



COVID-19 RETURN TO SCHOOL TOOLKIT

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

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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

[Executive Order 2020-145](#) requires a daily 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 COVID-19.

An example workplace-screening form is found in [Appendix B](#). You can also use a virtual screener. One option provided by the State of Michigan is <https://misymptomapp.state.mi.us/login>

FOR STUDENTS

Schools should determine a screening method to detect symptoms of illness in students that suit local school and community conditions.











The health department and the CDC [does not currently recommend](#) universal symptom screenings (screening all students grades K-12) be conducted by schools. Parents or caregivers should be strongly encouraged to monitor their children for signs of infectious illness every day prior to sending students to school.

It is recommended to set up an agreement or form for parents outlining the responsibility of the parent and the responsibility of the school. An example agreement and symptom screening are in [Appendix C](#).

CLOTH FACE COVERINGS HELP PREVENT THE SPREAD OF COVID-19

When schools enter phase 4 under their preparedness plan, [Executive Order 2020-142](#) states when to require face coverings in school. According to the [FAQs published for EO 2020-142](#), schools should require documentation from a medical professional for students or staff who cannot medically tolerate a face covering, as they do for other types of accommodations. See [Appendix D](#) for an example form schools can use for the required documentation.

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

Chance of Transmission	Asymptomatic COVID-19 Carrier	Uninfected Person
HIGHEST		
HIGH		
MEDIUM		
LOW		
LOWEST		

6 ft

MANAGING COVID-19 IN THE SCHOOL

As long as there are cases of COVID-19 in the community, there will be no way to prevent all risks of COVID-19 spread in schools. **The goal is to keep the risk as low as possible and keep schools/school activities as safe as possible.** If students did not go to school, they would still be at risk of COVID-19 illness from their interactions in the community. Our goal is to partner with schools to ensure that the benefits of in-person education outweigh 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.

The health department will also need to know who to contact at the school for case investigation and contact tracing. Before school reopens, please provide the name and contact information of your COVID-19 school liaison to the COVID-19 investigation team at the health department by contacting Tonya Barber at (616) 494-5531 or tbarber@miOttawa.org. Once received, a member of the health department COVID-19 investigation team will contact the school liaison to provide additional information and assure quick communication channels.

LIMIT GATHERINGS, VISITORS, AND FIELD TRIPS

- Pursue virtual group events, gatherings, or meetings, if possible. For in-person, limit group size and promote social distancing of at least 6 feet between people.
- Limit nonessential visitors, volunteers, and activities involving external groups or organizations – 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.
- Pursue options to convene sporting events and participation in sports activities in ways that minimize the risk of transmission of COVID-19 to players, families, coaches, and communities.

COHORTING – IDENTIFYING SMALL GROUPS AND KEEPING THEM TOGETHER

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

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

STAGGERED SCHEDULING

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

WHAT HAPPENS WHEN SOMEONE AT SCHOOL GETS COVID-19

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

If you become aware of a case of COVID-19 in a student or staff member, notify your school's designated COVID-19 liaison right away. They will contact your assigned health department liaison. The health department will notify your school's COVID-19 liaison when they become aware of a case. Only a select few at the school should know the identity of the case. 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). **Once the school and health department are both aware of a new case, it is important for the school to notify families.** [Appendix A](#) has a sample letter for school use that will be provided to your COVID-19 school liaison by the health department in the event of a case. The health department will issue a notice of isolation to each student or staff member case. A student or staff member cannot return to school/work until the health department releases them by providing a letter of release from isolation.

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 positive COVID-19 test was performed. Close contacts to a person with COVID-19 are at risk of getting sick. They must be identified and quarantined to prevent further spread at school. Schools should have a plan to make seating charts and cohort lists immediately available.

