MAISA | MICHIGAN ASSOCIATION OF INTERMEDIATE SCHOOL ADMINISTRATORS
SUPPORTING REGIONAL EDUCATION SERVICE AGENCIES

COVID-19 Preparedness and Response Plan

(Executive Order 2020-142 District Preparedness Plan Template)

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Name of District: Shiawassee RESD

Address of District: 1025 N. Shiawassee St., Corunna ,MI 48817

District Code Number: 78000

Web Address of the District: SRESD.org

Name of Intermediate School District: SRESD

Name of Authorizing Body (if applicable):

MASA | Michigan Association of Superintendents & Administrators

MICHIGAN Department of Education

MEMSPA Michigan Elementary and Middle School Principals Association

Michigan School Business Officials

MASB Michigan Association of School Boards

massp Michigan Association of Secondary School Principals

Middle Cities Education Association

Preparedness Plan Introduction

Governor Whitmer's Executive Order 2020-142 "provides a structure to support all schools in Michigan as they plan for a return of pre-K-12 education in the fall. Under the order, school districts must adopt a COVID-19 Preparedness and Response Plan laying out how they will cope with the disease across the various phases of the Michigan Safe Start Plan. In turn, the accompanying Michigan Return to School Roadmap offers a guide to the types of safety protocols appropriate during each phase. There's no one-size-fits-all solution: What works in Lansing may not work in Sault Sainte Marie. Districts will retain the flexibility to tailor their instruction to their particular needs and to the disease conditions present in their regions." (EO-2020-142)

Each district (public, public school academy (PSA), nonpublic, and intermediate school district (ISD) that educates pre-K-12 students) shall submit a single completed Assurance Document and Preparedness Plan to its Board in time for approval by August 15 or seven days before the first day of school, whichever comes first. This template, when completed, serves as a single Assurance Document and Preparedness Plan.

The Preparedness Plan will be collected by the Intermediate School District for public school districts, the authorizing body for public school academies, or the chief/designated school administrator for nonpublic schools for transmission to the State Superintendent of Public Instruction and State Treasurer by August 17, 2020. Additionally, this Preparedness Plan must be posted on the district's/PSA's, or nonpublic school's public website home page no later than August 17, 2020. A single application should be filed by the district rather than multiple applications for individual schools within a district.

Preparedness Plan Assurances

The District agrees to meet all of the following requirements of Executive Order 2020-142

- ✓ The District assures that when it provides in-person instruction to its students without disabilities, the district must also provide in-person instruction to its students with disabilities, consistent with their individualized education programs (IEPs).
- ✓ The District assures that when schools are closed to in-person instruction, districts must strive in good faith and to the extent practicable, based upon available resources, technology, training, and curriculum, as well as the circumstances presented by COVID-19, to provide equal access to any alternative modes of instruction to students with disabilities from birth through age 26. This assurance includes the provision of auxiliary services under section 1296 of the Revised School Code, MCL 380.1296.
- ✓ The District assures that while any state of emergency or disaster related to the COVID-19 pandemic continues, it shall comply with guidance from the United States Department of Education, including its Office of Civil Rights and Office of Special Education and Rehabilitative Services, and the Michigan Department of Education concerning the delivery of alternative modes of instruction to students with disabilities in light of the impact of COVID-19.
- ✓ The District assures that it shall, to the extent practicable and necessary, make individualized determinations whether and to what extent compensatory services may be needed for students with disabilities in light of the school closures during the 2019–2020 school year.
- ✓ The District assures that during **Phase 1, 2, or 3** of the *Michigan Safe Start Plan* it will close its buildings to anyone except: (a) District employees or contractors necessary to conduct minimum basic school operations consistent with a Preparedness Plan, including those employers or contractors necessary to facilitate alternative modes of instruction, such as distributing materials and equipment or performing other necessary in-person functions. (b) Food-service workers preparing food for distribution to students or their families. (c) Licensed child-care providers and the families that they serve, if providers follow all emergency protocols identified by the state.
- ✓ The District assures that during **Phase 1, 2, or 3** of the *Michigan Safe Start Plan* it will suspend athletics, after-school activities, inter-school activities, and busing.
- ✓ The District assures that during **Phase 1, 2, or 3** of the *Michigan Safe Start Plan* it will provide for the continued pay of school employees while redeploying staff to provide meaningful work in the context of the Preparedness Plan, subject to any applicable requirements of a collective bargaining agreement.
- ✓ The District assures that in **Phases 1, 2, or 3** of the *Michigan Safe Start Plan* it will provide for the continuation of food distribution to eligible students.
- ✓ The District assures that during **Phase 4** of the *Michigan Safe Start Plan* it will prohibit indoor assemblies that bring together students from more than one classroom.
- ✓ The District assures cooperation with the local public health department if a confirmed case of COVID-19 is identified, and agrees to collect the contact information for any close contacts of the affected individual from two days before he or she showed symptoms to the time when he or she was last present in school.

Preparedness Plan

Every district must develop and adopt a COVID-19 Preparedness and Response Plan ("Preparedness Plan") that is informed by Michigan's 2020-21 Return to School Roadmap ("Return to School Roadmap") from the COVID-19 Task Force on Education and Return to School Advisory Council.

In accordance with Executive Order 2020-142 a plan must include all the following parts:

A. The policies and procedures that the District will follow when the region in which the district is located is in **Phase 1, 2, or 3** of the *Michigan Safe Start Plan.*

1. Describe how the district will offer alternative modes of instruction other than in-person instruction and a summary of materials each student and the student's parents or guardians will need to meaningfully access the alternative modes of instruction included in the Preparedness Plan. If the Preparedness Plan relies on electronic instruction, the Preparedness Plan must consider how the district will aid students who lack access to computers or to the internet. This is also in the Continuity of Learning and COVID-19 Response Plan submitted in April. You may want to update and link to this plan in your response below.

- The district plans to use a hybrid model of instruction using online learning platforms as the primary mode of instruction. For those students that do not have a device or online learning platforms is not appropriate for, the district will provide instructional materials through a weekly instructional packet. Instructional packets for the MoCI and SCI programs will primarily focus on the student's IEP goals and objectives. All students will have access to grade-level/course textbooks/resources as needed to complete their work. Students will not be penalized for inability to fully participate provided families stay engaged with school personnel in developing personalized and realistic education plans for their students. The district will do everything it can to meet student/family needs and allow for full participation.
- Teachers/staff will be expected to make weekly contact with students and have two-way communication. This may be done through the use of technology (i.e. virtual meeting, email, Remind, etc.) or through weekly phone calls. For students with technology access teachers will also communicate multiple times each week through the instructional platform, with an emphasis on continuing to build relationships and connections to families.
- For students with technology access, content will be delivered through the online platform. Staff will be accessible for instruction at least once per week. Staff will also be providing instruction through pre-made videos/lessons multiple times per week. For those students without technology, the main mode of delivery will be through hard copy instructional packets. This will be supplemented with phone conferencing to support instruction. The packets will be mailed or delivered to the families.
- Staff will differentiate instruction to meet individual student needs.
- The plan will be posted on our district website. If a request is made for a hard copy of the plan, one will be made available.
- Staff will monitor student wellness, engagement, and completion of assignments. They will also keep a log of communication with students and families.
- The administration will hold bi-weekly virtual meetings with teachers and other key staff members to identify any additional students or families in need.

