducing medication and
- Symptoms have improved

(Employers should not require sick employees to provide a COVID-19 test result or healthcare provider's note to validate their illness, qualify for sick leave, or return to work.)

CHILD OR STAFF THAT HAS BEEN EXPOSED TO COVID-19 BUT HAS NO SYMPTOMS:

Must be in quarantine (exclude from school) for 14 days from the last day they were exposure

See "Back to School during a Pandemic" for an infographic on the information found in this section.

INTERNATIONAL TRAVEL

Since the COVID-19 transmission is still high at a global level, all international travelers should stay home for 14 days after returning from travel, monitor their health, and practice social distancing. Students who are excluded from school should be afforded the opportunity, as soon as feasible when they are well enough to participate in classwork, to make up any missed classwork without penalty in order to reduce mental or physical anxieties about missed academic opportunities.

Frequently Asked Questions for School Administrators and Teachers

1. What is the difference between isolation and quarantine?

<u>Isolation</u> is for people who are COVID positive. It separates people who are infected with the virus from people who are not infected. It usually lasts 10 days.

Quarantine is for people who are well but are exposed to someone who is COVID positive. It keeps someone who might have be infected with the virus away from others. It lasts 14 days since the last possible exposure.

2. How long must a teacher or staff person be out of school if they test positive for COVID-19?

A teacher or staff person that tests positive for COVID-19 should isolate at home. The teacher or staff person may return to school after 24 hours fever free without the use of fever-reducing medications **and** symptoms have improved **and** 10 days have passed since symptoms first appeared. https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/end-home- isolation.html

3. How long must a student, teacher or staff person be out of school if they have a family member in the same house as them that tests positive for COVID-19?

A student, teacher or staff person that lives in the same house as someone who tests positive for COVID-19 must remain out of school the entire time the family member is in isolation (typically 10 days) plus 14 additional days of quarantine. The total time out of school would be at least 24 days.

https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine.html

4. If a person tests positive but does not have symptoms, can they work from home?

Yes, if the school has a system in place for working from home this is encouraged. An employee with mild symptoms should be able to work from home as well. For DIISD staff please work with your department director for your work assignment.

5. If a teacher or staff member has a household member that tests positive but does not have symptoms, can the teacher or staff member come to work anyway and monitor for symptoms?

No, asymptomatic people who test positive can still spread the virus. A teacher or staff member that has a household member that tests positive and is considered a close contact must quarantine during the household member's isolation period and 14 days after the isolation period ends.

6. Must we close a classroom if a person with COVID-19 attended class in that classroom? If so, for how long?

Yes, the classroom should be closed, cleaned and disinfected. It is recommended to close off the area for at least 24 hours. If that is not feasible, wait as long as possible and then clean and disinfect the classroom following CDC guidance. https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html.

7. If a teacher or staff person was in a classroom full of children, and that teacher later finds out that they have COVID-19 while they were in the classroom, must all the class be quarantined, or only those children who were within 6 feet of the teacher for 15 minutes or more?

The entire class must be quarantined and monitor for COVID-19-related symptoms, unless students and staff who were in close contact can be easily identified. Close contact is defined as being within six feet or less of the COVID-19 case for fifteen minutes or more.

8. If the teacher was wearing a cloth mask in the classroom, and that teacher later finds out that they have COVID-19 while they were in the classroom, do the children still have to be quarantined?

Yes, the children who were in the classroom are still considered close contacts and must quarantine for 14 days and monitor for symptoms. All students may not have to quarantine if only those who were six feet or less from the teacher for fifteen minutes or more are easily identified.

9. Does a sibling of a child in quarantine have to be quarantined?

No, if the sibling was not a direct contact of a person who tested positive for COVID-19, then they should monitor for symptoms and can continue attending school.

10. If a student has an illness that is not COVID-19, like a cold, does that child still have to be out of school until they are 24 hours fever free?

If the student is experiencing any COVID-19-related symptoms, they might have COVID-19 and they should not attend school. They should contact their regular medical provider and get tested for COVID-19.

If they test negative for COVID-19, then they can return after 24 hours fever free. https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html

II. Does the school have to inform the school community when a child is excluded from school because of COVID-19, or does the health department do that?

