



# Summary of Guidance for K-12 Schools

## Detroit Health Department

### January 2022

## Recommendations

This guidance involves responsive and layered prevention strategies to reduce the risk of COVID-19 transmission to students, staff, and the greater community. Local school districts should implement preventive strategies based on an ongoing assessment of:

1. [The current level of community transmission of COVID-19](#),
2. The current level of in-school transmission of COVID-19, and
3. The capacity of the school's facilities, staff, and resources.

Prevention strategies include staying home when sick, vaccination, consistent and correct mask use, physical distancing/cohorting, regular screening and testing when appropriate, ventilation, handwashing and respiratory etiquette, contact tracing and appropriate isolation and quarantine, cleaning and disinfecting.

School-based prevention strategies may change throughout the school year, particularly as COVID-19 transmission changes or we learn more about the virus and its impact locally.

Detroit Health Department (DHD) works with schools to monitor COVID-19 cases, local trends, and outbreaks, and to provide situation-specific guidance. DHD encourages schools to prioritize in-person instruction while implementing available preventive measures to reduce transmission.

## Requirements

Some things are required for schools:

- There is a CDC [order](#) that requires face coverings on school bus transportation.
- Positive COVID-19 cases (confirmed or probable) and symptomatic household members, whether vaccinated or not, must be excluded from school based on the [Michigan Public Health Code: 333.5201](#) and the [Michigan Administrative Code](#) (starting on p. 5).
- Case notification to the Health Department and contact tracing is required by the [Michigan Public Health Code](#).
- Schools must also follow the MDHHS Order [Reporting of Confirmed and Probable Cases at Schools](#), which requires schools to post data about case counts on their websites. In addition, standard school infectious disease policies mandate requiring students and staff to stay home when sick.

***Below guidance applies to students and staff/educators except where explicitly stated otherwise.***

## **Isolation**

For a laboratory-confirmed positive case, an isolation regiment of 5 days (from date of positive test or symptom onset date if symptom onset occurred after positive test) should be adhered to. This is with the understanding that the individual has been fever-free for 24 hours, and with no worsening symptoms. If fever is ongoing, or if any symptoms are worsening, isolation should be extended beyond the 5 days until receiving a negative test, or 24 hours after being fever free with no worsening symptoms. A retest (ideally rapid antigen test) should be used immediately after isolation. If positive the individual cannot leave isolation until receiving a negative test, or 24 hours without fever and no worsening symptoms. If originally asymptomatic, 5-day isolation should restart after onset of symptoms. A face mask (KN95/N95 respirator is ideal) should be used for an additional 5 days while indoors, in public (known as the Mask to Stay strategy).

### **Immunocompromised & severely ill**

Those who were recently severely ill with COVID-19, including those who were hospitalized, as well as the immunocompromised, should isolate for a MINIMUM of 10 days, and up to 20 days. Such individuals should refer to their healthcare provider for further guidance.

## **Exposure (Quarantine)**

### **Not fully vaccinated or boosted (if 18+ years old)**

For those who are not fully vaccinated + boosted (if 18+ y/o) the DHD recommends a 5-day quarantine period post last exposure. A rapid antigen retest is recommended immediately after quarantine. This is regardless of physical distance between exposed individuals (assuming a close contact), testing schedule, and masking. Between end of quarantine and day 10, the individual should wear a mask indoors in public, and continue to self-monitor for COVID-19 symptoms.

A “test to stay” strategy may be employed in lieu of this guidance.

### **Test to Stay**

Students are eligible for the “Test to Stay” (TTS) strategy if they:

- Are NOT fully vaccinated against COVID-19, AND
- Have been exposed according to the Detroit Health Department’s definition of a “close contact”, AND
- Are showing no COVID-19-like symptoms.

*(continued on next page)*

Test to Stay means a student can continue in-class learning (not extracurriculars) by:

- Testing via a rapid antigen test, prior to attending in-person class (testing does not need to be completed on weekends or holidays), every other day for a 6-calendar-day period after close contact/TTS enrollment.
  - A minimum of 3 tests must be conducted in this window, with the last occurring between days 5-6.

Tests must be conducted by trained staff (before entering a congregate setting) either onsite or offsite. If the test result is “positive”, the student should isolate immediately. No PCR confirmation is required. The “Mask to Stay” strategy should be employed for days 7-10. If testing resources are available Districts may choose to test daily for the 6-day period.

Note: Test to Stay is NOT eligible to unvaccinated household close contacts, if positive case cannot isolate while infectious, or staff/educators.