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 (does not have to be consecutive minutes), with or without a face covering. Face coverings significantly reduce the risk of spreading COVID-19. The risk of spread is lowest when the contagious individual and potential close contacts both keep their nose and mouth covered, but the risk is not eliminated. Wearing a mask or face covering will not prevent a person from being considered a close contact if exposed, but it will reduce the likelihood that they get sick and become a case, thus also reducing the likelihood of community transmission. Every investigation is different, so the health department will work with the school to determine close contacts for quarantine.

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.

- **IF THE CONTAGIOUS INDIVIDUAL WERE A TEACHER:** 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 quarantined.
- **CLASSMATES SITTING OR OFTEN WITHIN 6 FEET** of the contagious individual, either in the classroom or on the bus, for 15 non-consecutive minutes or more. This would typically be students one to two rows from the contagious individual.
- **LUNCHMATES** of student if sitting within 6 feet of contagious individual for 15 non-consecutive minutes or more.
- **PLAYMATES ON THE PLAYGROUND OR IN GYM** within 6 feet of the contagious individual for 15 minutes or more.
- **SPORTS TEAMMATES** within 6 feet of the contagious individual for 15 non-consecutive minutes or more on the field or court, or in the locker room or bus.
- **OPPOSING TEAMMATES** in sporting events that shared time on the field or court with the contagious individual and were within 6 feet for 15 non-consecutive minutes or more.
- **CLASSMATES OR OTHERS THAT HAD INTERACTIONS** with the contagious individual lasting over 15 non-consecutive minutes in confined areas such as bathrooms, office room, where distancing of 6 feet is difficult.

**Public health determinations of who is a close contact may vary from standard definitions. Such exceptions would be unique, and applied when exposure circumstances are unusual or the exposed population is highly susceptible.*

These examples illustrate the importance of assigned seating and student/staff cohorts in order to minimize the spread of disease and keep students and staff in school. We understand that kids may not like assigned seats, losing some freedoms, or the limitations of cohorts, but please help encourage them and remind them why this is important.

It is helpful for parents to keep note of where their student is going and who they are spending time with outside of school. This will assist in finding all close contacts who have been exposed and may become infected, further preventing the spread of COVID-19.

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 contagious two days before they have any symptoms of being sick, so unless they are kept separated from other people, they can 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. The health department determines when a close contact is released from quarantine.

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 in quarantine at this time. Odds are, Bob will not get sick and will be back in school and football in a couple of weeks.

CLEANING AND DISINFECTING

Close off areas used by a sick person and 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 products, 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 health department is aware of the case. Notify families that there is a COVID-19 case in the school ([Appendix A](#)). The health department will ask your COVID-19 school liaison to help with school-related contact tracing, having them gather and send close contact information to the health department electronically ([Appendix E](#)). The health department will work with the school to notify those individuals and instruct them to quarantine.

If you are notified after business hours that a student or staff person has had a positive test result, or has been notified that they are a COVID-19 case, have your COVID-19 school liaison contact a member of your health department COVID-19 investigation team on the next school/business day at (616) 396-5266. If the case is involved in one or more extra-curricular activities as either a participant or a leader, cancel the next school/business day's activities to allow time for case investigation and contact tracing.

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 and then touches an object. COVID-19 appears to stay on objects 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.

WHEN A STUDENT/STAFF PERSON SHOULD STAY HOME AND WILL BE SENT HOME

Students and staff should not go to school or any school activities or sports if having symptoms of COVID-19 or if they have been identified by the health department as a close contact of a COVID-19 case. If they start having symptoms of COVID-19 while at school, they will need to be sent home. Testing for COVID-19 should be encouraged since there is illness in the community and some people don't know they are infected. Testing may also shorten the time that they are excluded from school or work. If a student or staff person tests positive for COVID-19, or are a household member or other close contact to someone who tested positive, the health department will provide them with a letter of quarantine, isolation or release from isolation. These can be used for leave from school/work and return to school/work.

MATERIALS & RESOURCES

The following materials are developed by the CDC to support COVID-19 recommendations. All materials are free for download. They may be printed on a standard office printer, or you may use a commercial printer.