Early On (including 32P Home Visiting Programming)	The SRESD is committed to Early On families during this time when face to face home visiting services are

	suspended by continuing to build relationships through connections with children and families, providing virtual support to the family through coaching in everyday activities that support their child's development and providing parents with resources to ensure that their basic needs are met. All families who wish to participate will be supported in the best way possible. Staff will work with each family to determine the family's preferred way to move through the eligibility/evaluation process and receive early intervention services (i.e. videoconferencing, instructional/coaching phone calls, texts, email, or US Mail, etc) until face to face home visiting can safely occur. Initial and Annual IFSP meetings, Periodic Reviews, Transition Plan and Transition Conferences will be completed as long as the parent is willing to participate in these meetings remotely. Meetings and visits with families will occur in their preferred method of communication (i.e. videoconferencing, phone call, email, text, mail, etc). Play to Learn Playgroup opportunities for families will not be held.
Great Start Collaborative/Great Start Parent Coalition (32P)	Shiawassee Great Start Collaborative work will continue virtually via Zoom meetings, email, and phone calls as needed to complete activities outlined in the FY20 32p work plan. Great Start Parent Coalition meetings are being held via Zoom monthly. The GSPC shares information regarding Kindergarten registration, early childhood resources, parent supports, COVID-19, community hotline, etc. to families using various contact types: email, phone calls, group text, Facebook, website posts, flyers.

Great Start Readiness Program - Community Based Partners • Elite Early Learning Center • Bright Beginnings Learning Center #3 • My Great Beginnings Child Development Center • Noah's Ark Children's Center • Capital Area Community Services	During such time as face-to-face instruction cannot be held in classrooms, GSRP Partners will continue to provide learning opportunities and do so in a way that is accessible and most meaningful to families. Providers will utilize a variety of platforms and methods to connect with students and families. Engagement with families will first focus on the development of relationships and an understanding of student and family needs and priorities. Platforms such as Remind.com, Class DoJo, Facebook, Google Classroom, See Saw, email, text, phone calls, video calls and/or the provision of materials/paper packets, will be used to connect with families and provide remote learning opportunities for students.
CTE/Dual Enrollment/Early College Programs	Devices will be offered to all program students. The parking lot at the North Street RESD, ESC RESD office and Byron High School (Electrical program site) will be open for Wi-Fi access for students each day. All students will be provided with textbooks/resources as needed to complete their work. Instructors are expected to have regular contact during the week with students. This is accomplished electronically, via video conferencing, email correspondence, other messaging services, and/or telephone. Content will be delivered through the online platform designated by each instructor (e.g. Canvas for Baker College programs). Teachers will use the instructional platform and video instructional formats to monitor student wellness, engagement, and completion of assignments. Inconsistent completion or communication with a student will result in direct contact by the instructor to the student. If the academic concern continues or there is a student wellbeing concern, the instructor will notify the CTE Director and/or CTE Coordinator who will make contact with either the student/family or the local district high

	school counselor to identify additional supports that may be needed by the student/family.

B. The policies and procedures that the District will follow when the region in which the District is located is in **Phase 4** of the Michigan Safe Start Plan. Those policies and procedures must, at a minimum, include:

1. **Face coverings** (p. 22)
   a. Please describe how the district will implement **requirements** for facial coverings that at a minimum require the wearing of face coverings, except during meals and unless face coverings cannot be medically tolerated, for:
      i) All staff and all students in grades preK-12 when on a school bus.
      ii) All staff and all students in grades preK-12 when in indoor hallways and common areas.
      iii) All staff when in classrooms.
      iv) All students in grades 6 and up when in classrooms.
      v) All students in grades kindergarten through grade 5 unless students remain with their classes throughout the school day and do not come into close contact with students in another class.

- Face coverings must always be worn by staff (those able to tolerate medically) except for meals. Face coverings may be cloth or disposable. If coverings are cloth, they must be washed daily. Disposable coverings must be thrown away at the end of each day.
- All students (that are able to medically tolerate a face covering) will wear one during school transportation, in hallways and common areas (except for meal time).
- Face coverings will be required for all students (those able to tolerate medically) grades 6 and above.
- The expectations for the wearing of face coverings and how to obtain clean face coverings will be included in all district communications, student orientations, and all staff training.
- Signage will be prominent throughout all school buildings, grounds, and facilities. Signage will clearly identify who is required to wear face coverings in each designated area of the building, grounds, or transportation.
- Face coverings will be ordered and available to every student and staff member on a daily basis. Face coverings will be placed on busses and in classrooms.
- Clear face masks will be provided to all MoCI and SCI classroom staff and preK-5 EI staff with the requirement to wear during instruction.
- PreK-5 students will not be required to wear a face covering once they are situated in the classroom unless the classroom activity places them in close proximity (less than 6ft for more than 15 minutes) to other students.
- Students who are capable of wearing a face covering and refuse to do so in an area where a face covering is required will be issued a face covering by a school staff member and asked to put the face covering on.
- Guests to the school building (presenters, substitute teachers, etc.) will be issued a disposable face covering upon signing in at the main office and will be instructed to wear face coverings at all times.
- In instances of uncertainty about individuals not wearing face coverings, these matters will be relayed to the building administration for review and decisive action.

Early On (including 32P Home Visiting Programming)	Home visits with families will continue remotely to the greatest extent possible. When a face to face home visit is needed to meet a family need

	an outdoor home visit may be considered with strict adherence to maintaining 6 feet of social distancing. Although the home visit will be held outdoors, Early On staff who are medically able to wear a mask/face covering (cloth or disposable) will be required to do so. Clear face masks have been ordered for Early On Staff. Family members participating in the home visit will be strongly encouraged to wear a face mask/face covering (if medically able) during the entirety of the visit. Children under the age of two should not wear any masks or face coverings. Early On Staff will have additional masks to provide to the family participating in the outdoor home visit if needed. Play to Learn Playgroup opportunities for families will not be held.
Great Start Collaborative/Great Start Parent Coalition (32P)	Shiawassee Great Start Collaborative work will continue virtually via Zoom meetings, email, and phone calls as needed to complete activities outlined in the FY20 32p work plan. This includes all GSC workgroups, parent engagement activities such as parent cafes, virtual Touch a Truck scavenger hunt, parent training and parent coalition meetings. In the event that an in person meeting/activity does occur face masks will be required (for those that can medically tolerate) and provided. Children under the age of two should not wear any mask or face coverings. Meetings/events will be held outside if possible and will follow social distancing guidance. The GSC and GSPC will connect with families using various contact types: email, phone calls, group text, Facebook, website posts, flyers.
Great Start Readiness Programs – Community Based Partners • Elite Early Learning Center • Bright Beginnings Learning Center #3	In adherence with both LARA guidance and the Return to Learn Roadmap: • Face coverings must always be worn by staff (those able to tolerate medically) except for

• My Great Beginnings Child Development Center • Noah's Ark Children's Center • Capital Area Community Services	meals. Face coverings may be cloth or disposable. If coverings are cloth, they must be washed daily. Disposable coverings must be thrown away at the end of each day. • All students (that are able to medically tolerate a face covering) will wear one during school transportation, in hallways and common areas (except for meal time). • PreK students will not be required to wear a face covering once they are situated in the classroom • Guests to a GSRP classroom (consultants, substitute teachers, etc.) will be issued a disposable face covering (if they do not already have one) upon entry to the building and will be instructed to wear face coverings at all times. • Signage will be prominent throughout GSRP facilities. Signage will clearly identify who is required to wear face coverings in each designated area of the building, grounds, or transportation, if applicable. • Face coverings will be ordered and available to every student and staff member on a daily basis. Face coverings will be placed on busses and in classrooms. • Clear face masks will be encouraged but not required for all GSRP staff members.
CTE/Dual Enrollment/Early College Programs	• Face coverings must always be worn by staff (those able to tolerate medically) except for meals. Face coverings may be cloth or disposable. If coverings are cloth, they must be washed daily. Disposable coverings must be thrown away at the end of each day. • All students (that are able to

	medically tolerate a face covering) will wear a face covering while inside the instructional facility. • Students who are capable of wearing a face covering but refuse to do so will not be admitted to the program that day. The high school counselor and parents will be notified of the student's choice. The high school will direct the student where to report during SRESD Program class time.