### **Fully vaccinated (+ boosted, if 18+ years old)**

Close contacts who are fully vaccinated + boosted (if 18+ y/o) and not showing COVID-19 symptoms should be tested (by PCR or antigen) 3-5 days (ideally 5 days) after their most recent exposure, at which point, if they test positive, they should isolate from the date of positive test or confirmed symptom onset date, whichever is earliest.

If they are showing COVID-19-like symptoms, and have not received a negative test result, they should isolate. For the first 3-5 days post-exposure, and unless having received a positive test, the close contact does not need to quarantine (this is not inclusive of immunocompromised individuals, which should quarantine). The close contact should, however, wear a mask indoors in public, and continue to self-monitor for COVID-19 symptoms for 10 days after the most recent exposure.

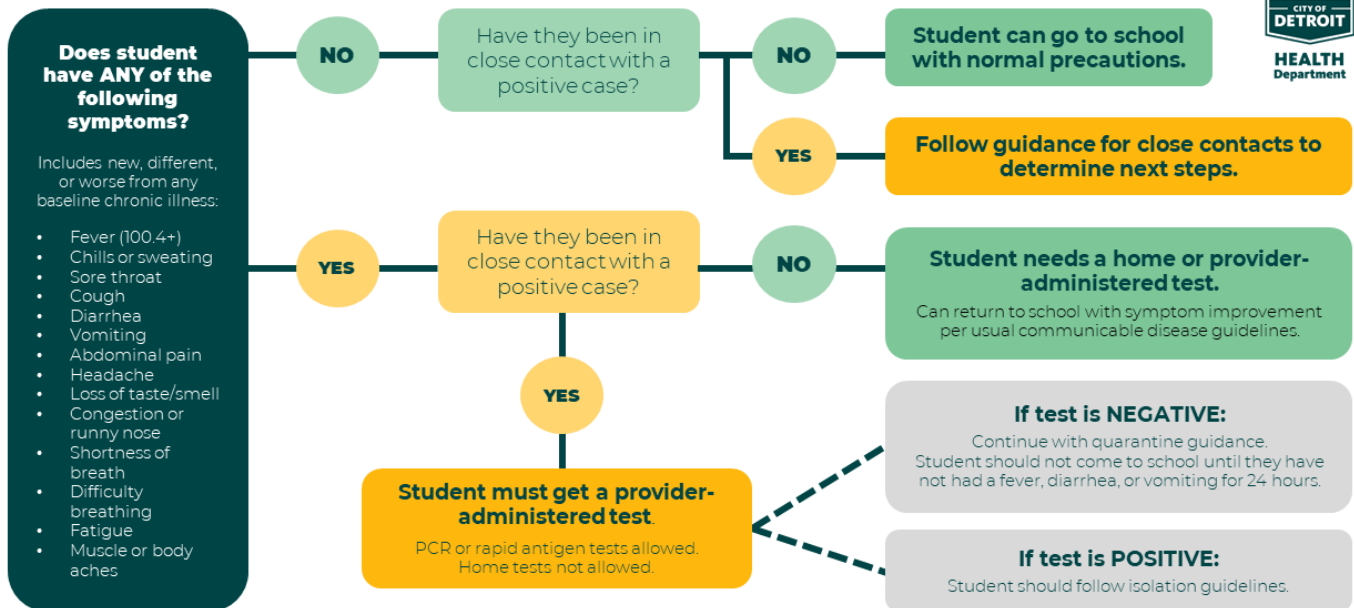
### **Verified “positive” in last 90 days**

An individual who has been verified as testing “positive” for COVID-19 by PCR within 90 days (from test date) does not need to quarantine if exposed as a “close contact” (this is not inclusive of immunocompromised individuals, which should quarantine), and is currently asymptomatic. The close contact should, however, wear a mask indoors in public, and continue to self-monitor for COVID-19 symptoms for 10 days after the most recent exposure.

