



Summary of Guidance for K-12 Schools

Detroit Health Department

March 2022

Unless explicitly noted, the following guidance applies to both students and staff.

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 COVID-19 Community Level for the city of Detroit](#)
2. The current level of in-school transmission of COVID-19
3. The capacity of the school's facilities, staff, and resources

Potential prevention strategies include vaccination, consistent and correct mask usage, physical distancing/cohorting, regular screening, testing, ventilation, handwashing and respiratory etiquette, contact tracing, appropriate isolation and quarantine, cleaning/disinfecting, and education.

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.

The 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:

- 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 in higher-risk settings 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 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 (N95/KN95/KF94 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 and eligible)

For those who are not fully vaccinated + boosted (if 18+ y/o and eligible) 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

Individuals 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.

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

- Testing via a rapid antigen test, prior to (24 hours maximum) attending in-person class/work (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.

Fully vaccinated (+ boosted, if 18+ years old and eligible)

Close contacts who are fully vaccinated + boosted (if 18+ y/o and eligible) and not showing COVID-19 symptoms do not need to be tested or quarantined (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. If the individual is exhibiting COVID-19 symptoms, they should quarantine.

For booster shot eligibility, see: [COVID-19 Vaccine Booster Shots | CDC](#)

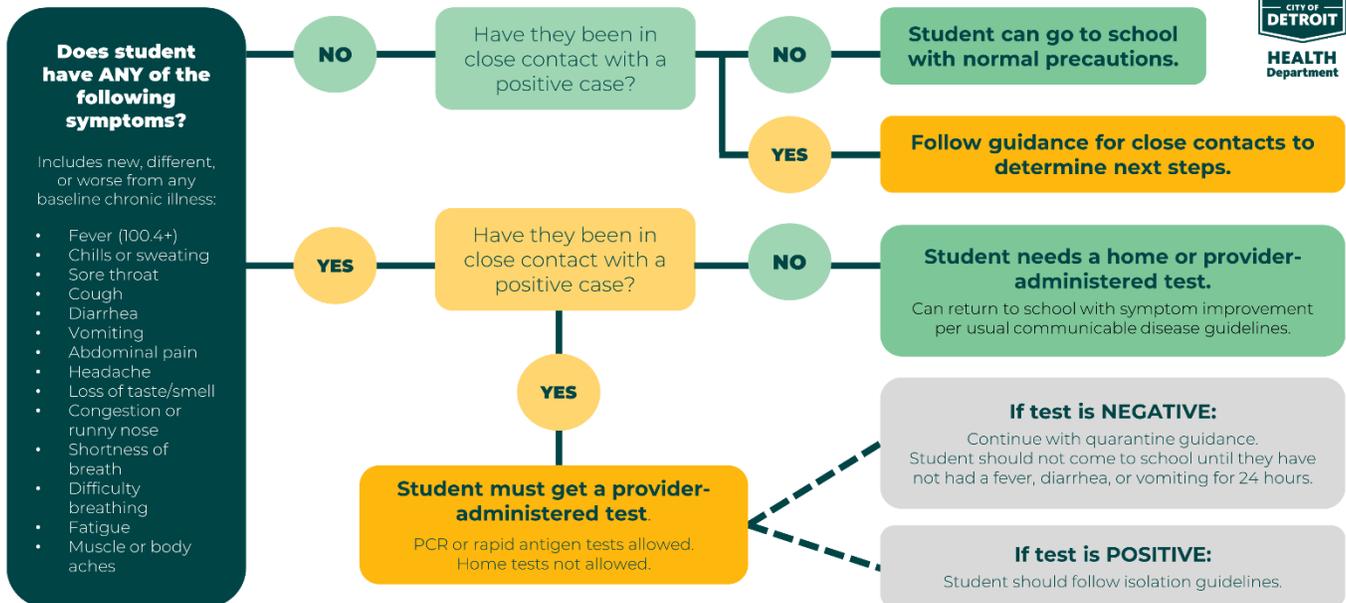
Verified “positive” in last 90 days

An individual who has been verified as testing “positive” for COVID-19 by PCR or rapid antigen test 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.