2. **Hygiene**
   Please describe how you will implement the **requirements** for hygiene protocols from the *Return to School Roadmap* (p. 22-23*).*

- Every classroom will be supplied with a fixed hand sanitizer dispenser or portable hand sanitizer.
- Supplies (paper towels, soap, hand sanitizer, tissues, trash receptacles) will be checked daily and restocked in the classroom.
- Staff members will contact the office immediately if supplies run out during the school day.
- Each classroom will have a hygiene protocol with timelines that are posted and communicated to families through various communication methods. It will include:
  - Hand-washing schedule
  - Room and materials cleaning schedule
- School staff (teachers, instructional aides and/or school nurse) will teach and reinforce the following to students:
  - Proper handwashing techniques
  - How to cough and sneeze in their elbows, or to cover with a tissue and dispose of in the trash
- Proper mitigation strategies including hand washing and sneezing will be communicated to families via newsletters, web pages, bulletin boards, etc. Parents/guardians will be asked to review and reinforce with their students.
- Custodial staff will:
  - Procure adequate soap, hand sanitizer, paper towels, and tissues.
  - Post signage related to cleaning and hygiene strategies in each room, restroom, throughout the hallways before the start of school.
  - Monitor hygiene supplies and refill as needed three times daily.
  - Procure hand sanitizing stations deemed necessary with administration.
- Sharing school supplies will be limited.

Early On (including 32P Home Visiting Programming)	Home visits with families will continue remotely to the greatest extent possible. When a face to face home visit is needed to meet a family need an outdoor home visit will be considered with strict adherence to maintaining 6 feet of social distancing. Availability of supplies to promote

	healthy hygiene behaviors will be available to staff (hand sanitizer, disinfecting wipes, etc) when working in the field. Supplies to promote healthy hygiene behaviors will also be available at the Early Childhood Learning Center (hand sanitizer, disinfecting wipes, etc.) In addition, the following updates have been made at our ECLC for additional safety measures: • face coverings/masks are required (if medically able) for all staff and visitors and this is posted at all entrances • portable hand sanitizer stations (with refillable hand sanitizer) have been ordered for high traffic areas • touchless faucets and paper towel dispensers have been ordered and will be installed in all restrooms • social distancing markers have been placed on the floor throughout the facility • disinfecting wipes have been placed in common areas • proper handwashing technique poster have been posted in each restroom • meeting room capacity has been adjusted and posted in each space to allow for proper social distancing measures. • Custodial staff will procure adequate soap, hand sanitizer, paper towels, and tissues; post signage related to cleaning and hygiene strategies in each restroom; monitor hygiene supplies and refill as needed. Play to Learn Playgroup opportunities for families will not be held.
Great Start Collaborative/Great Start Parent Coalition (32P)	Shiawassee Great Start Collaborative work will continue virtually via Zoom meetings, email, and phone calls as

	needed to complete activities outlined in the FY20 32p work plan. This includes all GSC workgroups, parent engagement activities and parent coalition meetings. In the event that face to face meetings/events must occur masks/face coverings will be required and provided for those that can medically tolerate. Meetings would be held at the Early Childhood Learning Center with the safety measures described above. Events held in other locations will have supplies to promote good hygiene including hand sanitizer, masks, disinfecting wipes and participants will wear masks and follow social distancing guidelines.

Great Start Readiness Programs – Community Based Partners
 	
• Elite Early Learning Center
• Bright Beginnings Learning Center #3
• My Great Beginnings Child Development Center
• Noah's Ark Children's Center
• Capital Area Community Services
	In adherence with both LARA and the Return to Learn Roadmap, all GSRP classrooms will:
	
	• Have hand-hygiene stations set up at the building's entry for use by all who enter
	• Maintain an ample supply of hand sanitizer, paper towels, tissues, soap for use by students and staff.
	• Teach and reinforce the following to students:
	  ○ Proper handwashing techniques
	  ○ How to cough and sneeze in their elbows, or to cover with a tissue and dispose of in the trash
	• Limit the sharing of school supplies to the extent possible
	• Use proper cleaning protocols for sanitizing shared materials after student use
	• Remove from classrooms materials that cannot be adequately or efficiently cleaned between use (i.e.

	sand table, water table, stuffed or cloth toys).

CTE/Dual Enrollment/Early College Programs	• Each classroom will maintain an ample supply of hand sanitizer and tissues.
	• Instructors will contact the CTE Coordinator when additional supplies are needed.
	• Each classroom will have a trash receptacle.
	• Paper towels and soap for use by students and staff will be available in nearby restrooms.
	• Instructors will reinforce the following to students:
	  ○ Proper handwashing techniques
	  ○ How to cough and sneeze in their elbows, or to cover with a tissue and dispose of in the trash
	• Instructors will limit the sharing of school supplies to the extent possible
	• Staff will use proper cleaning protocols for sanitizing shared materials after student use

3. **Cleaning**
   Please describe how you will implement the cleaning **requirements** for cleaning protocols from the *Return to School Roadmap* (p. 27).

- District administrators and building/grounds staff will meet to review all guidance related to cleaning and disinfecting of buildings and to review the MI Safe Schools: Michigan's 2020-2021 Return to School Roadmap.
- An inventory related to all cleaning supplies that are in compliance with the EPA approved related to COVID will be taken and orders will be made to address increased cleaning protocols.
- All classrooms will be provided spray bottles with EPA-approved disinfectant or diluted bleach solution, paper towels, face shields and gloves in order to address new cleaning protocols.
- Staff must wear gloves, a mask and face shield when cleaning.
- Staff will walk the building wiping all frequency usage areas throughout the day and following any evening activities in the building.
- Frequently touched surfaces including light switches, doors, benches, bathrooms will be cleaned every 4 hours with either EPA-approved disinfectant or diluted bleach solution.
- Student desks will be wiped down everytime students exit the room at the elementary level or after every period at the secondary level with EPA-approved disinfectant.

- Playground equipment will be cleaned daily.
- Training on cleaning materials and protocols will be provided to the staff.
- Computer labs and other shared classrooms will be cleaned after each use with an EPA-approved disinfectant.
- Cleaning and disinfectant products will be stored securely away from children, and with adequate ventilation when staff use products.

Early On (including 32P Home Visiting Programming)	Per district plan above.
Great Start Collaborative/Great Start Parent Coalition (32P)	Per district plan above.
Great Start Readiness Programs – Community Based Partners • Elite Early Learning Center • Bright Beginnings Learning Center #3 • My Great Beginnings Child Development Center • Noah's Ark Children's Center • Capital Area Community Services	In adherence with both LARA and the Return to Learn Roadmap, all GSRP classrooms will: • Use spray bottles with EPA-approved disinfectant or diluted bleach solution, paper towels, face shields and gloves in order to address new cleaning protocols. • Wear gloves, a mask and face shield when cleaning. • Use CDC guidelines for deep cleaning common areas daily (for example, sinks, bathrooms, doorknobs, tabletops, and shared toys)
CTE/Dual Enrollment/Early College Programs	• Mott and LCC classes are online. • Baker College staff will clean the classroom after each class. • Electrical classroom desks and frequently touched surfaces will be cleaned by staff after each electrical class.

4. **Athletics**
   Please describe how you will implement the **requirements** for athletics protocols from the *Return to School Roadmap* (p. 27).

N/A District does not offer athletics.

5. **Screening**
   Please describe how you will implement the **requirements** for screening protocols from the *Return to School Roadmap* (p. 24).