[Print Materials for Students - Kindergarten through College](#)

[Print Materials for All Ages and all COVID-19 Topics](#)

[VIDEO: How to Wear a Cloth Face Covering](#)

COVID-19 SCHOOL SCENARIOS WITH ACTION STEPS

The next section provides both a flowchart and set of tables that may help illustrate the decisions and actions that follow the development of symptoms in a student or staff member. These are based on current guidance and are subject to change as we learn more about COVID-19 and how it is spread.

FIGURE 1. FLOWCHART FOR SYMPTOMATIC INDIVIDUALS (STUDENTS OR STAFF MEMBERS)

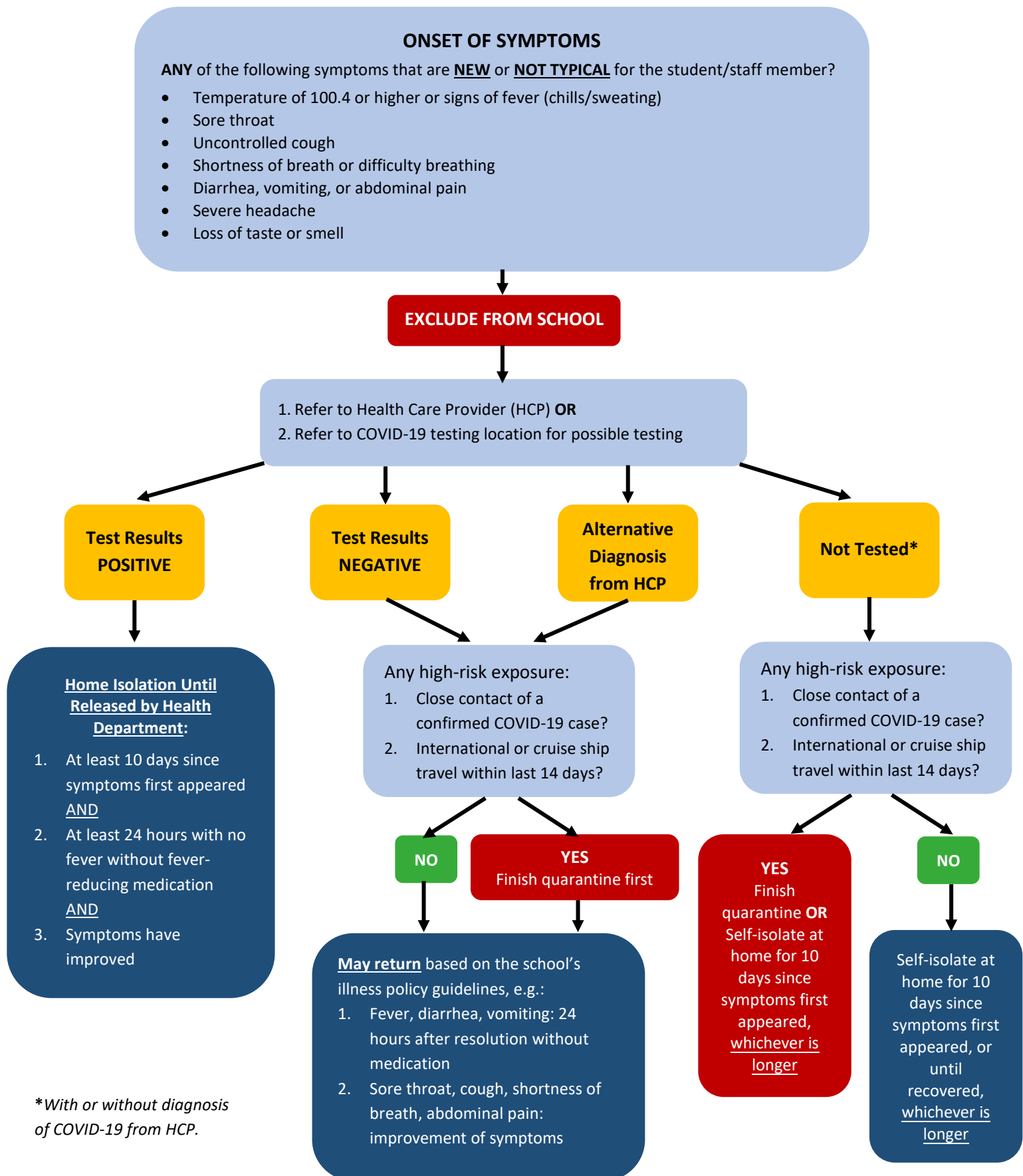


TABLE 1. STUDENT AND STAFF MEMBER SCENARIOS

STUDENT/STAFF PERSON IS CONFIRMED; SYMPTOMATIC ¹ ; PENDING TEST RESULTS; OR A CLOSE CONTACT			
Scenario 1	Scenario 2	Scenario 3	Scenario 4
A student/staff person is confirmed to have COVID-19	A student/staff person is symptomatic ¹ and lab results are pending	A student/staff person is symptomatic ¹ but without a COVID-19 test	A student/staff person is a close contact ³ to a COVID-19 case
<p>The student/staff person AND all household members of the student/staff person are immediately excluded from school.</p> <p>The COVID+ student/staff person must isolate at home. The student/staff person must be excluded from school until</p> <ul style="list-style-type: none"> 24 hours with no fever (without the use of fever-reducing medication) and Symptoms¹ have improved and 10 days since symptoms¹ first appeared and Released from isolation by the health department <p>Household members and the quarantined student/staff who are exposed close contacts^{2,3} are excluded for 14 days after their last date of close contact.</p>	<p>The student/staff person is excluded from school until results of the test are available.</p> <p>If test results are positive, see Scenario 1.</p> <p>If test results are negative and the ill student/staff person is a close contact to someone with COVID-19 or has high-risk travel², they must still finish their quarantine.