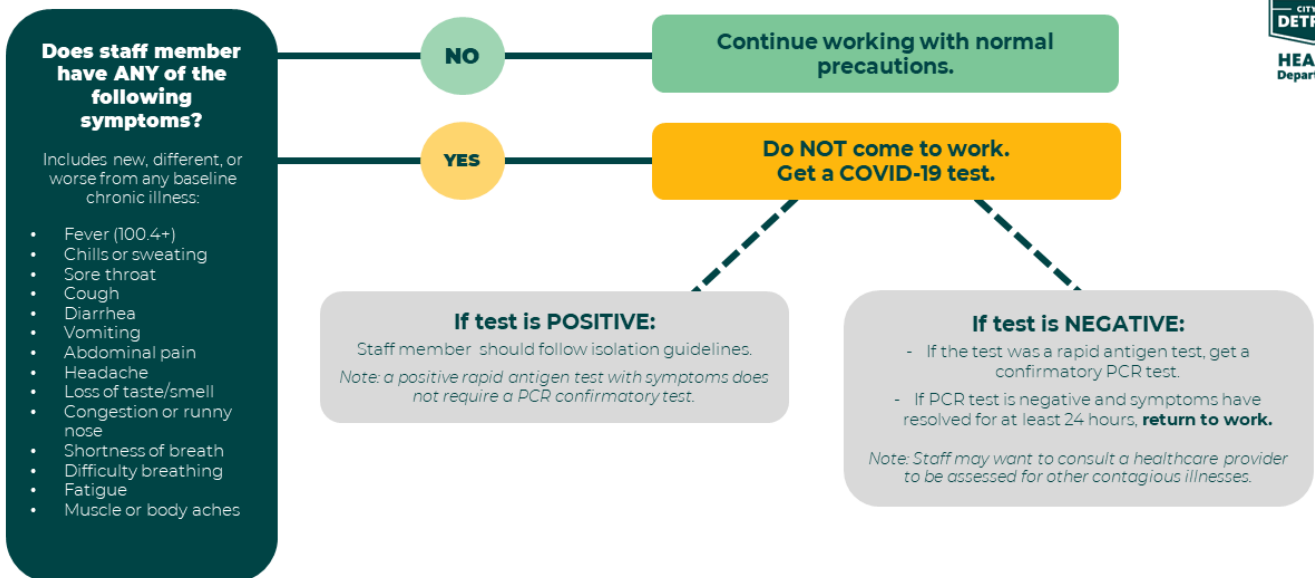
**See graphics on page 4 and 5 for decision trees and flowcharts regarding isolation and quarantine.**