- A copy of our screening and exposure plan will be submitted to the County Health Department and will be located in each school building.
- Each school building will identify a secluded room, to serve as an isolation area. This room will be outfitted with appropriate PPE.
- We have identified our School Nurse who is a trained staff person to serve as the "quarantine officer".
- The quarantine officer's duties will take precedence over any other responsibilities.
- While the identified student is waiting to be picked up by family or emergency contact, the student will remain with the nurse. A data log will be kept while the student is in quarantine.
- Parent/ guardian communication will be made immediately by office staff. Office staff will provide the family or emergency contact with directions on where and how to pick up the student and where the closest testing site is located.
- Before a student can return to school they will be expected to provide results of the Covid 19 test. If the test was positive, they will need to have completed 14 days of quarantine.
- During quarantine, staff will collaborate with the health department for contact tracing. Priority will be placed on those individuals that they were in contact with the infected student for a sustained 15 or more minutes.
- All school staff will be required to conduct a health safety self-assessment at home prior to coming to work and verifying through a daily form that they are safe to attend work.
- The daily self assessment forms will be monitored on a daily basis.

Early On (including 32P Home Visiting Programming)	Home visits with families will continue remotely to the greatest extent possible. When a face to face home visit is needed to meet a family need an outdoor home visit will be considered with strict adherence to maintaining 6 feet of social distancing. Screening procedures will be in place for staff as well as families if a face to face visit is to occur. On the day of the visit (One hour prior to the visit): Staff must complete the SRESD Employee Health Screening Checklist AND COVID-19 Family Health Screening Tool and turn in to the Director of Early Childhood. If the parent is unable to be reached to complete the health screening questions, the home visit will be rescheduled or conducted virtually. If the parent answers yes to any questions the home visit will be canceled and rescheduled at least 14 days after the current scheduled appointment or conducted virtually. If they answer no to all questions the Early On home visitor will meet the family at the designated location. • SRESD Employee Health Screening Checklist

	• Family Health Screening Tool Play to Learn Playgroup opportunities for families will not be held.
Great Start Collaborative/Great Start Parent Coalition (32P)	Shiawassee Great Start Collaborative work will continue virtually via Zoom meetings, email, and phone calls as needed to complete activities outlined in the FY20 32p workplan. This includes all GSC workgroups, parent engagement activities and parent coalition meetings. In the event that face to face meetings/events must take place the above health screening tools will be used for participants and health department guidelines will be followed.
Great Start Readiness Programs – Community Based Partners • Elite Early Learning Center • Bright Beginnings Learning Center #3 • My Great Beginnings Child Development Center • Noah's Ark Children's Center • Capital Area Community Services	In adherence to both LARA guidance and the Return to Learn Roadmap, GSRP classrooms will: • Take temperature checks of all students prior to entering the classroom. • Follow LARA guidance requiring that all children with a temperature reading 100.4 or higher be sent home. • Designate an isolation area in which potentially ill students can safely wait for pick up by a parent or emergency contact. • Ask, and educate parents, about screening for symptoms at home prior to each school day. • Ensure that all staff conduct a health safety self-assessment prior to coming to work and verify through a daily form that they are safe to attend work. • Any staff person with a temperature of 100.4 degrees or higher will be immediately sent home • Notify the local Health Department of any confirmed cases of staff, students or family members • Defer decisions regarding closure of classrooms or facilities to the Shiawassee County Health Department. • A center staff person will be identified as the primary contact for handling

	questions regarding COVID-19 policies and reporting to the Health Department.
CTE/Dual Enrollment/Early College Programs	• Mott and LCC courses are online. • Baker College protocol will be followed for all students attending classes on the Owosso campus, including Health Science. • Electrical students will follow the Shiawassee County Health Department regarding all protocols for screening of staff and students. • Students exhibiting COVID-19 like symptoms will be directed to a supervised seclusion area while the high school and parents are contacted by the CTE Coordinator and/or CTE Director to come get their child.

6. **Testing**
   Please describe how you will implement the **requirements** for testing protocols from the *Return to School Roadmap* (p. 25).

The SRESD center based programs will:

- Ensure that if a staff member or student exhibits multiple symptoms of COVID-19, there is a suspected exposure, or an individual tests positive for COVID-19, the individual must stay home until:
  - Has been fever-free for at least 72 hours without the use of medicine that reduces fevers AND
  - Other symptoms have improved AND
  - At least 10 days have passed since COVID-19 symptoms first appeared.
- Notify families of the presence of any laboratory positive or clinically diagnosed cases of COVID-19 in the classroom and/or school, maintaining staff and student confidentiality.
- The SRESD will cooperate with the Shiawassee Health Department if a confirmed case of COVID-19 is identified. Contact information will be collected by the SRESD for any close contacts of the individual from two days before he/she showed symptoms to the time he/she left school. This information will be provided to the Health Department.

Early On (including 32P Home Visiting Programming)	SRESD home visiting programs will follow Shiawassee County Health Department Guidance with regard to testing protocols and staff return to work.

	• SRESD Employee Health Screening Checklist
Great Start Collaborative/Great Start Parent Coalition (32P)	The Great Start Collaborative and Parent Coalition will follow Shiawassee County Health Department Guidance with regard to testing protocols and staff return to work. • SRESD Employee Health Screening Checklist
Great Start Readiness Programs – Community Based Partners • Elite Early Learning Center • Bright Beginnings Learning Center #3 • My Great Beginnings Child Development Center • Noah's Ark Children's Center • Capital Area Community Services	In adherence with LARA guidelines and the Return to Learn Roadmap, GSRP classrooms will: • Ensure that if a staff member or child exhibits multiple symptoms of COVID-19, there is a suspected exposure, or an individual tests positive for COVID-19, the individual must stay home until: ○ Has been fever-free for at least 72 hours without the use of medicine that reduces fevers AND ○ Other symptoms have improved AND ○ At least 10 days have passed since your symptoms first appeared. • Notify families of the presence of any laboratory positive or clinically diagnosed cases of COVID-19 in the classroom and/or school, maintaining staff and student confidentiality.
CTE/Dual Enrollment/Early College Programs	• Ensure that if a staff member or student exhibits multiple symptoms of COVID-19, there is a suspected exposure, or an individual tests positive for COVID-19, the individual must stay home until: ○ Has been fever-free for at least 72 hours

	without the use of medicine that reduces fevers AND ○ Other symptoms have improved AND ○ At least 10 days have passed since COVID-19 symptoms first appeared. • Notify families of the presence of any laboratory positive or clinically diagnosed cases of COVID-19 in the classroom and/or school, maintaining staff and student confidentiality. • The SRESD will cooperate with the Shiawassee Health Department if a confirmed case of COVID-19 is identified. Contact information will be collected by the SRESD for any close contacts of the individual from two days before he/she showed symptoms to the time he/she left school. This information will be provided to the Health Department.

7. Busing and Student Transportation

Please describe how you will implement the **requirements** for busing and student transportation protocols from the *Return to School Roadmap* (p. 28).

Bussing staff will be trained on the following protocols:

- Transportation supervisor will communicate with drivers and bus aides all protocols regarding Covid 19.
- Transportation supervisor will provide all busses will necessary PPE
- Hand sanitizer will be available on all busses and riders will be expected to use it.
- Students who are unable to physically apply the hand sanitizer will be assisted by the driver.
- All students and staff will be expected to wear a mask while on the bus.
- Masks will be made available to students who do not have one from home.
- Students who are medically unable to remove a mask or students who have a medical contraindication will not be expected to wear a mask.
- Signage will be added to each bus to address the use of face masking of all students and drivers, use of hand sanitizers and cleaning protocols.
- The bus drivers will clean the bus every 3 days using an electrostatic spray solution consisting of: Sodium dichloro-s-triazinetrione.
- In between the electrostatic spray cleaning, the bus will be sprayed between each route using a MBS Disinfectant (Dioctyl Dimethyl Ammonium solution, including windows hardware, door handles, safety belts and seats.
- Bus personnel will maintain cleaning logs, these logs will be monitored by the transportation

supervisor.
- Weather permitting doors and windows will be opened to air out the bus.
- Weather permitting the bus will drive with windows open.
- If a student is unable to ride the bus home due to illness, school officials will contact the students family and arrange for the student to be picked up from school. School staff will sit with the student until a family member is able to pick him or her up.
- If a bus driver becomes sick during the school day they will follow the same protocol as other school employees who become sick during the school day.

