COVID SCHOOL GUIDELINES

CDC: <u>Guidance for COVID-19 Prevention in K-12 Schools</u>

MDHHS: K-12 School Opening Guidance includes information on MDHHS testing program

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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.

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).

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.

Close Contact: Someone who was within 6 feet of an infected person (laboratory-confirmed or a clinically compatible illness) for a cumulative total of 15 minutes or more over a 24-hour period (for example, three individual 5-minute exposures for a total of 15 minutes) OR someone who had direct contact with an infected person (such as in sports).

An infected person can spread SARS-CoV-2 starting from 2 days before they have any symptoms (or, for asymptomatic patients, 2 days before the positive specimen collection date), until they meet criteria for discontinuing home isolation.

Quarantine: The practice of keeping someone who might have been *exposed* to COVID-19 away from others. Quarantine helps prevent spread of disease that can occur before a person knows they are sick or if they are infected with the virus without feeling symptoms. People in quarantine will be advised to stay home (usually for 10 days), separate themselves from others, monitor their health for at least 14 days, and follow directions from their state or local health department.

Acceptable Quarantine Options for Close Contacts in the Educational Setting:

- 1. Stay home for 10-14 days after last contact with a person who has COVID-19
- 2. If PCR test result (collected on Day 5 or later) is negative, quarantine may end after Day 7
- 3. **Test to Stay:** *If school has capacity,* prior to entry at school: negative daily symptom check, negative daily antigen test result, AND use of correct and consistent well-fitted mask for all classroom and other activities during the quarantine period up to 10 days or until Option #3.

Acceptable Quarantine Options for Unvaccinated Close Contacts in a Household:

- 1. Stay home for 10-14 days after last exposure with household member who has COVID-19 (the last possible exposure is the last day of the COVID-19 positive household member's 10-day isolation period)
- 2. If PCR test result (collected on Day 15 or later) is negative, quarantine may end after Day 17
- 3. **Test to Stay:** *If school has capacity,* prior to entry at school: close contact must have negative daily symptom check, negative daily antigen test result, AND use of correct and consistent well-fitted mask for all classroom and other activities during the quarantine period beginning at Day 10 through Day 20 or until Option #3
 - *All negative PCR or Antigen test results must be presented to the school for determination of quarantine release.
 - *These quarantine options may not be available to students/staff identified in an outbreak within the educational setting. If an outbreak is identified in a school, KCHD will determine the risk level with the school on a case-by-case basis.

Indications for quarantine from school:

- Students and staff who are not fully vaccinated who have a COVID-19 positive household member are required to quarantine
- Quarantine from school is not indicated if both students are correctly and consistently wearing well-fitting masks
- Quarantine is not indicated for those who are fully vaccinated
- Teachers, staff, or other adults in the indoor classroom setting would be asked to quarantine after an exposure regardless of mask use if they are not fully vaccinated

Indications for Quarantine for Staff/Students with exposure in the educational setting

^{*}This may change if there is an ongoing outbreak

Masking Status	Exposure Distance	Quarantine Indicated?	
Both individuals	Within 6 feet	No*	
consistently Masked	Greater than 6 feet	No*	
One or both individuals	Within 6 feet	Yes, if not fully	
Not Consistently Masked		vaccinatedNo* if fully	
		vaccinated	
	Greater than 6 feet	No*	

^{*}Students can attend school and participate in sports and extracurricular activities, but must adhere tomasking, social distancing, and avoidance of gatherings outside of school strictly for 10 days after last exposure or after 7 days with a negative PCR test.

Reporting Positive Cases

Schools must report positive cases of COVID-19 to Kent County Health Department (KCHD) within 24 hours, as required by Michigan Public Health Code (Act No. 368 of the Public Acts of 1978).

Positive test results to report include PCR tests and antigen tests, including those done at home.

Schools are to report a positive student or staff by calling **616-326-0060** or securely emailing **COVIDschools@kentcountymi.gov.**

COVID-19 Contact Tracing in Schools

Schools are required to contact trace and to notify KCHD of close contacts related to the exposure. KCHD will send notification to these close contacts which will include recommendations and/or requirements to quarantine if indicated.

