COVID-19 RETURN TO SCHOOL TOOLKIT
PROVIDED BY
LENAWEE COUNTY HEALTH DEPARTMENT

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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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Appendix A Employee Screening Form
Appendix B Student Screening Agreement and Form
Appendix C Infographics (still to come)
Appendix D Contact Tracing Form
COVID-19 School Checklist

Follow the instructions of the [MI SAFE SCHOOLS: Michigan’s 2020-2021 Return to School Roadmap](https://www.michigan.gov/safeschools) for the Phase your region is in. As of July 27, 2020, Lenawee County is in phase 4.

COVID-19 Screening

For School Staff and Administration

Per [EO 2020-145](https://www.michigan.gov/orders/), all staff and contractors must complete a daily self-screening, including at a minimum, a temperature check, and a questionnaire covering symptoms and suspected or confirmed exposure to people with possible COVID-19. It is recommended that volunteers complete the screening as well.

A hard copy of an example workplace-screening tool is found in Appendix A. This also provides direction on action to take should the person answer yes to any of the screening questions.

You can also use a virtual screener. One option from the state is [https://misymptomapp.state.mi.us/login](https://misymptomapp.state.mi.us/login). Creating a Google form is another option.

For Students

All students should be screened at the start of the day. This should be conducted by parents every morning before the child leaves home.

The screening must include:

- a temperature check,
- questions regarding COVID-19 symptoms (new cough, shortness of breath, fatigue, fever of 100.4 or higher, chills, muscle aches or body aches, headache, sore throat, congestion or runny nose, new loss of smell/taste, nausea or vomiting, diarrhea),
- recent contact with a COVID-19 positive case,
- international travel (must quarantine for 14 days upon return)

If the answer is **YES** to any of these questions, parents should keep their child(ren) home from school. They should call the school to let them know why their child will be absent. If they are symptomatic or if they have had contact with a COVID-19 individual, they should also call their healthcare provider right away to determine if testing is indicated. If they do not have a healthcare provider, they may contact the Lenawee County Health Department at (517) 264-5226, Option 5 to speak with a Public Health Nurse (Monday – Friday 8:00am – 4:30pm).

A screening form with more details can be found in Appendix B.

Options to conduct the screening may include:

- having the parents complete a paper form at home.
- having the parents use an online tracker such as the MI Symptoms [app](https://misymptomapp.state.mi.us/login).
- Creating a Google form is another option.

It is recommended to set up an agreement ([Appendix B](https://www.michigan.gov/safeschools)) with parents outlining the responsibility of the parent and the responsibility of the school.
Cloth Face Coverings Help Prevent the Spread of COVID-19

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

A. All staff and all students in grades pre-K and up when on a school bus.
B. All staff and all students in grades pre-kindergarten and up when in indoor hallways and common areas.
C. All staff when in classrooms.
D. All students in grades 6 and up when in classrooms.
E. All students in grades kindergarten through 5 unless students remain with their classes throughout the school day and do not come into close contact with students in another class.

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 requirements.

<table>
<thead>
<tr>
<th>Chance of Transmission</th>
<th>Asymptomatic COVID-19 Carrier</th>
<th>Uninfected Person</th>
</tr>
</thead>
<tbody>
<tr>
<td>HIGHEST</td>
<td>![Asymptomatic Carrier]</td>
<td>![Uninfected Person]</td>
</tr>
<tr>
<td>HIGH</td>
<td>![Asymptomatic Carrier]</td>
<td>![Uninfected Person]</td>
</tr>
<tr>
<td>MEDIUM</td>
<td>![Asymptomatic Carrier]</td>
<td>![Uninfected Person]</td>
</tr>
<tr>
<td>LOW</td>
<td>![Asymptomatic Carrier]</td>
<td>![Uninfected Person]</td>
</tr>
<tr>
<td>LOWEST</td>
<td>![Asymptomatic Carrier]</td>
<td>![Uninfected Person]</td>
</tr>
</tbody>
</table>

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. Our goals are to ensure that the benefits of in-person education far 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.

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**Gatherings, Visitors, and Field Trips**

- Pursue virtual group events, gatherings, or meetings, rather than in-person events. Promote social distancing of at least 6 feet between people and limit group size for in-person events.
- Limit any 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 minimizes the risk of transmission of COVID-19 to players, families, coaches, and communities.

**Identifying Small Groups and Keeping Them Together (Cohorting)**

While keeping students 6 feet from one another is one of the preferred mitigation strategies, it may be difficult to achieve in the school setting. If this is the case, schools can cohort students and staff. Another important tool to help contain the spread of COVID-19 in schools, cohorting means keeping a group students and staff together while minimizing contact with those not in the cohort. Cohorts are important because they 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, and 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 other protocols in place 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 local health department learn of a student or staff member diagnosed with COVID-19

If you become aware of a case of COVID-19 in a student of staff member, notify the health department right away. Likewise, the health department will notify your contact person if 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 for 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?*

In general, a close contact for COVID-19 is most often someone that has been within 6 feet (about 2 arms’ length) of an infected person for at least 15 minutes.
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 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**: 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 and 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 and 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 bathroom or an office, 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. Visitor logs, attendance records (both school and sports), and rosters of staff in the building would also be important for contact tracing.