Early On (including 32P Home Visiting Programming)	N/A
Great Start Collaborative/Great Start Parent Coalition (32P)	N/A
Great Start Readiness Programs – Community Based Partners • Capital Area Community Services	In adherence to both LARA guidance and the Return to Learn Roadmap, GSRP Partners who provide transportation will ensure that: • All students, staff and bus drivers (who are medically able) be expected to wear face covering while on the bus • Masks will be made available for all students and staff that do not have one • Hand sanitizer be available on all busses and riders will be expected and supported in using it • Frequently touched surfaces on buses will be disinfected prior to morning and afternoon routes. • Spacing on buses to address social distancing will be used to the extent possible. .
CTE/Dual Enrollment/Early College Programs	N/A

C. Describe the policies and procedures that the district will follow when the region in which the district is located is in Phase 5 of the Michigan Safe Start Plan.

In order to follow the MI Safe School plan and maintain the safety of students and staff, the SRESD will follow the same protocols in Phase 4 and Phase 5.

Early On (including 32P Home Visiting Programming)	Home visiting will continue remotely to the greatest extent possible. In Phase 5, an additional option of a face to face visit at our Early Childhood Learning Center will be available to meet the needs of families. To the greatest degree possible, providers will maintain 6 feet of social distancing. Early On Home Visitors will utilize coaching and modeling strategies to support parent child interaction during the visit. Due to the visit occurring indoors, all home visit participants (who are medically able) will be required to wear a mask/face covering (except small children under the age of 2) throughout the entirety of the visit. If a close interaction will occur longer than 10 minutes, the Early On provider must also wear a face shield in addition to the mask/face covering, wear gloves, and sanitize hands prior to/after interaction. All items used during the visit will be wiped down with sanitizing wipes immediately after the visit. When the visit is completed, required hygiene essentials will be readily available: handwashing capability, availability of hand sanitizer, etc. Signage to be placed after conclusion of visit "do not enter" until sanitization can be completed. Availability of supplies to promote healthy hygiene behaviors will be available to staff (hand sanitizer, disinfecting wipes, gloves, face shields, etc) as needed. Staff Home Visit Documentation will include date, time, and all who participated in the home visit for contact tracing purposes. Play to Learn Playgroup opportunities for families will not be held. Same required and highly recommended procedures as in phase 4 will be implemented.
Great Start Collaborative/Great Start Parent Coalition (32P)	Shiawassee Great Start Collaborative work will continue virtually via Zoom meetings, email, and phone calls as

	needed to complete activities outlined in the FY20 32p work plan. This includes all GSC workgroups, parent engagement activities and parent coalition meetings. In phase 5 there is a possibility of some face to face meetings/events. All health department guidelines and social distancing will be followed. Masks will be provided and worn indoors and the room capacity for meetings has been reduced to accommodate social distancing. Supplies to promote good hygiene will be utilized.
Great Start Readiness Programs – Community Based Partners • Elite Early Learning Center • Bright Beginnings Learning Center #3 • My Great Beginnings Child Development Center • Noah's Ark Children's Center • Capital Area Community Services	GSRP Community Based Partner classrooms will follow those policies and procedures that are *strongly recommended* to be implemented in the Michigan Safe Start Plan for Phase 5 along with current LARA guidance.
CTE/Dual Enrollment/Early College Programs	In collaboration with our Post-Secondary partners, the SRESD CTE/Dual Enrollment/Early College Programs will follow those policies and procedures in which a District is required to implement on the Michigan Safe Start Plan for Phase 5.

1. Indicate which highly recommended protocols from the *Return to School Roadmap* the district will include in its Preparedness Plan when the region in which the district is located is in **Phase 5** of the *Michigan Safe Start Plan.*

The SRESD will follow all highly recommended protocols from the Return to School Roadmap at Phase 5.

2. Indicate which highly recommended protocols from the *Return to School Roadmap* the district will not include in its Preparedness Plan when the region in which the district is located is in **Phase 5** of the *Michigan Safe Start Plan.*

The SRESD will follow all highly recommended protocols from the Return to School Roadmap at Phase 5.

D. After considering all the protocols that are highly recommended in the *Return to School Roadmap*, please indicate if a school plans to exclude protocols that are highly recommended for any of the categories above in **Phase 4.**

The SRESD will follow all highly recommended protocols from the Return to School Roadmap at Phase 4. For CTE/Dual Enrollment/Early College Programs, students will be spaced as far apart as feasible in classrooms.

Final Steps for Submission

Each district shall submit a single completed Assurance Document and Preparedness Plan to its Board of Education (in the case of a PSA, the Academy Board of Directors; in the case of a nonpublic school, the chief or designated school administrator) in time for approval by August 15 or seven days before the first day of school, whichever comes first.

Date of Approval by the District Board of Education, PSA Board of Directors, or nonpublic school chief/designated school administrator:

Link to the Board Meeting Minutes or Signature of Board President, or signature of nonpublic school chief/designated school administrator:

Link to the approved Plan posted on the District/PSA/nonpublic school website:

The Preparedness Plan will be collected by the Intermediate School District for public school districts, the authorizing body for public school academies, or the chief/designated school administrator for nonpublic schools for transmission to the State Superintendent of Public Instruction and State Treasurer by August 17, 2020. Additionally, this Preparedness Plan must be posted on the district's/PSA's, or nonpublic school's public website home page no later than August 17, 2020.

Name of District/PSA/Nonpublic Leader Submitting Plan: David Schulte

Date Received by the ISD/Authorizing Body/Chief or designated School Administrator: 8/4/2020

Date Submitted to State Superintendent and State Treasurer: 8/17/2020

Update/View Participant Activities

Participant Name	Customer ID	Program	Registration Date	Status	Performance Inclusion		Participation Date
MORR, CALEB M.	MORCA0820	In-School Youth	10/30/2019	Active	Participant (Yes)		10/30/2019
Manual Exit Date	**Exit Reason**	**Last Staff-Assisted Activity End Date**		**# Open Activities**	**Anticipated Exit**	**Co-Enrolled?**	**Common Measures**
-	-	07/10/2020		0	10/09/2020	-	Performance Summary

Showing 1 to 4 of 4 entries **Search:**

Activity	Staff Assisted?	Start Date	End Date	Service Location
Tutoring, Study Skills Training, Dropout Prevention	Yes	10/30/2019	05/31/2020	Shiawassee R E S D
Supportive Services	Yes	10/30/2019	07/10/2020	Shiawassee R E S D
Paid and Unpaid Work Experience	Yes	10/30/2019	03/13/2020	Shiawassee R E S D
Eligibility Determination	No	10/30/2019	10/30/2019	Shiawassee R E S D

ISS For: MORR, CALEB M.
13550 UPTON RD
BATH, MI 48808

Employment Goal			
Program(s) Identified:	In-School Youth		
Long Term Goal:	Caleb is interested in education and would like to gain some work experience.		
Action Plan:	Provide Caleb with a paid work experience, so he may gain work skills and relevant experience.		
Action Plan			
#1. Barrier/Skill:	Relevant Experience (Lack of)		
Action to be Taken:	To provide a paid work experience		
Service:	Paid and Unpaid Work Experience	**Date Established:**	10/30/2019
Estimated Start Date:		**Estimated End Date:**	
Action End Date:	07/10/2020	**Funding Source(s):**	In-School Youth
Successful Outcome:	Yes	**Program:**	In-School Youth
Outcome:			
Signatures			
Participant Signature: _____		**Date:** _____	
Parent/Guardian Signature: _____		**Date:** _____	
Staff Signature: _____		**Date:** _____	

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SCHOOL TEACHERS AND ADMINISTRATORS COVID-19 TOOLKIT

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 Shiawassee County Health Department be liable for any decisions made or action taken in relation upon the information provided through this document.