See **Guidelines for School Contact Tracing and Quarantine** for further information.

Schools should continue strategies which allow for contact tracing, such as assigned seats, attendance records, etc.

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

- Who is the staff/student near (less than 6ft) throughout the day?
 - o Who is the student near (less than 6ft) during activities such as choir or band class, lunch, physical education, or sports?
- Has there been adequate physical distancing in classrooms, break rooms, and lunchrooms?
- Are there any others at the school that live with the staff/student, or carpool with them?
- Have any of the close contacts to the positive case been fully vaccinated?

Other considerations for schools when there is more than one positive case identified:

- Did the school already know staff/student had been identified as a close/household contact of someone who was positive forCOVID-19?
- Is there one location/classroom in the school that seems to be more affected?
- Is there something else in common?

Quarantine may or may not be indicated depending on the vaccination status and use of masks by the students.

Transportation

Students who carpool or ride the bus together for 15+ minutes in a 24-hour period.



Lunch Mates

When someone who eats lunch within 6 feet of someone with COVID-19 for 15+ minutes.

This is a higher risk time as face coverings cannot be worn.



Other Students

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



Teammates

Sports teammates within 6 feet of someone with COVID-19 for cumulative 15+ minutes—including but not limited to time in locker room; bus/carpool; clustering on sideline/bench/dugout; walking to/from practice location OR having direct contact with an infected person including touching (includes tackling, blocking, defending, etc.)



Opposing Teammates

Opposing teammates in sporting events that shared time on the field or court and were within 6 feet of someone with COVID-19 for 15+ minutes OR having direct contact with an infected person including touching (includes tackling, blocking, defending, etc.)



Entire Classrooms

In certain situations, such as an outbreak or in classes without assigned seating, the entire class may need to quarantine.



Public health authorities may determine distances other than 6 feet, or a cumulative timeframe less than 15 minutes can still result in high-risk exposures based on other considerations and circumstances in each case

Risk of COVID Transmission in Schools

Schools are a vital part of our local communities. They not only provide academic support to students, but are critical in meeting the social, emotional, and physical needs for students and their families. Safety for students and staff is always the priority, with student safety defined to include social, emotional, and physical well-being.

Key prevention strategies in schools include:

- 1. **Promoting Vaccination** against COVID-19 for eligible staff and students.
- 2. **Face Masks:** Correctly and consistently using well-fitted masks that cover the nose and mouth.
- 3. **Social Distancing:** Physical distancing, including cohorting children together to reduce potential exposures.

4. COVID-19 Screening, Testing, and Contact Tracing

- a) Requiring students and staff to stay home if sick or having COVID-19 symptoms by reminding parents of symptoms associated with COVID-19 at the beginning of the school year and after holiday breaks
- **b)** Encouraging students and staff to get tested for COVID-19 if having symptoms or if they are not fully vaccinated and are a close contact of someone who has COVID-19.
- c) Conducting screening testing
- d) Implementing contact tracing
- e) Following recommended and required quarantines

5. Maintaining Healthy Environments

- a) Promoting handwashing and covering coughs and sneezes.
- b) Routine cleaning to help maintain healthy facilities.
- c) Avoiding crowded and/or poorly ventilated indoor activities (e.g., engaging in outdoor activities when possible and increasing ventilation for indoor activities).

d) When to clean & when to disinfect

e) Cleaning and Disinfection: cleaning once a day is usually enough to sufficiently remove potential virus that may be on surfaces. Disinfecting (using disinfectants on the U.S. Environmental Protection Agency COVID-19) removes any remaining germs on surfaces, which further reduces any risk of spreading infection. CDC has information on routine cleaning to help maintain healthy facilities.

KCHD GUIDELINES FOR SCHOOL CONTACT TRACING AND QUARANTINE

The school is alerted of a student or staff's positive test result by family, staff, or KCHD.

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The school contact traces to identify close contacts (direct contact or within 6ft for total of 15+ min).