</p> <p>If test results are negative and the ill student/staff person had no known exposure² to COVID-19, they may return in accordance with the school's illness policy⁴.</p> <p>Household members of the symptomatic person should quarantine at home while waiting for test results.</p> <p>Other close contacts with no other history of COVID-19 exposure² do not need to be excluded from school while waiting for test results. If they develop symptoms, they should call their medical provider to be tested for COVID-19.</p>	<p>If there is KNOWN COVID-19 EXPOSURE,² exclude from school for whichever is longer of the below actions. If NO KNOWN EXPOSURE,² then only follow the second action:</p> <ul style="list-style-type: none"> Self-quarantine for 14 days from the last known exposure OR 24 hours fever-free (without the use of fever-reducing medication) and symptoms have improved and 10 days since symptoms first appeared <p>Household members of the student/staff person may need to be excluded from school. Consult with the health department.</p> <p>STUDENT/STAFF PERSON HAS AN ALTERNATIVE DIAGNOSIS FROM HEALTH CARE PROVIDER²:</p> <p>They may return to school in accordance with the school's illness policy, e.g.:⁴</p> <ul style="list-style-type: none"> Fever, diarrhea, vomiting: 24 hours after resolution without medication Sore throat, cough, shortness of breath, abdominal pain: improvement of symptoms 	<p>The student/staff person must quarantine for 14 days since last date of exposure². If a close contact has a negative COVID-19 test during this time, the duration of quarantine is still 14 days from exposure.</p> <p>Household members, classmates, and coworkers of the quarantined student/staff person may continue to attend school and should monitor for symptoms. If symptoms¹ develop, they should call their medical provider to be tested for COVID-19.</p>