## STUDENT COVID-19 Illness Decision Tree

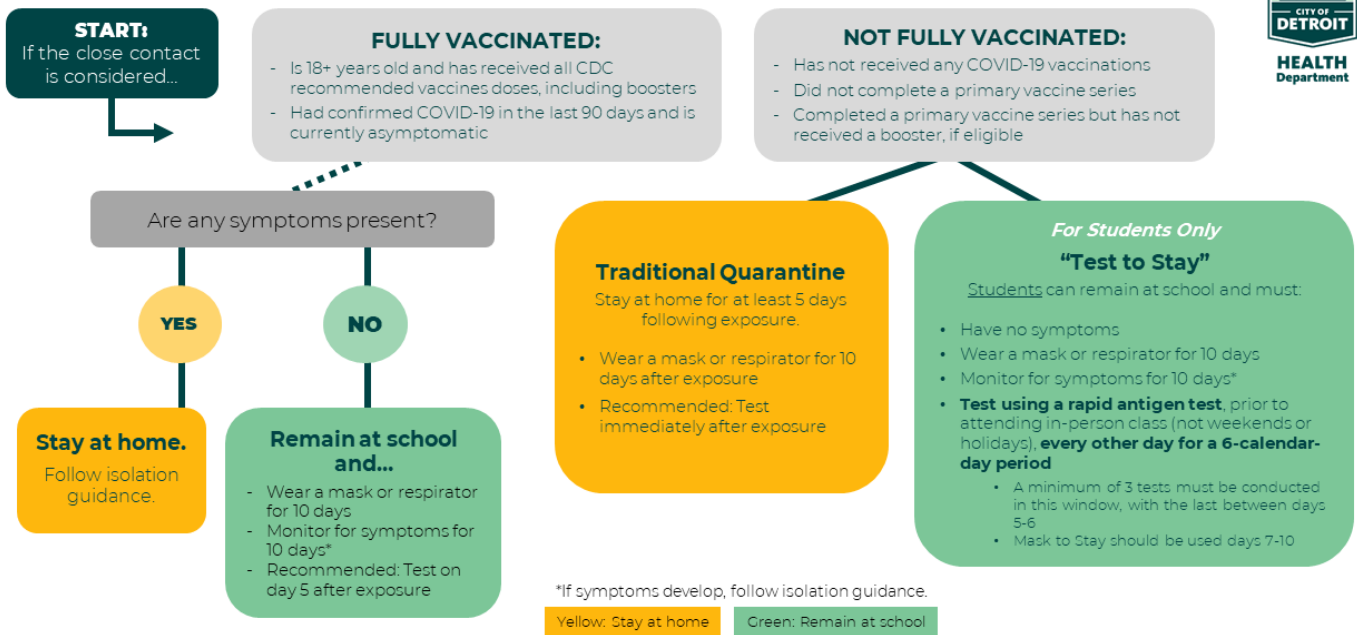


## STAFF COVID-19 Illness Decision Tree





## Quarantine Guidance for High-Risk Exposures



## Isolation Guidance: Timeline and Dates



SUN	MON	TUE	WED	THU	FRI	SAT
		Positive Test Date or Symptom Onset Date. <b>Start isolation.</b>				
Contagious Period Starts		Isolation Period				
Day -2	Day -1	Day 0	Day 1	Day 2	Day 3	Day 4
If no symptoms or symptoms are improving, <b>last day of isolation.</b>	<b>Return to school,</b> as long as symptoms are gone or improving.	Continue to wear a mask or respirator when around others*.				
Day 5	Day 6	Day 7	Day 8	Day 9	Day 10	Day 11

\*If you cannot wear a mask, continue to isolate until Day 11.

**DHD recommends taking a rapid antigen test on Day 5 to inform end of isolation as well.**

## Household Close Contacts

Household close contacts (exposure within 6 ft.) of individuals confirmed “positive” for COVID-19, if not fully vaccinated + boosted (if 18+ y/o), or with evidence of infection within 90 days through viral test, should quarantine immediately for a 5-day period, post last exposure.

If the positive case cannot isolate from household members, the quarantine period for those close contacts should begin on the last day of the positive case’s isolation. A retest is recommended immediately after quarantine. Between days 5-10, the individual should wear a mask indoors in public, and continue to self-monitor for COVID-19 symptoms.

For those who are fully vaccinated + boosted (if 18+ y/o), quarantine is not initially indicated. Nonetheless, testing should occur, ideally, after the household member with which the household contact resides, completes isolation.

## Contact Tracing

Contact tracing should include up to 2 days before positive test result date or confirmed symptom onset date (whichever is earliest). We recommend 6-ft distancing in all educational settings (with masking), however, 3ft (for a cumulative period of 15 minutes or more over a 24-hour period) is our definition of a “close contact” in ALL settings.

If a situation arises where there are numerous potential close contacts that cannot necessarily be confirmed as close contacts, but nonetheless cannot be verified as not being close contacts, then these individuals too should follow the above protocol.

If exposed in a lower-risk school setting no contact tracing is required. This includes most in-school contacts, including those in classrooms, buses, and most extracurricular activities. Send a general notification letter to the class or school that individuals should closely monitor symptoms for 10 days. If it is not specifically mentioned below, it can generally be considered a lower-risk setting.

If exposed in a higher-risk school setting (see list below) complete contact tracing across any setting.

- Lunchroom cafeteria
- High risk extracurriculars (e.g., basketball, ice hockey, competitive cheer, wrestling; unmasked theater, band, and choir):
- Classes or school events where masks are not/cannot be worn, e.g., special education classes where students cannot be masked
- Household close contacts of a positive case who cannot isolate
- Any declared outbreaks
- When an educator has been in school while infectious

Note: Quarantine should proceed according to the above guidance, regardless of risk setting of an exposure.

## Self-Contained Classrooms

Regarding the quarantine of a SELF-CONTAINED classroom, the Detroit Health Department strongly recommends to quarantine when:

1. There are greater than or equal to 6 confirmed COVID-19 cases for classrooms up to and including 30 individuals (students/teachers/aides, combined).
2. 20% of individuals (students/teachers/aides, combined) for classrooms greater than 30 individuals.
3. Classroom individuals may elect out of quarantine by engaging in a Test to Stay strategy, as described above.

Regarding the quarantine of a SELF-CONTAINED classroom, the Detroit Health Department feels that it would be appropriate to quarantine when:

1. There are greater than or equal to 3 confirmed COVID-19 cases for classrooms up to and including 30 individuals (students/teachers/aides, combined).
2. 10% of individuals (students/teachers/aides, combined) for classrooms greater than 30 individuals.
3. Classroom individuals may elect out of quarantine by engaging in a Test to Stay strategy, as described above.

If a classroom is not SELF-CONTAINED, the above guidance does not apply, and quarantine guidance should occur at the individual level, amongst “close contacts.”

## Masking

Indoor in public masking is recommended in all K-12 facilities for all individuals ages 2 years and older, including students, teachers, staff, and visitors, regardless of vaccination status.