**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, 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.

**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.
Contact Tracing
The Lenawee County Health Department and the school will work together to identify all contacts of a COVID-19 case. The school will be responsible for notifying any school contacts of the need to quarantine. The school will forward the name, birthdate, phone number and email address for the school contacts to the health department. The health department will interview the COVID positive individual to determine any out-of-school contacts. Appendix D can be utilized to document contacts.

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.
School Scenarios with Action Steps

<table>
<thead>
<tr>
<th>Scenario 1: A student/staff person within the school is confirmed to have COVID-19 (tests positive for COVID-19 with a nasal/throat swab).</th>
<th>Scenario 2: A student/staff person within the school is symptomatic and lab result for COVID-19 are pending.</th>
<th>Scenario 3: A student/staff person within the school is symptomatic and no testing for COVID-19 is done.</th>
<th>Scenario 4: A student/staff person within the school is a close contact to a confirmed COVID-19 case.</th>
</tr>
</thead>
</table>
| 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 and  
• 10 days since symptoms first appeared.  
Household members and the quarantined student/staff person who are close contacts are excluded for 14 days after their last date of close contact. | The student/staff person is excluded from school until the results of the test are negative. If the test returns positive, see scenario 1. If negative and they were exposed to someone with COVID-19 within the past 14 days, follow scenario 1 (treat as though the test could be a false-negative). If negative, and no known exposure to COVID-19, the student/staff person may return based on the guidance for their predominant symptoms (see "Managing Communicable Diseases in Schools"). Household members and student/staff person who are close contacts: if the individual had close contact with a pending case with no history of COVID-19 exposure (prior to lab results) should be monitored for symptoms while waiting for test results. They do not need to be excluded from school. If symptoms develop, they should call their medical provider to be tested for COVID-19. | The student/staff person is excluded from school until:  
• 24 hours with no fever (without the use of fever-reducing medication) and  
• Symptoms have improved and  
• 10 days since symptoms first appeared. OR  
Their health care provider provided them with an alternative diagnoses for their symptoms. The student/staff person may return based on the guidance for their diagnosis/predominate symptoms (see “Managing Communicable Diseases in Schools”). Household members and student/staff person who are close contacts: if the individual had close contact with a confirmed case of COVID-19 and suspicion for COVID-19 are high, they may need to be excluded from school. Consult with your health department. Otherwise, household members and student/staff person who are close contacts do not need to be excluded from school. If symptoms develop, they should call their medical provider to be tested for COVID-19. | 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. They do not need to be excluded from school. If symptoms develop, they should call their medical provider to be tested for COVID-19. |
**Household member of a student within the school is confirmed or symptomatic pending results or a close contact.**

<table>
<thead>
<tr>
<th>Scenario 1:</th>
<th>Scenario 2:</th>
<th>Scenario 3:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Household member of a student within the school has been confirmed to have COVID-19.</td>
<td>Household member of a student within the school is symptomatic, pending results, and has had close contact with a known case.</td>
<td>Household member of a student within the school has had close contact to a known case of COVID-19.</td>
</tr>
<tr>
<td>Students who live in the same house as the COVID-19 positive person are excluded from school while the household member is in isolation (10 days). The student must quarantine for 14 days after the last date of close contact while they are contagious.</td>
<td>Students who live in the same household of the family member are excluded from school until test results are in. If the household member is positive, see scenario 1. If the household member is negative, student may be able to return to school unless household member is determined to be a probable case of COVID-19.</td>
<td>Student can remain in school but should be monitored. They do not need to be excluded from school. If COVID-19 symptoms develop in the household member, students should be excluded from school, and should be treated as in Scenario 1 pending results.</td>
</tr>
</tbody>
</table>

How Does COVID-19 Spread?

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

**Droplets**

Droplets are small particles that enter the air when we cough, sneeze, laugh, yell, sing, and talk. They are little flecks of spit. Droplets tend to settle out of the air after traveling several feet from the person that released them. Droplets can also spread directly by kissing or sharing personal items like drinks, vape pens, silverware, or other things that go from one person’s mouth to another. We can reduce the spread of droplets from one person to another 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 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 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 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.
How Do We Get Infected With COVID-19?

Whether or not you become infected with COVID-19 depends on many factors including the intensity of exposure, frequency of exposure, and duration of exposure to someone with COVID-19. These factors, in addition to your personal health and your age, help determine whether or not you become infected.