TABLE 2. HOUSEHOLD MEMBERS OF STUDENTS AND STAFF

THE HOUSEHOLD MEMBER OF A STUDENT/STAFF PERSON IS CONFIRMED; SYMPTOMATIC¹ & PENDING TEST RESULTS; OR A CLOSE CONTACT³

Scenario 1	Scenario 2	Scenario 3
Household member of a student/staff person has COVID-19	Household member of a student/staff person is symptomatic ¹ , pending results, and has known COVID-19 exposure ²	Household member of a student/staff person is a close contact ³ to a COVID-19 case
Students/staff who live in the same house as a COVID-19 case are excluded from school while the household member is in isolation (10 days). The student/staff person must quarantine for 14 days after the positive case is released from isolation.	Students/staff 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/staff person may be able to return to school, unless household member is determined to be a probable case of COVID-19. Consult with the health department COVID-19 investigation team.	Student/staff person can remain in school but should monitor for symptoms. They do not need to be excluded from school. If COVID-19 symptoms ¹ develop in the household member, student/staff person should be excluded from school, and should be treated as in Scenario 2, pending results.

¹ Symptoms (should be new or not typical for the person): fever or feeling feverish, cough, shortness of breath/difficulty breathing, sore throat, diarrhea, vomiting, abdominal pain, severe headache, loss of taste or smell.

² Exposure questions: During the past 14 days 1. Had close contact (within 6 feet for at least 15 non-consecutive minutes) with a person with confirmed COVID-19; OR 2. Had close contact (within 6 feet of an infected person for at least non-consecutive 15 minutes) with person under quarantine for possible exposure to COVID-19; OR 3. History of international or cruise ship travel.

³ Close contact with a COVID-19 case is defined as being within 6 feet for at least 15 minutes (does not have to be consecutive minutes), with or without a face covering. The risk of spread is lowest when both the contagious individual and the potential close contacts keep their nose and mouth covered, but it is not eliminated. Therefore, high levels of face covering use help minimize the number of COVID-19 cases in a school, but may not reduce the number of people who are considered close contacts for quarantine, if a case is identified. Public health may deviate from standard close contact definitions. Such exceptions would be unique, and applied when exposure circumstances are unusual or the exposed population is highly susceptible.

⁴ Many schools base their illness policy on the MDHHS [Managing Communicable Diseases in Schools](#) guidebook.