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The school notifies KCHD of **all** close contacts using KCHD's contact tracing spreadsheet on which the school notes whether there was consistent and correct use of well-fitting face masks and the vaccination status of close contacts, if known.



KCHD notifies family if their child is considered a close contact regardless of mask use, and whether or not quarantine from school is recommended. If a child is asked to quarantine from school but is fully vaccinated or has had a previous COVID infection within the past 90 days, the family must provide proof to the school before the child can return.

Sports/Extracurriculars:

If a positive case is identified on a sports team or extracurricular school-sponsored group such as music or drama:

- School will note this involvement on the contact tracing spreadsheet sent to KCHD
- In the case of an outbreak of three or more cases within a team/group within a 14-day period, school will notify KCHD by email (COVIDschools@kentcountymi.gov) or phone (616-326-0060) to discuss mitigation

Resources:

CDC Guidance for COVID-19 Prevention in K-12 Schools

American Academy of Pediatrics: COVID-19 Guidance for Safe Schools

MDHHS: Recommendations for Safer School Operations during COVID-19

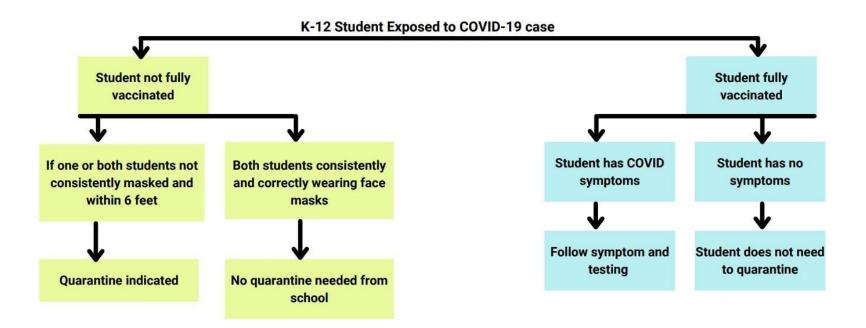
Local Metrics:

Kent County Health Department COVID-19 Dashboard

Symptom Screener

Name of Child / Staff member: Date:					
Symptom Check: Does student/ staff member have ANY one of the following symptoms listed below?					
[] YES	[] NO, do not have any symptoms.				
•	Temperature 100.4 degrees Fahrenheit or higher OR feels warm to touch OR feels feverish or has chills []				
•	New cough or change in cough for a child who often has a cough []				
•	Shortness of breath []				
•	Loss of taste or smell []				
•	Sore throat []				
•	Body aches []				
•	Nausea or vomiting or diarrhea []				
•	Severe headache []				
•	Extreme Tiredness []				
•	Congestion/Runny nose []				
Pending Test Result Check: Is the student/staff member awaiting a pending COVID-19 test result?					
[] YES	[] NO				
Close Contact Check: Has the student/staff member had close contact with a person who has been confirmed to have COVID-19?					
[] YES	[] NO				
If the student/ staff member has answered YES to any of the questions above, the student/ staff member cannot attend school today.					

Algorithm for assessing school quarantine based on K-12 exposure in the educational setting, extracurricular, and busses (in a non-outbreak setting)



Mental Health Resources for Schools

Mental Health Screening Recommendation

FREE Headspace Subscription for Educators

- Hundreds of guided meditations on everything from stress and focus to the workplace.
- Sleep casts, sleep sounds, and sleep music to help create the conditions for a better night's rest.
- Inspiring videos, quick workouts, group meditations, and much more.

Kent ISD MI Safe Schools Roadmap Mental & Social-Emotional Health Document

This document was created by the Kent ISD mental health internal and external partners. It is intended to align to the MI Safe Schools Roadmap and gives guidance, recommendations, and resources for district re-entry planning.

Throughout this document, items and activities in Phases 1-3 are strongly recommended while schools are closed for in-person instruction. Activities in Phase 4 are strongly recommended before schools reopen for hybrid or in-person instruction, and items in Phase 5 are recommended before school reopens for in-person instruction.