July 30, 2020

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School Teachers and Administrators COVID-19 Toolkit

- **Definitions**
- **COVID-19 Checklist**
- **COVID-19 Screening**
- **Managing COVID-19 in the School**
- **How Does COVID-19 Spread?**
- **International Travel**
- **How Do We Get Infected With COVID-19?**
- **Cloth Face Coverings Help Prevent the Spread of COVID-19**
- **Contact Tracing in the School Setting**
- **What happens when someone at school gets COVID-19?**
- **Recommended Scripts for Communication**
- **School Scenarios with Actions Steps**
- **Isolation/Quarantine Timeline**
- **Frequently Asked Questions**
- **Health Screening Acknowledgement Form**
- **Contact Tracing Form**
- **Health Screening Form**

Definitions

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 the 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).

Types of Masks:

- **Cloth Face Coverings:** Cloth face coverings are masks made from material that are meant to cover your nose and mouth and to be secured under the chin and are not considered personal protective equipment (PPE). These are effective in reducing the spread of the virus.

https://www.cdc.gov/coronavirus/2019ncov/prevent-getting-sick/cloth-face-cover-guidance.html

- **Surgical Masks:** Surgical masks were originally intended to be worn by health professionals and are considered personal protective equipment. These are effective in reducing the spread of the virus.
- **N95 or N95 respirator:** A N95 mask, also known as a respirator, filters particles that meet a certain standard for air filtration, meaning that it filters at least 95% of airborne particles. These are recommended only for use by healthcare personnel who need protection from both airborne and fluid hazards (e.g., splashes, sprays).

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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.

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

For Students

It is recommended you screen students daily before arrival to school. The school should determine the screening method to use depending upon local schools 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 ***(COVID-19 Health Screening Agreement)*** 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

- ☐ 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

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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

☐ Had a 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 **YES** to any of the questions in Section One AND **YES** 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 www.mi.gov/coronavirustest 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

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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.

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.
- 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 strategy, 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.

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[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/

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.

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 ***Contact Tracing: Identifying Close Adult and Student Contacts*** to help with contact tracing. The health department will then contact those individuals and tell them to quarantine.

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.

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.

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.

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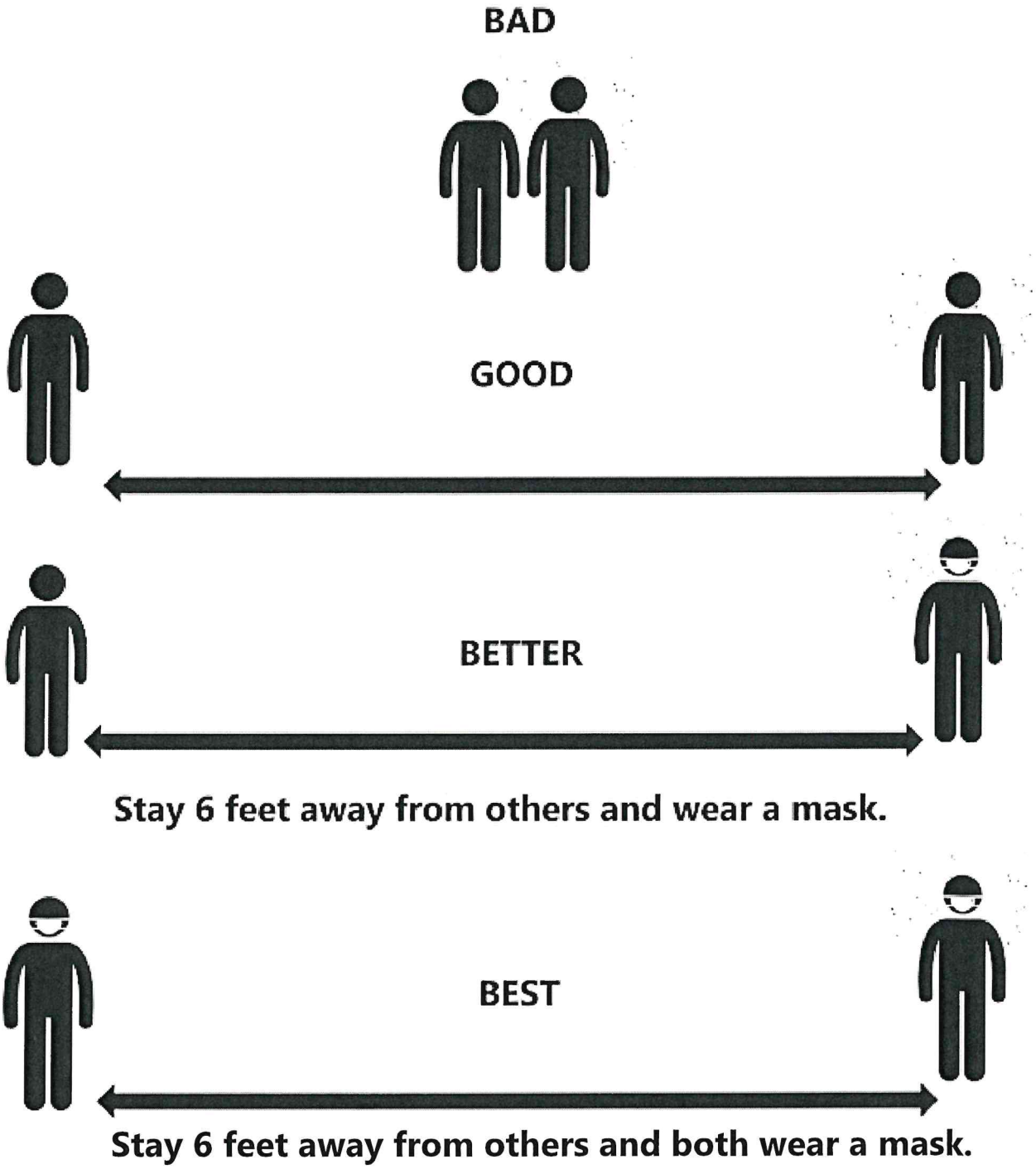
Cloth Face Coverings Help Prevent the Spread of COVID-19



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Contact Tracing in the School Setting

Contact tracing is a public health tool that is used to help stop the spread of certain communicable diseases. It involves identifying others that may have had recent close contact with a person confirmed to have the virus and giving those close contacts guidance on how to stay safe and protect others. This includes close contacts quarantining to prevent further spread of the virus. Quarantine is important with COVID-19 as a person can spread the virus before they know they are sick or if they are infected with the virus without feeling symptoms.