COVID-19 FACT SHEET FOR SCHOOL AND PARENT USE

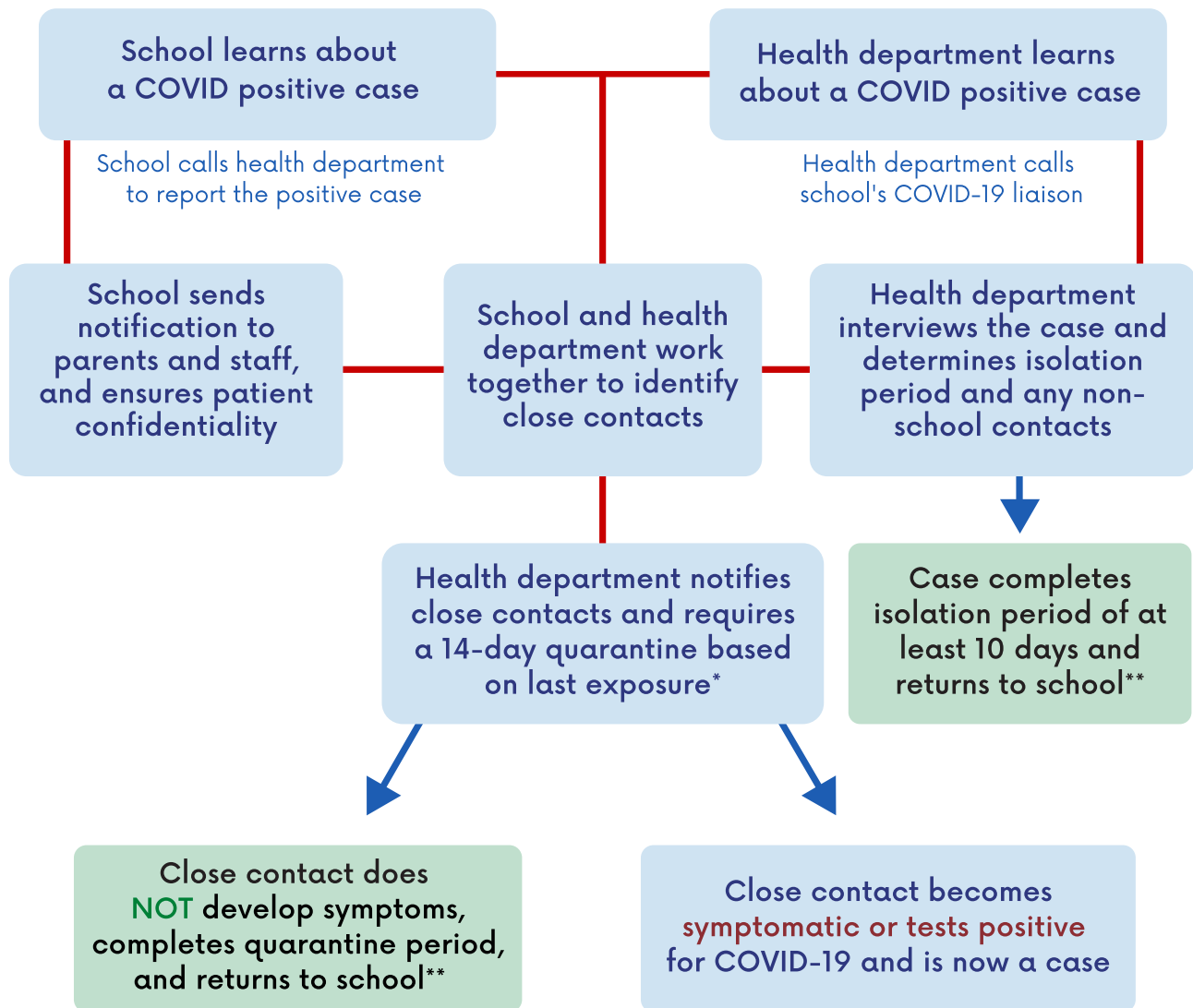
The following 2-page infographic fact sheet offers a broad overview of the health department's process regarding COVID-19 case and contact tracing specific to students and staff members of schools and is intended for use by both school staff and parents/guardians. The flowchart and tables in the previous section on page 7 through 9, while providing some of the same information in the infographic fact sheet, provides more detail about the local health department's process and strongly recommended guidance for schools regarding symptomatic COVID-19 cases and the members of their household that may also be students or staff members of an area school.

Overview Guide for Schools

COVID-19 PREVENTION & RESPONSE



What happens when someone at school gets COVID-19?



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

**The health department will issue an official letter or other documentation to release a person from isolation or quarantine. Schools must use this letter to determine when to allow return to school.



ISOLATION is for people who are already sick. Isolation separates and restricts sick people so they can't spread the disease to healthy people.

QUARANTINE is for people who are not sick but may have been exposed. Quarantined people may or may not become sick.

Who must stay home or will be sent home?



Anyone in isolation or quarantine for COVID-19.



Anyone who has symptoms of COVID-19.

- Temperature 100.4 or signs of fever (chills/sweating)
- Sore throat
- New or worsening cough*
- Difficulty breathing
- Diarrhea, vomiting, or abdominal pain
- New onset of severe headache
- New onset loss of taste or smell

**CDC: New uncontrolled cough that causes difficulty breathing*



Anyone who is considered a close contact that had a potential exposure within the last 14 days.

- A person who was within 6 feet for at least 15 minutes of a confirmed COVID-19 case or someone under quarantine for possible exposure to COVID-19.
- Public health authorities may determine that distances beyond 6 feet or less than 15 minutes can still result in high-risk exposures based on other considerations and circumstances in each particular case.
- A person who had International or cruise ship travel within last 14 days.