The school is responsible for communication to the community; however, the health department can provide guidance as needed. This communication may be restricted to those affected.

12. How many children have to be sick with COVID-19 before a school closes?

The health department will work closely with School Administration recognizing there are many factors to be considered when closing a school.

13. Does a teacher, staff person, or student have to retest for COVID-19 after testing positive before they are allowed back to school?

No, the teacher, staff person or student who tested positive can return to school after 24 hours with no fever without the use of fever-reducing medications **and** symptoms have improved **and** 10 days have passed since symptoms first appeared.

The health department does not recommend a retest. Sometimes a person will continue to test positive even though they are no longer infectious.

14. How can we know when a person is no longer infectious?

The general timeline is 10 days since symptoms first appeared.

15. If a student changes classes and is with many different students during the day rather than just one classroom of students, and that student tests positive, do *all* those students have to quarantine?

Yes, this is one reason it is wise to keep students in small cohorts.

16. Should all students get tested for COVID-19 prior to startingschool?

No, the COVID-19 test only indicates the presence of the virus the moment the test is taken.

17. If a student teacher or staff are told they are a close contact of a positive case and they get a COVID-19 test that is negative are they released from quarantine?

No, a person can become COVID-19 positive any time during quarantine (the 14 days after the exposure).

18. Should students get an anti-body test to prove that they have already had COVID-19 and thus do not need to quarantine if they are exposed again?

No, students who have already tested positive for COVID-19 will need to quarantine again if they are exposed more than three months after their positive test. We are still learning about the virus and there is a possibility of reinfection. https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine.html

19. If a student or teacher already had a proven case of COVID-19 and then has an exposure in school, do they have to quarantine anyway?

Yes, students or teachers with proven cases of COVID-19 will still need to quarantine if the exposure occurs more than three months since the date of their positive test. We are still learning about the virus and there is a possibility of reinfection.

20. Does the school have to tell families which child tested positive for COVID-19? Isn't that a violation of HIPAA?

The identity of the child or teacher should be protected as much as possible. Close contacts will be contacted and only given information related to their exposure. The name of the COVID-19 student or teacher will be shared on a need to know basis only.

21. Will children who are at the highest risk for complications, such as children with severe respiratory problems, be required to stay out of the school classroom until this pandemic is over?

The decision to send a child to school or not will be made jointly by the parent and school with guidance from the child's medical provider.

22. What if a staff member/student goes out of state?

There are no current restrictions for staff members or students who travel out of state. However, everyone should assume COVID-19 exposure and monitor for symptoms.

Definitions of Frequently Used Terms

Coronavirus: Coronavirus Disease (COVID-19) is an illness caused by a virus that can spread from person to person. The virus that causes COVID-19 is a new coronavirus that has spread throughout the world.

Contact Tracing: A strategy for slowing the spread of disease in which public health workers communicate with infectious people to identify their contacts. They then follow up with those contacts to provide guidance on how to quarantine themselves and what to do if they develop symptoms of disease.

Quarantine: The practice of keeping someone who might have been exposed to COVID-19 away from others. Quarantine helps prevent spread of disease that can occur before a person knows they are sick or if they are infected with the virus without feeling symptoms. People in quarantine must stay home (usually 14 days), separate themselves from others, monitor their health, and follow directions from their state or local health department.

Isolation: The practice of separating people infected with the virus (those who are sick with COVID-19 and those with no symptoms) from people who are not infected.

People who are in isolation (usually for 10 days) must stay home until it's safe for them to be around others. In the home, anyone sick or infected must separate themselves from others by staying in a specific "sick room" or area and using a separate bathroom (if available).

Close Contact: A person who was within 6 feet of a person infected with COVID-19 for more than 15 minutes with or without a mask.

Examples of close contacts include individuals who were close to a person who is infected with COVID-19 by providing care to them at home, sharing a living space, having direct physical contact with them (touched, hugged or kissed them), and sharing eating or drinking utensils. People may also be close contacts if they were somehow exposed to droplets from an infected person (sneezed or coughed on).









that look clean can still have icky germs!