Sections within document:

- Classroom Community Building (Tier I)
- · Mental Health Universal Screening
- Data Analysis and Student Referral Process
- Crisis Management Planning
- Professional Development
- Mental Health Universal Screening
- Community Wellness Resources
- Universal Support for Staff Wellness
- Additional Re-entry Research and Resources

State of Michigan Mental Health Webpage and Support Documents

<u>Best Practices In Universal Social, Emotional and Behavioral Screening, An Implementation Guide</u>

School Mental Health Screening Playbook

31n Team Vendor Resources:

The state 31n team collaborated with each of the vendors to support your efforts to increase student mental health outcomes, and you can use your 31n funds to partner with them should you choose to do so. Note: 31n(12) funds can be used for costs associated with initiation and training on these resources, and 31(6) funds can be used for the platform/service. Please see the attached summaries for information on each option. Let your 31n consultant know if you have any questions about any of these resources, or feel free to reach out to the vendors directly.

Class Catalyst is available for Tier 1 and offers virtual student check-in which could be a precursor for screening students who may need extra support.

Trusst is available for Tier 2 (&/or Tier 3) and is a text messaging platform for therapists and students to use for mental health service provision (could be helpful in areas where WIFI is limited or for students who need privacy to discuss mental health concerns when zoom or phone calls could be prohibitive).

BH-Works is a browser-based platform for universal screening, intake process management, referral, and care coordination, and much more.

Macomb ISD mental health resources

Other resources:

- Podcasts about crisis and re-entry by the clinical director of STARR commonwealth
- Planning for the next normal at school, Kaiser Permanente Ideas and Tools for workingwith Parents and Families, Collaborative for Academic, Social, and Emotional Learning (CASEL)
- Advancing Comprehensive School Mental Health Systems: Guidance from the Field, National Center for School Mental Health COVID-19, National Center for School Mental Health
- <u>University of Maryland School of Medicine COVID-19: Family and Educator</u>
 Resources, National Association of School Psychologists Coronavirus Disease 2019
 Resources, National Association of School Nurses
- Responding to School Mental Health, Mental Health Technology Transfer CenterNetwork

School Drinking Water Guidance and Resources

- For Parents
- For School Administrators and Managers
- Flushing Guidance Memo to Schools During Executive Order 2020-35 Guidance on Flushing
 Your School Plumbing System Before Resuming Class: Information concerning the risks of water
 stagnation and where to find more information to help maintain the quality of drinking water
 within your facilities.

For more guidance documents, lead testing information and videos, please visit, https://www.michigan.gov/egle/0,9429,7-135-3313 3675 3691-474608--,00.html



TIPS FOR HELPING STUDENTS WEAR MASKS



COMMUNICATE

Knowing what to expect helps kids of all ages feel prepared and more at ease. Give kids time to get used to what's new. Set expectations, give support, and answer their questions to help them feel comfortable.

PERSONALIZE IT

Allow students to select their cloth face covering and/or material that is used to make it. Kids can decorate their masks to make it their own.

PROVIDE OPTIONS

For students with sensory concerns or tactile sensitivities, offer a variety of materials, prints, and textures, and allow them to choose which face covering is most comfortable.

EXPLAIN WHY

Use simple words to explain why masks are important to our health and how they keep us safe from germs. Focus on the positive aspects of wearing them.

TEACH ABOUT PROPER USE

By talking to kids and showing them how to wear masks safely, they are more likely to properly wear them.

MAKE MASKS COMFORTABLE

Find adaptations such as face mask extenders or ear savers that can make wearing a mask more comfortable.

PRACTICE AND PRAISE

As much as you can, give kids time to practice wearing their masks for longer periods of time so they are ready for school. Have your child practice putting on and taking off their masks by themselves. Use positive reinforcement to help encourage them.

MAKE IT FUN

For younger children, you can make it fun by putting a mask on their favorite stuffed animal. Play with your children while wearing masks and pretend you are superheroes or doctors.

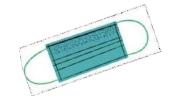
If you need further assistance, seek services from specialists such as behavior analysts or behavioral psychologists.