KN95/N95 respirators should be highly encouraged. Surgical masks are acceptable. Cloth masks should be strongly discouraged.

## COVID-19 Vaccination

DHD recommends all eligible individuals get vaccinated against COVID-19 and boosted, if eligible. All eligible individuals who have had COVID-19 previously should still get vaccinated and boosted.

Find a vaccine clinic near you by visiting [www.vaccinatedetroit.com](http://www.vaccinatedetroit.com) or by calling us at 313-230-0505.

Request a vaccination event for your school using this [form](#). Local pharmacies and the Regional Alliance for Health Schools clinics are also offering vaccinations.

## School-sanctioned extracurricular activities while a facility is closed due to COVID-19

As a primary, **baseline** recommendation, the Detroit Health Department does not feel that all school-sanctioned extracurriculars necessarily need to be canceled due to a COVID-19 facility closure. However, in order to support this recommendation **ALL** of the following must be adhered to:

1. Spectators, regardless of vaccination status or testing schedule should be limited to 50% of fire marshal capacity.
  - a. 6 ft. distancing should be encouraged
  - b. Masks should be worn (K95/N95 respirators are strongly encouraged)
2. Only fully vaccinated + boosted (if 18+ y/o) players, coaching staff, and officiating staff should be permitted to participate, from all participating teams
3. Rapid antigen testing of all participating players, coaching staff, and officiating staff within 4 hours of the event, one at a time, in a secluded area (all teams) should be conducted
  - a. If a participant was to test positive on the first test (even if they retest a second or multiple times with negative result) they should not be permitted to participate.
4. Masks should be always worn by all participants except while actively drinking fluids (except for wrestling, competitive cheer, ice hockey, wrestling, swim & dive, basketball, and gymnastics---in these instances masks should be worn while on sidelines or not actively participating)
5. Gatherings of 2 or more individuals (team practice, training, etc.) should not occur for longer than 2 hours per day
6. All training/sporting equipment should be sanitized after every use
  - a. All cloth material and/or pads should be washed after every practice/sporting event
7. Teams should play/practice outdoors, when possible
8. Alternatives to team bussing should be provided, when possible
  - a. Bus capacity should be limited to 50%
  - b. Masks should be always worn when bussing
9. Hand sanitizer should be readily available
10. Disposable drinking vessels (i.e. no multiple-use water bottles) should be available
11. No extracurriculars should occur until the space in which they will be hosted has been deep cleaned, including bleachers, food stands, and contact points not within the facility proper.

Note: If an organization not associated with the educational facility is utilizing a facility space, they can continue without the above restrictions, after the space has been deep cleaned, and so long as this is not a joint meeting between a school group/team and the said external organization.

This is a **baseline** recommendation. Depending on various factors, the Detroit Health Department may suggest a closure of some or all school-sanctioned extracurriculars, depending on the contemporary epidemiology.



## Additional Recommendations

Taking these extra steps can further reduce risk of spreading COVID-19 to others.

- Be more cautious for a full 10 days. Limit being around others as much as possible.
- If often around vulnerable populations (e.g., immunocompromised students and staff) consider isolating for longer (a full 10 days).

## Testing Options

Some situations may specifically require a PCR test. A PCR test is needed when:

- Confirming a positive rapid antigen test result for someone who is asymptomatic (if necessary)
- Confirming a negative rapid antigen test result for someone who is symptomatic.
  - In this situation, another option is to have a medical evaluation to identify a different diagnosis other than COVID-19.

Some situations may specifically require a rapid antigen test. A rapid antigen test is needed when:

- Confirming that someone is no longer contagious on day 5 of isolation or later after having COVID-19. A PCR should not be used for 90 days after a COVID-19 diagnosis.
- A rapid antigen test is recommended for the Test to Stay strategy (students only).

Additional testing notes:

- Some situations require provider-administered tests. This means a test given by a healthcare provider or at school. At-home tests are not acceptable in these situations.

## Resources and Notes

Follow us on [Twitter](#), [Facebook](#), [Instagram](#) or go to [detroitmi.gov/health](https://detroitmi.gov/health) for the latest on COVID-19 in Detroit. Contact us at 313-876-4000 or [DHDOutbreak@detroitmi.gov](mailto:DHDOutbreak@detroitmi.gov) for questions.

Resource Links:

- [CDC COVID Data Tracker](#)
- [MI Safe Start Map](#)
- [MDHHS K-12 School Opening Guidance](#)
- [MI Safe Schools Testing Program](#)
- [Responding to COVID-19 Cases in K-12 Schools: Resources for School Administrators-](#)