**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? Some situations can cause you to be exposed to 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 lead to an infection.

**Duration of Exposure**
The duration of exposure refers to how long you were 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, i.e. the strength of your immune system, 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**
We are still learning about children and transmission of COVID-19. Current studies seem to indicate that children age 10 and older are likely to spread the virus to others.

**When to Stay Home and When Student Will Be Sent Home**
Students and staff should not go to school or any school activities or sports if they are having symptoms of COVID-19. If they start having symptoms of COVID-19 while at school, they will need to be sent home. Symptoms are listed on the CDC website at [https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html](https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html) and include:

- Fever or chills
- New Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

The symptoms of COVID-19 are subject to change based on the latest research available.

The parent or guardian of the student will be instructed to call their health care provider. If they do not have a healthcare provider, they may contact the Lenawee County Health Department at (517) 264-5226, Option 5 to speak...
with a Public Health Nurse (Monday – Friday 8:00am – 4:30pm). Staff with symptoms of COVID-19 will also be advised to follow up with their healthcare provider to see if testing for COVID-19 is indicated.

We know that there is overlap between the list of symptoms associated with COVID-19 and other common causes, including seasonal allergies. Students or staff with pre-existing health conditions that present with specific COVID-19 – like symptoms such as seasonal allergies may not need to be excluded, if a health care provider has evaluated them and determined the symptoms are not due to COVID-19. However, if these symptoms are worsening or changing, the student or staff member may still be required to be excluded and not return until re-evaluated or tested. There have been many cases of COVID-19 that seemed to be nothing more than worsening allergies.

**If the findings from the health care provider and testing find:**

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

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

**Child or staff has symptoms of COVID-19 and no testing for COVID-19 was done:**

- Keep out of school until it has been at least 10 days from the first day they had symptoms AND they have had 24 hours with no fever and have improving symptoms, OR
- They may return to school if their health care provider diagnoses them with another cause for their symptoms (e.g., urinary tract infection, strep throat, allergies) and presents a note from the provider.
  - They may return based on the guidance for their diagnosis (see “Managing Communicable Diseases in Schools”).

**Child or staff has symptoms of COVID-19 and tests negative for COVID-19*:**

- If they were exposed to COVID-19 within past 14 days: Keep out of school until it has been at least 10 days from the first day they had symptoms AND they have had 24 hours with no fever and have improving symptoms
- Otherwise, they may return based on the guidance for their symptoms (see “Managing Communicable Diseases in Schools”)
  *if they have symptoms, they must stay out of school until test results are available

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

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

See Appendix C for an infographic on the information found in this section.

**International Travel**

Since the COVID-19 transmission is still high at a global level, all international travelers should stay home for 14 days after returning from travel, monitor their health, and practice social distancing. Arrangements should be made to provide these students with remote learning.
**CDC Materials**

Many print resources are available on the CDC website. Listed below are a select few:

<table>
<thead>
<tr>
<th>Title</th>
<th>URL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Handwashing is your Superpower!</td>
<td><a href="https://www.cdc.gov/handwashing/posters.html">https://www.cdc.gov/handwashing/posters.html</a></td>
</tr>
<tr>
<td>Wash your Hands!</td>
<td><a href="https://www.cdc.gov/handwashing/posters.html">https://www.cdc.gov/handwashing/posters.html</a></td>
</tr>
<tr>
<td>Stop the Spread of Germs that can make you and others sick!</td>
<td><a href="https://www.cdc.gov/flu/pdf/protect/cdc_cough.pdf">https://www.cdc.gov/flu/pdf/protect/cdc_cough.pdf</a></td>
</tr>
<tr>
<td>Please Wear a Cloth Face Covering</td>
<td><a href="https://www.snohd.org/DocumentCenter/View/4210/Please-Wear-a-Cloth-Face-Cover?bidId=">https://www.snohd.org/DocumentCenter/View/4210/Please-Wear-a-Cloth-Face-Cover?bidId=</a></td>
</tr>
<tr>
<td>Symptoms of Coronavirus (COVID-19)</td>
<td><a href="https://www.cdc.gov/coronavirus/2019-ncov/communication/print-resources.html?Sort=Date%3A%3Adesc&amp;Search=symptoms">https://www.cdc.gov/coronavirus/2019-ncov/communication/print-resources.html?Sort=Date%3A%3Adesc&amp;Search=symptoms</a></td>
</tr>
<tr>
<td>Do it for Yourself and Your Friends (If you have or think you have COVID-19)</td>
<td><a href="https://www.cdc.gov/coronavirus/2019-ncov/downloads/Young-Mitigation-recommendations-resources-toolkit-COL.pdf">https://www.cdc.gov/coronavirus/2019-ncov/downloads/Young-Mitigation-recommendations-resources-toolkit-COL.pdf</a></td>
</tr>
<tr>
<td>VIDEO: How to Wear a Cloth Face Covering</td>
<td><a href="https://www.youtube.com/watch?v=dy9TzRvVWoA&amp;feature=youtube">https://www.youtube.com/watch?v=dy9TzRvVWoA&amp;feature=youtube</a></td>
</tr>
</tbody>
</table>
COVID-19 Workplace Health Screening