If excluded, you may not return to school or any school activity until authorized by public health. For a medical evaluation and/or COVID-19 testing, contact your health care provider or call 2-1-1 for resources.

How long do they have to stay home and out of school?



If symptomatic AND tests positive for COVID-19 OR has risk for exposure but no testing (or results are pending), stay home:

- for at least 10 days from the first day symptoms started
- and until no fever and other symptoms have improved for at least 24 hours.



If symptomatic BUT has no known risk for exposure OR tests negative for COVID-19, stay home:

- until no fever, without the use of fever-reducing medications, for 24 hours
- and other symptoms have improved for at least 24 hours.



If no symptoms BUT has risk for exposure to COVID-19, stay home:

- for at least 14 days based on last exposure.



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



If someone is awaiting test results, their household members must stay home until results are in.



Classmates, and other close contacts of a symptomatic but undiagnosed person, or a quarantined person may continue to attend school and should monitor for symptoms. They do not need to be excluded from school.



miOttawa Department of
Public Health

Lisa Stefanovsky, M.Ed.
Health Officer

Paul Heidel, M.D., M.P.H.
Medical Director

Date: _____

Dear Parent of _____

This letter is to inform you that an individual from _____ was recently diagnosed with COVID-19 and is currently at home in isolation. The Ottawa County Department of Public Health (OCDPH) has investigated the situation and all close contacts are being notified through a separate letter and will be home in quarantine.

Due to widespread infections with COVID-19 within our community, the OCDPH recommends parents continue to assess their children prior to leaving home. Symptoms to be watching for are (new/different/worse from baseline of any chronic illness):

1. Temperature 100.4 or higher signs of fever (chills/sweating)
2. Sore throat
3. Uncontrolled cough
4. Difficulty breathing or shortness of breath
5. Diarrhea, vomiting, or abdominal pain
6. Severe headache
7. Loss of taste or smell

It is recommended that your child be tested for COVID-19 if they get any of these symptoms. You can call 2-1-1 or go to www.michigan.gov/coronavirustest for testing locations. For more information on testing or COVID-19 you may also go to www.miottawa.org/Health/OCHD/coronavirus.

If you have any further questions please contact the Ottawa County Health Department at PHReponse@miottawa.org.

Sincerely,

Paul A. Heidel MD, MPH

COVID-19 School Staff Health Screening

School Name: _____

Employee: _____ Date: _____

Time In: _____

1. In the past 24 hours, have you developed any of the following symptoms that are **new** or **not typical for you**:

Subjective fever (felt feverish):	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Measured fever, 100.4F or higher:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Uncontrolled cough:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Shortness of breath or difficulty breathing:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Vomiting	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Diarrhea and/or abdominal pain	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Severe headache	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Loss of taste or smell	<input type="checkbox"/> Yes	<input type="checkbox"/> No

If you answer **YES** to any of these symptoms, notify your school and please do not go into work. Self-isolate at home and contact your medical provider for direction and possible COVID-19 testing.

- You should isolate at home for a minimum of 10 days since symptoms first appear or per guidance of your local health department.
- In addition to a minimum of 10 days of isolation, you must also be fever-free for at least 24 hours and had improvement in symptoms to return to school.
- If your medical provider diagnoses something other than COVID-19, or your test is negative, you may return to school once you are recovered from your symptoms and are free of fever, diarrhea and vomiting for 24 hours.

2. In the past 14 days, have you:

Had close contact with an individual diagnosed with COVID-19?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Had a public health or medical professional tell you to self-isolate or self-quarantine because of concerns about COVID-19 infection?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Traveled internationally or been on a cruise?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

If you answer **YES** to any of these exposure questions, notify your school and please do not go into work. Self-quarantine at home for 14 days. Contact your medical provider's office for evaluation and possible testing if you have symptoms.

Signature: _____ Date: _____

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

COVID-19 SCHOOL HEALTH SCREENING AGREEMENT

Instructions for Parents/Guardians

For the health and safety of our students, the local public health department recommends students be screened for symptoms of COVID-19 before entering the school. Because of the delay and disruption this would cause in a school environment, the health department and the CDC do not recommend these screenings be done by schools.