Symptomatic Case	**Asymptomatic Case**
Staff/Student tests positive **after having symptoms.** Symptoms include: • Cough • Shortness of breath • Fever (Temp >100.4°F) • Chills • Repeated shaking with chills • Muscle pain • Headache • Sore throat • New loss of taste or smell	Staff/Student tests positive **and has NOT had symptoms.** Symptoms include: • Cough • Shortness of breath • Fever (Temp >100.4°F) • Chills • Repeated shaking with chills • Muscle pain • Headache • Sore throat • New loss of taste or smell
Date symptoms started:___/___/_____ 48 hours prior to this:___/___/_____	Test Date:___/___/_____ 48 hours prior to test date:___/___/_____
Dates Staff/Student attended school starting from 48 hours prior to onset of symptoms: ___/___/_____/___/_____ ___/___/_____/___/_____ ___/___/_____/___/_____ **If the staff/student did not attend school during/after the 2-day window, the need to contact trace is up to school discretion.*	**Dates Staff/Student attended school starting from 48 hours prior to onset of symptoms:** ___/___/_____/___/_____ ___/___/_____/___/_____ ___/___/_____/___/_____ **If the staff/student did not attend school during/after the 2-day window, the need to contact trace is up to school discretion.*
Close contacts on those dates: **Close contacts are those who were in proximity to the infected person for >15 minutes and within 6 ft with or without a mask.*	**Close contacts on those dates:** **Close contacts are those who were in proximity to the infected person for >15 minutes and within 6 ft with or without a mask.*

Those who are identified as close contacts must quarantine (not leave the house unless necessary) for 14 days from last time of known exposure.

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CDC Contact Tracing in the School Setting

Helpful questions to consider when identifying close contacts in the school setting:

- Who is the staff/student near (less than 6ft) throughout the day?
- Has there been adequate physical distancing in breakrooms & lunchrooms?
- Are there any others at the school that live with the staff/student, or carpool with them?

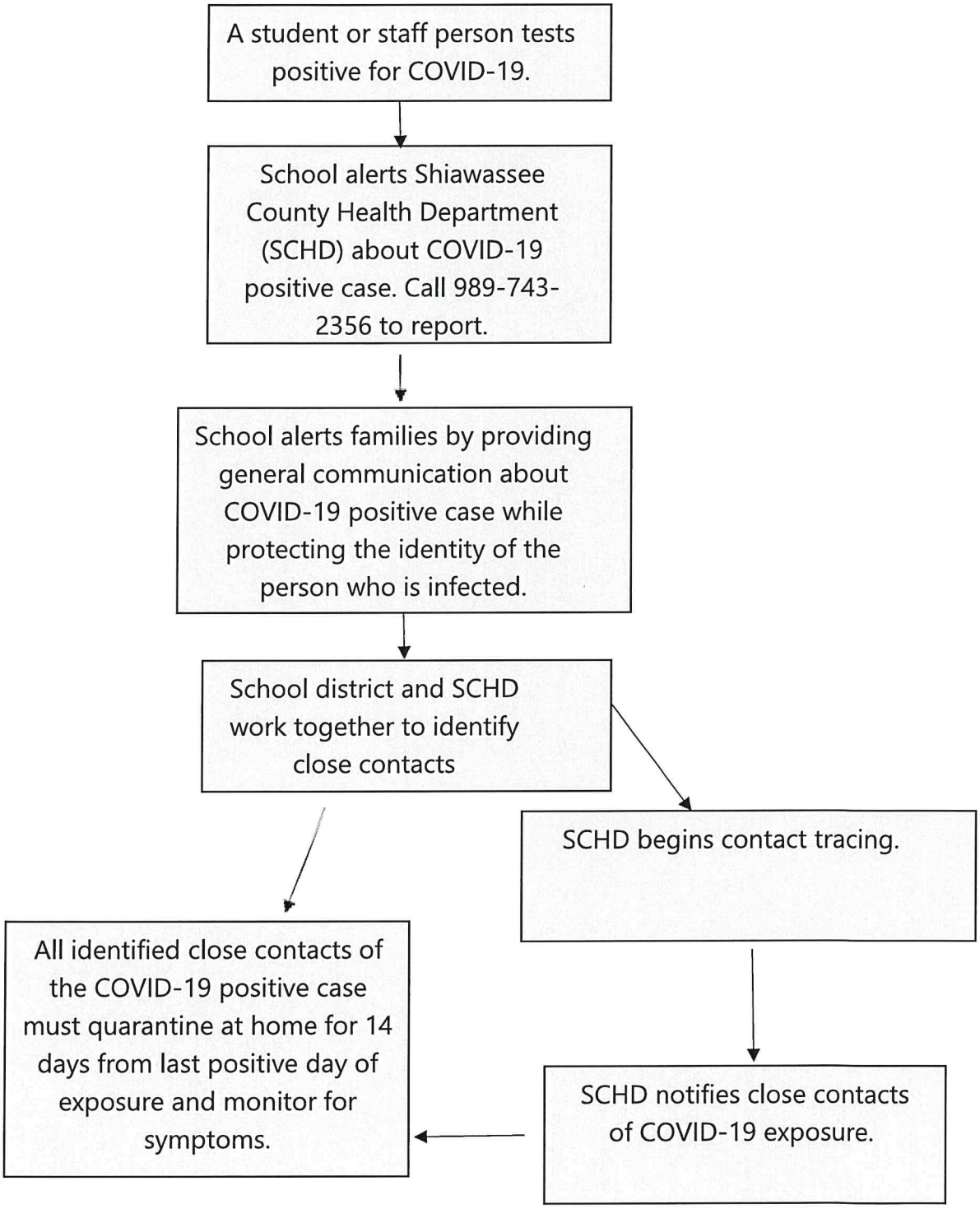
Other considerations for schools when there is more than one positive case identified (to look for patterns/areas of concern):

- Did the school already know staff/student had been identified as a close/household contact of someone who was positive for COVID-19?
- Is there one location/classroom in the school that seems to be more affected?
- Is there something else in common with positive cases?
- Mask adherence in the school? (not just while in the hallway, but during classroom time?)

Contact Tracing Resources:

- **Contact Tracing:** https://www.cdc.gov/coronavirus/2019-ncov/php/openamerica/contact-tracing-resources.html
- **Contact Tracer's Guide to COVID-19:** https://www.cdc.gov/coronavirus/2019ncov/php/notification-of-exposure.html
- **Key Information to Collect During a Case Interview:** https://www.cdc.gov/coronavirus/2019-ncov/php/contact-tracing/keyinfo.html
- **Quarantine Log**: https://www.cdc.gov/coronavirus/2019-ncov/downloads/php/14-DayTemperature-and-Symptom-Log-for-Contact-Tracing.pdf

Contact Tracing in the School Setting



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.
  - 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.

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Recommended Scripts for School Community

General COVID-19 Exposure in a School Setting
*"We recently became aware of a **[staff member/student/child]** in our **[school/childcare]** setting that tested positive for COVID-19. We found out on **[Insert Date Here]** that the test came back positive. We are responsible for informing all **[staff member/students/child(ren)]** who are considered "close contacts" by the CDC guidelines. If you are required to quarantine because of an exposure, Shiawassee County Health Department (SCHD) will contact you. If your **[student/child]** does not qualify as a close contact, you will not hear from SCHD.* *We want to protect the confidentiality of this person unless there is a reason to inform you of this person's identity. At this time, it is our role to tell all the families of **[Insert School/Program Name Here]** that we are moving forward under the guidance of the SCHD and that all measures have been taken to protect the wellbeing of your child(ren). Please monitor for onset of symptoms related to COVID-19, including fever, cough, difficulty breathing, headache, or new fatigue. If you note any change in the health of your child, please call your regular medical provider."*
COVID-19 Exposure in a Specific Group in School Setting:
*"A **[staff member/student]** involved with **[Insert Group Name]** was exposed to COVID-19. When the **[staff member/student]** became aware of this exposure, they were tested. The **[staff member/student]** was with the **[Insert Group Name]** on **[Insert Date Here]** for approximately [**Insert Amount of Time]**. If you are required to quarantine because of an exposure, Shiawassee County Health Department (SCHD) will contact you. If your **[student/child]** does not qualify as a close contact, you will not hear from us. We want to protect the confidentiality of this person unless there is a reason to inform you of this person's identity. At this time, it is our role to tell all the families of **[Insert School/Program Name Here]** that we are moving forward under the guidance of the SCHD and that all measures have been taken to protect the wellbeing of your child(ren). Please monitor for onset of symptoms related to COVID-19, including fever, cough, difficulty breathing, headache, or new fatigue. If you note any change in the health of your child, please call your regular medical provider."*