Company Name: ________________________________
Employee: ________________________________ Date: __________

In the last 24 hours, have you experienced the new onset of any of the following that are not due to another medical condition:

<table>
<thead>
<tr>
<th>Symptom</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Subjective fever (felt feverish)</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Chills</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>New cough</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Shortness of breath or difficulty breathing</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Fatigue</td>
<td>☐</td>
<td>☐</td>
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<tr>
<td>Muscle or body aches</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Headache</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>New loss of taste or smell</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Sore throat</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Congestion or runny nose</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Nausea or vomiting</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Diarrhea</td>
<td>☐</td>
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</tbody>
</table>

**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 above **OR** your temperature is **100.4°F or higher**, please do not go into work. Self-isolate at home and contact your primary care physician’s office for direction.

- You should isolate at home for minimum of 10 days since symptoms first appeared or per guidance of your local health department.
  - If diagnosed as a probable COVID-19 or test positive, call your local health department and make them aware of your diagnosis or testing status.
- You must also have 24 hours without a fever and improvement in symptoms.

In the past 14 days, have you:

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Had close contact with an individual diagnosed with COVID-19?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Traveled internationally?</td>
<td>☐</td>
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</tbody>
</table>

If you answer “yes” to either of these questions, please do not go into work. 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 and have read through all the above statements and ensure everything is accurate.

Signature: __________________________________________ Date: __________

For questions, visit [www.lenaweehealthdepartment.org](http://www.lenaweehealthdepartment.org). Contact the Lenawee County Health Department at 517-264-5226 option 5 or email lenaweehd@lenawee.mi.us.

July 24, 2020
COVID-19 School Health Screening Agreement

Instructions for Parents and/or Guardians

For the health and safety of our students, the local public health department requires students be screened daily for symptoms of COVID-19 and potential exposure to COVID-19, before entering the school.

We ask that you complete the student screening on the next page, which includes a temperature check, 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 due to potential COVID-19 symptoms.

I commit to screening my child daily ___________________________ for COVID-19 symptoms and exposure.

Parent(s)/ Guardian(s) Name: ____________________________________________________________

Address: ____________________________________________________________________________

Phone Number: _______________________________________________________________________

Parent or Guardian Signature: ____________________________________________________________

Date: __________________________

[The School] is committed to providing a safe environment for all students and staff. This includes assuring that each student is screened daily prior to entering the school. The school also commits to social distancing, mask wearing, regular disinfection, promotion of personal hygiene, and other activities recommended by the health department.
Student Screening

Please make sure you conduct the following screening with your child each morning before they go to school.

Symptoms

☐ Temperature 100.4 degrees Fahrenheit or higher when taken by mouth
☐ Chills
☐ New Cough
☐ Shortness of breath or difficulty breathing
☐ Fatigue
☐ Muscle or body aches
☐ Headache
☐ New loss of taste or smell
☐ Sore throat
☐ Congestion or runny nose
☐ Nausea or vomiting
☐ Diarrhea

Close Contact/Potential Exposure

☐ Had close contact (within 6 feet of an infected person for at least 15 minutes) with a person with confirmed COVID-19: OR
☐ Traveled internationally (must quarantine for 14 days upon return)

If the answer is YES to any of these questions, parents should keep their child(ren) home from school. They should call the school to let them know why their child will be absent. If they are symptomatic or if they have had contact with a COVID-19 individual, they should also call their healthcare provider right away to determine if testing is needed. If they do not have a healthcare provider, they may contact the Lenawee County Health Department at (517) 264-5226, Option 5 to speak with a Public Health Nurse (Monday – Friday 8:00am – 4:30pm).

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

Source: Centers for Disease Control and Prevention; Screening K-12 Students for Symptoms of COVID-19: Limitations and Considerations
Contact Tracing

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

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

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

<table>
<thead>
<tr>
<th><strong>Staff or student has a positive nasal/throat test.</strong></th>
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<tbody>
<tr>
<td><strong>For symptomatic cases</strong></td>
</tr>
<tr>
<td>Date Symptoms Started: ____ / ____ / ____</td>
</tr>
<tr>
<td>48 hours prior to this: ____ / ____ / ____</td>
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</table>

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

____ / ____ / ____ through ____ / ____ / ____

**Close Contacts* on those dates**

<table>
<thead>
<tr>
<th>Date</th>
<th>Contact</th>
<th>Phone Number</th>
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</table>

* 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.