We ask that you complete the steps of the student screening on the next page, prior to sending your child to school each day and before any school activities or sports. Below, please indicate 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 by public health authorities. I also understand that it is my responsibility to promptly notify [*THE SCHOOL*] if my child is not going to school due to potential COVID-19 symptoms or any high-risk exposures to COVID-19.

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: _____

Student Screening

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

SYMPTOMS – NEW OR NOT TYPICAL FOR THE CHILD

- ☐ Temperature of 100.4 or higher or signs of fever (chills/sweating)
- ☐ Sore throat
- ☐ Uncontrolled cough (for students with chronic allergic/asthmatic cough, a change in their cough from baseline)
- ☐ Shortness of breath or difficulty breathing
- ☐ Diarrhea, vomiting, or abdominal pain
- ☐ Severe headache
- ☐ Loss of taste or smell

If the answer is **YES** to any of the symptom questions, notify the school and keep the student home from school. Self-isolate at home and contact your child's medical provider for direction and possible COVID-19 testing.

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 a public health or medical professional tell them to self-isolate or self-quarantine because of concerns about COVID-19 infection; OR
- ☐ Traveled internationally or on a cruise ship

If the answer is **YES** to any close contact/potential exposure questions, notify the school and please keep your child home. You should quarantine your child at home for 14 days and monitor for symptoms. Contact your medical provider's office for evaluation and possible testing if your child develops symptoms. You may also be contacted by the health department, so please respond to their call.

For information on local COVID-19 testing sites, call 2-1-1 or visit either www.michigan.gov/coronavirustest or [Ottawa County COVID-19 Testing Locations](#).

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

PLEASE COMPLETE TOP SECTION BEFORE GIVING IT TO YOUR HEALTHCARE PROVIDER

Student/School Staff Name: _____

Date of Birth: _____

School Name: _____

The above-named individual requires documentation from a medical or osteopathic doctor that they are unable to wear a face covering during the 2020-2021 school year due to a medical condition. Schools are required to obtain this documentation as they are with any other accommodation*. We appreciate your time and assistance in this matter.

The above-named individual **cannot** medically tolerate a face covering due to the following medical condition:

If unable to medically tolerate a face covering, this student/staff member **is able** to use a face shield:

_____ Yes

_____ No

_____ If No, why not: _____

Medical/Osteopathic Physician's name and licensure: _____

Signature: _____

Date: _____

Phone Number: _____

I hereby agree with and authorize any restrictions or limitations described above pertaining to my child or ward.

Parent or Guardian Signature: _____

*This list of acceptable conditions along with the guidance for schools to require this documentation from a medical professional has been provided by the state of Michigan and can be found at https://www.michigan.gov/coronavirus/0,9753,7-406-98178_98455-535121--,00.html.

CONTACT TRACING

[Contact Tracing](#) is a public health tool that is used to help stop the spread of certain communicable diseases. For schools, it involves identifying others that may have had recent close contact* with a person confirmed to have the virus and giving that information to the local public health department. The local public health department will provide guidance on how to stay safe, protect others, and quarantine 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 contagious two days before they have any symptoms, so unless they are kept separated from other people, they could spread COVID-19 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 Ottawa County Department of Public Health is developing a process for schools to report identified contacts to Public Health using information sheets that are filled out electronically (e.g. Excel sheets). Information that may be requested includes but is not limited to: student name, student date of birth, student home address, student grade, student homeroom teacher, parent/guardian name, and parent/guardian phone number.

*Close contact is someone being within 6 feet (about 2 arms' length) of an infected person for at least 15 minutes (consider cumulative time within a 24-hour period, at minimum), with or without a face mask. Public health may deviate from standard close contact definitions. Such exceptions would be unique, and applied when exposure circumstances are unusual or the exposed population is highly susceptible.