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School Scenarios with Action Steps

Student/Staff person is confirmed or symptomatic pending results or a close contact.		
Scenario 1:	**Scenario 2:**	**Scenario 3:**
A student/staff person within the school is confirmed to have COVID-19.	**A student/staff person within the school is symptomatic and pending lab result for COVID-19.**	**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-reducing medication) **and** • symptoms have improved (e.g. cough, shortness of breath) **and** • 10 days since symptoms first appeared. Household members, classmates, and teachers of the quarantined student/staff person who are close contacts are excluded for 14 days after their last date of close contact.	The student/staff person is excluded from school until results of the test are negative. If positive, see scenario 1. If negative, the student/staff person must be symptom free for **24 hours without the use of medications** prior to returning to school. Household members, classmates, and teachers of the pending case should be monitored for symptoms while waiting for test results. If symptoms develop, they should call their medical provider to be tested for COVID-19.	The student/staff person must quarantine for **14 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. If symptoms develop, they should call their medical provider to be tested for COVID-19.

**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.*

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School Scenarios with Action Steps

Household member of a student or staff member within the school is confirmed or symptomatic pending results or a close contact.		
Scenario 1:	**Scenario 2:**	**Scenario 3:**
1. Household member of a student within the school has been confirmed to have COVID-19.	**2. Household member of a student within the school is symptomatic, pending results, and has had close contact with a known case.**	**3. Household member of a student within the school has had close contact to a known case of COVID-19.**
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.	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 can return to school.	Student can remain in school but should be monitored. If COVID -19 symptoms develop in the household member, students should be excluded from school, and should be treated as in Scenario 1 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.*

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Isolation and Quarantine Timeline

A household member becomes sick with COVID-19

STAY HOME → **RETURN TO WORK, SCHOOL, DAYCARE**

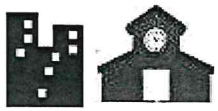
The sick household member who tested positive must isolate at home.

ISOLATION PERIOD

The sick household member must remain in isolation for **10 days** since symptoms first appeared **and 24 hours** with no fever (without the use of fever-reducing medications) **and** other symptoms have improved.

People who live in the same household as the person who was tested positive must quarantine at home.

Household member that tested positive can return to work, school or daycare.



QUARANTINE PERIOD

Stay home **24/7** and monitor for symptoms for **14 days** since last possible exposure. (The last possible exposure is when the sick family member's isolation period ended.)

If the household members of the person who tested positive for COVID-19 do not develop symptoms, they can return to work, school, or daycare upon completing quarantine.

Household members cannot attend work, daycare, or school **during the other household member's isolation** (10 days) or for the 14 days after the isolation period (quarantine). If the quarantined household member **DOES** develop symptoms, they cannot return until 10 days since first symptoms appeared **AND** 24 hours being fever-free **AND** other symptoms have improved. Isolation and quarantine periods start over any time a new household member become sick with COVID-19.

Everyone should assume exposure to COVID-19 and monitor for symptoms. Check your temperature and watch for symptoms. Call your doctor if symptoms develop. **QUARANTINE** keeps someone who was in close contact with someone who has COVID-19 away from others in case they become infected. People should stay home and monitor for symptoms. **ISOLATION** keeps someone who is sick or tested positive for COVID-19 from people who are not infected, even in their own home. In the home, anyone sick or infected should separate themselves from others by staying in a specific area and using a separate bathroom (if available). For more information on quarantine and isolation, visit https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine-isolation.html.

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Frequently Asked Questions for School Administrators and Teachers

1. What is the difference between isolation and quarantine?

Isolation 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 with no fever **and** respiratory symptoms have improved (e.g. cough, shortness of breath) **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. Quarantine and isolation times may vary and are determined on a case by case basis. 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.

5. If a student, 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.

EPA list: https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2-covid-19

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.

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.

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?

Consult with your healthcare provider on recommendations for returning back to school. https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html

Keep out of school until they have met the guidance for their symptoms see https://www.michigan.gov/documents/mdch/Managing_CD_in_Schools_FINAL_469824_7.PDF

11. Does the school have to inform the families of students 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 families of students. However, the Health Department can provide guidance as needed.

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 **and** respiratory symptoms have improved (e.g. cough, shortness of breath) **and** 10 days have passed since symptoms first appeared.

The Centers of Disease Control and Prevention 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 starting school?

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. 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. 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.

23. Testing

Staff and students will be instructed to call their healthcare provider, or to follow up with a local clinic or urgent care center. Staff or student parents can call 2-1-1 or visit www.michigan.gov/coronavirustest to find the closest testing location for the student or staff member to be tested.

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COVID-19 School Health Screening Agreement

Instructions for Parents and/or Guardians

For the health and safety of our students, the Shiawassee County 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 feels that instructing parents to do this prior to sending their kids to school is acceptable.

We ask that you complete the steps of the student screening below, prior to sending your 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.

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 [*THE SCHOOL*] 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: _____

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Contact Tracing: Identifying Close Adult and Student Contacts

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 Shiawassee County 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 Shiawassee County 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 symptomatic cases	**For asymptomatic positive tests**
Date Symptoms Started: ___ /___ / ___ 48 hours prior to this: ___ / ___ / ___	Test Date: ___ / ___ / ___ 48 hours prior to test date: ___ / ___ / ___

Dates staff or student attended school starting from 48 hours from onset of symptoms (or test date)

___ / ___ / ___ through ___ / ___ / ___

Adult Close Contacts* 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.

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Staff or student has a positive nasal/throat test.

For symptomatic cases	**For asymptomatic positive tests**
Date Symptoms Started: ___ /___ / ___ 48 hours prior to this: ___ / ___ / ___	Test Date: ___ / ___ / ___ 48 hours prior to test date: ___ / ___ / ___

Dates staff or student attended school starting from 48 hours from onset of symptoms (or test date)

___ / ___ / ___ through ___ / ___ / ___

Student Close Contacts* 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.

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COVID-19 Workplace Health Screening

School Name: _____

Employee: _____ Date: _____

Time In: _____

1. In the last 14 days, have you developed any of the following symptoms that are new/different/worse from baseline of any chronic illness:

Subjective fever (felt feverish):	☐ Yes	☐ No
New or worsening cough:	☐ Yes	☐ No
Shortness of breath or difficulty breathing:	☐ Yes	☐ No

2. In the last 14 days, have you developed any of the following symptoms that are new/different/worse from baseline of any chronic illness:

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 tool is subject to change based on the latest information on COVID-19

If you answer **YES** to any of the symptoms listed in section 1, **OR YES** to two or more of the symptoms listed in section 2, **OR** your temperature is **100.4°F or higher**, please do not go into work/school. Contact your supervisor and self- isolate at home. Contact your primary care physician's office for further direction or visit www.michigan.gov.coronavirustest to seek COVID-19 testing locations.

In the past 14 days, have you:

Had close contact with an individual diagnosed with COVID-19?	☐ Yes	☐ No
Traveled?	☐ Yes	☐ No

If you answer **YES** to either of these questions, please do not go into work/school. Self-quarantine at home for 14 days. Contact your primary care physician's office if you have symptoms or have had close contact with an individual for evaluation. If you are given a probable diagnosis or test positive call your local health department to ensure they are aware. For a map of COVID-19 hotspots, visit: https://globalepidemics.org/key-metrics-for-covid-suppression/.

Signature:_____ Date: _____