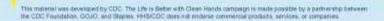
@ Get Soap

Wash Your Hands!









6 Dry



U.S. Department of Health and Human Services Centers for Disease

Stop the spread of germs that can make you and others sick!



Wash your hands often



Wear a cloth face cover



Cover your coughs and sneezes



Keep **6 feet** of space between you and your friends



cdc.gov/coronavirus

Stop the Spread of Germs

Help prevent the spread of respiratory diseases like COVID-19.

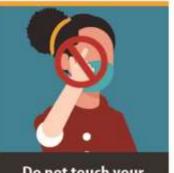


from other people.





When in public, wear a cloth face covering over your nose and mouth.



Do not touch your eyes, nose, and mouth.



Clean and disinfect frequently touched objects and surfaces.



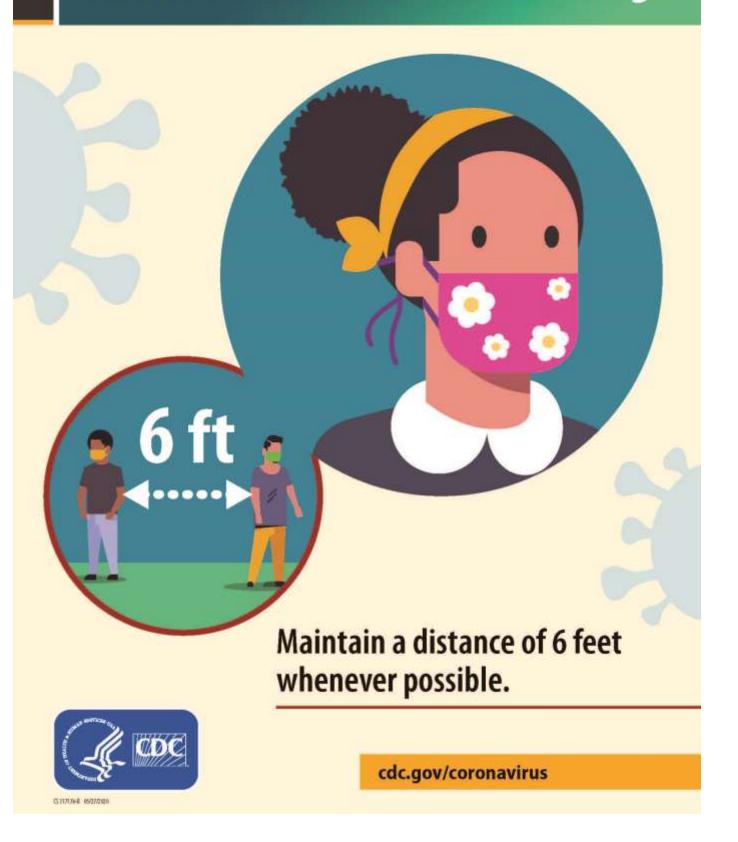




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SWITCHISTS, DOZ 1133 AM

Please wear a cloth face covering.



Wear a Cloth Face Covering to Protect You and Your Friends

PUT ON

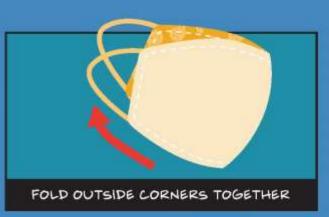






TAKE OFF









Wash your hands often, wear a mask, and stay 6 feet from others.

cdc.gov/coronavirus

Symptoms of Coronavirus (COVID-19)

Know the symptoms of COVID-19, which can include the following:















Symptoms can range from mild to severe illness, and appear 2-14 days after you are exposed to the virus that causes COVID-19.

*Seek medical care immediately if someone has emergency warning signs of COVID-19.

- Trouble breathing
- Persistent pain or pressure in the chest
- New confusion

- Inability to wake or stay awake
- Bluish lips or face

This list is not all possible symptoms. Please call your medical provider for any other symptoms that are severe or concerning to you.



cdc.gov/coronavirus

STOCKWISSESSIA



Slow the Spread of COVID-19



Do it for Yourself and Your Friends



What Your Test Results Mean