RESOURCES:

- CDC How to Wear Masks:
- Social Stories for Young and Old
- Helping Individuals with Autism Wear Face Masks
- Sesame Street Video
- American Lung Association: Steps You Can Take to Get Used to Wearing a Mask
- Cloth Face Coverings for Children During COVID-19
- Helping people with autism spectrum disorder manage masks and COVID-19 tests
- A Parent's Guide



CONSEJOS PARA AYUDAR A LOS ESTUDIANTES A USAR MASCARILLAS



COMUNICAR

Saber qué esperar, ayuda a los niños de todas las edades a sentirse preparados y más cómodos. Dé a los niños tiempo para acostumbrarse a lo nuevo. Fije expectativas, ofrezca apoyo y responda las preguntas de los niños para ayudar a que se sientan cómodos.

PERSONALÍCENLAS

Permita que los estudiantes elijan su cubierta facial de tela o el material que se usa para hacerla. Los niños pueden decorar sus mascarillas para hacerlas más suyas.

OFREZCA OPCIONES

En caso de estudiantes con problemas sensoriales o sensibilidad táctil, ofrezca materiales, estampados y texturas diferentes y permítales elegir qué tapabocas les resulta más cómodo.

EXPLIQUE POR QUÉ

Use palabras sencillas para explicar por qué las mascarillas son importantes para nuestra salud y cómo nos protegen de los gérmenes. Concéntrese en los aspectos positivos de usarlos.

ENSEÑE LA FORMA ADECUADA DE USARLAS

Hablar con los niños y mostrarles cómo usar mascarillas en forma segura hará que sea más probable que las usen correctamente.

HAGA QUE LAS MASCARILLAS SEAN CÓMODAS

Busque maneras de adaptarlas, como usar extensores de mascarillas o protectores de orejas que hagan que sea más cómodo usar una mascarilla.

PRÁCTICA Y ELOGIOS

Dé a los niños el mayor tiempo posible para practicar el uso de sus mascarillas durante períodos más prolongados, para que estén listos para usarlas en la escuela. Haga que su hijo practique cómo ponerse y quitarse la mascarilla él mismo. Use refuerzos positivos como ayuda para alentarlos.

HAGA QUE SEA DIVERTIDO

En el caso de los niños más pequeños, puede hacer que sea más divertido usar la mascarilla si también le ponen una a su muñeco de peluche favorito. Juegue con sus hijos mientras usan mascarillas y simulen ser superhéroes o médicos.

Si necesita más ayuda, procure obtener servicios de especialistas tales como analistas de conducta o psicólogos conductuales.

RECURSOS:

- CDC How to Wear Masks (CDC, Cómo usar mascarillas)
- Social Stories for Young and Old (Historias sociales para jóvenes yviejos)
- Helping Individuals with Autism Wear Face Masks (Cómo ayudar a personas autistas a usarmascarillas)
- Video de Sesame Street (Plaza Sésamo)
- American Lung Association (Asociación Americana del Pulmón): Steps You Can Take to Get Used to Wearing a Mask (Medidas que puede tomar para acostumbrarse a usar unamascarilla)
- Cloth Face Coverings for Children During COVID-19 (Cubiertas faciales de tela para niños durante el COVID-19)
- Helping people with autism spectrum disorder manage masks and COVID-19 tests (Cómo ayudar a las personas con trastornos del espectro autista a manejar las mascarillas y las pruebas deCOVID-19)
- Helping Individuals with Autism Wear Face asks (Cómo ayudar a personas autistas a usarmascarillas)
- A Parent's Guide (Guía para padres

Frequently Asked Questions

1. Can the school accept a letter from a physician regarding quarantine/isolation release dates?

A letter from a MD, DO or PA should be accepted as confirmation of a Covid-19 positive test date. Because many physicians are not aware of current guidance regarding quarantine and isolation, KCHD would not recommend that schools use the release/return dates provided by a physician.

2. The student/staff provided a negative PCR test taken on Day 5 (or Day 15 for household contacts) of quarantine to be released from quarantine. Do they need a letter from MDHHS/KCHD?

No, when the student/staff in quarantine provides the documentation of a negative PCR test taken on or after Day 5 (or Day 15 for household contacts), the school should allow the student/staff to return to school *after* Day 7 (or Day 17 for household contacts). The student/staff will not receive a new letter from MDHHS/KCHD for this early release of quarantine.

3. Should the school accept a letter from MDHHS (aka: TraceForce) when the quarantine time frame conflicts with the information they received from the family?

When the family provides a letter from KCHD or TraceForce with return dates, the school should honor the letter. If the return dates on the letter vary significantly from the school's information, such that the school believes KCHD was not provided all the correct information at the time of the interview, the school may contact KCHD to inquire on a case-by-case basis. However, schools should use their best judgment, and if in doubt, the school should utilize the most conservative date to reduce the risk in the school setting.

4. If a student/staff has had a previous COVID infection within the past 90 days, but the positive test result came from a Home Test, will the student be exempt from quarantine?

Please use the chart below to determine if the student qualifies for the 90-day exemption.

TYPE OF POSITIVE TEST	SYMPTOMS?	Close or HH Contact? (epi-link)	EXEMPT for 90 days from Q?
Home Antigen Test	Yes	Yes	Yes*
Home Antigen Test	Yes	No	No
Home PCR Test (lab- confirmed)	Yes	Yes	Yes
Home PCR Test (lab- confirmed)	Yes	No	Yes

^{*}Refer the positive person/family to contact KCHD at 616-326-0060 Option #2. They MUST leave all the requested information to receive a return phone call and interview. KCHD will create a PROBABLE case in MDSS and can generate a letter for the positive to use as proof of positivity.

5. Should the school determine if the isolation status in the home is appropriate for a reduced quarantine for household contacts?

If the school is aware of the positive person or the household members being removed from the home such that there is no ongoing exposure to the Covid-19 positive person, the school can determine that the isolation status is appropriate for a reduced quarantine and utilize the last date of exposure to the Covid-19 positive as the last date of contact to begin the 10-day quarantine period. However, if the family is isolating the positive person in the same home as the other household members, we ask that the determination for properly isolating be made by KCHD contact tracers. These scenarios can be very subjective, and our staff are trained to ask questions to determine whether there is adequate separation in the home to decrease the risk to the student and allow them to return to school. KCHD will inform the school of the reduced quarantine date. The family will also have the opportunity to be provided a letter by TraceForce with the reduced quarantine dates. Please note: Schools should recommend that families answer the text PEG Survey or phone call from KCHD to complete the interview for the reduced quarantine.

6. The family stated that they have not received a phone call or text from KCHD after a positive result. What do we tell them?

There are many scenarios in which this may occur. Refer the family to contact KCHD at 616-326-0060 Option #2. The family MUST leave all the requested information to receive a return phone call and interview. Please note: Please do not refer the family if it has been less than 3 days since they received their lab-confirmed test results.

7. A family reported their student was positive, but KCHD does not have the test results. What do we do?

Refer the family to contact KCHD at 616-326-0060 Option #2. The family MUST leave all the requested information to receive a return phone call and interview. The school should utilize the information that the family disclosed to determine return dates for isolation and quarantine unless given other information from KCHD or MDHHS/TraceForce letter.

8. The onset date the family gave the school is different from the onset date the family gave KCHD. Which do we use?

KCHD recognizes that this may happen. Generally, the school should honor the MDHHS/TraceForce letter or return dates provided by KCHD. However, the school should use their best judgment to determine the risk for their school due to any conflicting information. The school can contact KCHD via email on a case-by-case basis if there is significant concern for safety because of the conflicting information.

9. Do we need to require proof of vaccination or 90-day exemption for a close contact to be exempt from quarantine?

Yes. The student/staff who is identified as a close contact in an educational setting must show proof to the school of being fully vaccinated and/or testing positive within the past 90 days. KCDH does not monitor or provide exemptions to quarantine for the educational setting.

10. What date do we use to start the 90-day exemption? What if they do not have proof?

The school should start the 90-day exemption from the date of the test. If a student/staff does not have proof of this test date, he/she will not be exempt from quarantine.