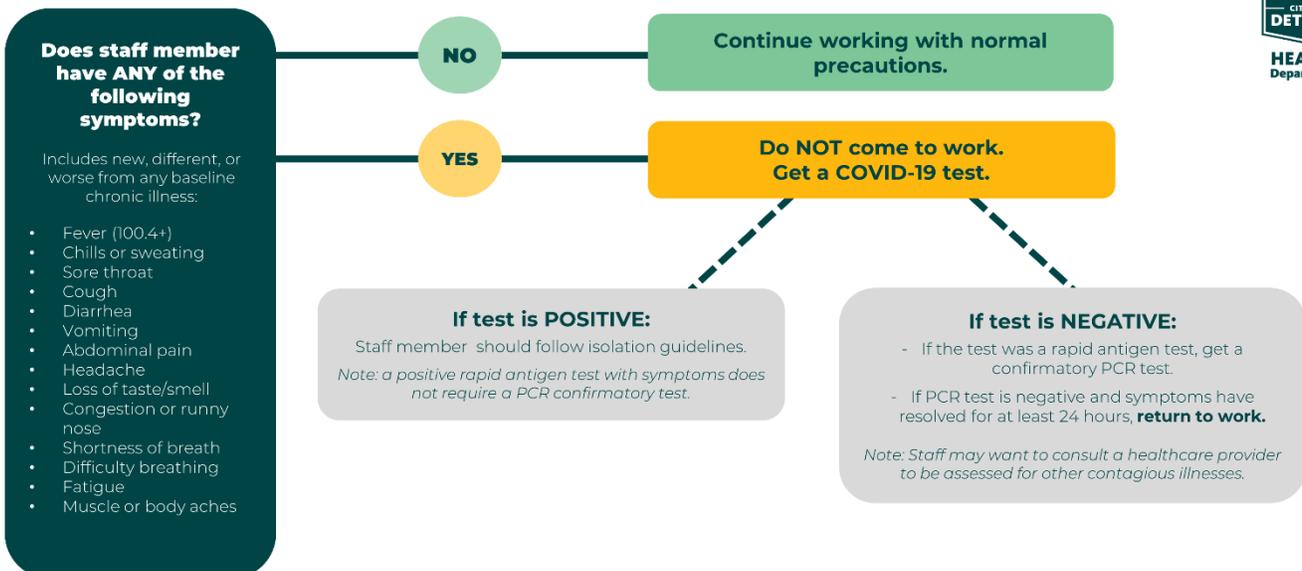
See graphics on pages 4 and 5 for decision trees and flowcharts regarding isolation and quarantine.



STUDENT COVID-19 Illness Decision Tree

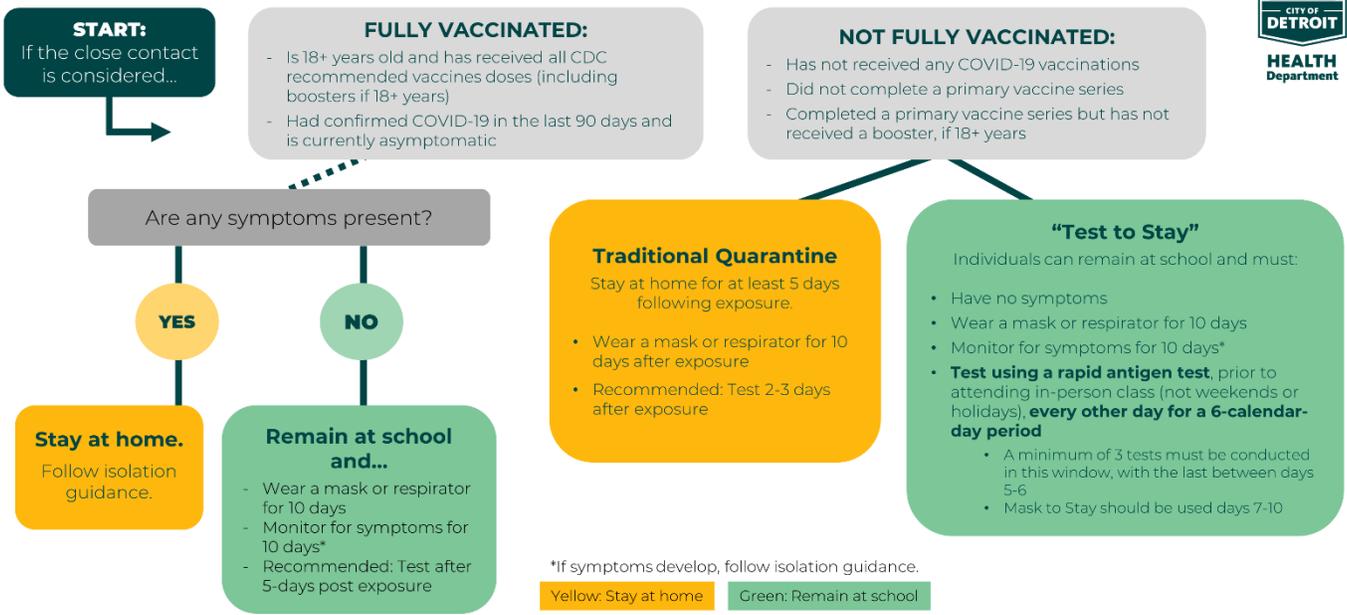


STAFF COVID-19 Illness Decision Tree





Quarantine Guidance for COVID-19 Exposures



Isolation Guidance: Timeline and Dates



SUN	MON	TUE	WED	THU	FRI	SAT
		Positive Test Date or Symptom Onset Date. Start isolation.				
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, last day of isolation.	Return to school, 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 and eligible), 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 and eligible), 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 only be completed among educational facility close contacts in higher-risk (see below) settings and should include up to 2 days before positive test result date or confirmed symptom onset date (whichever is earliest). A “close contact” in an educational setting is: an individual who was within 3 ft. (for a cumulative period of 15 minutes or more, over a 24-hour period) of an individual confirmed to have active COVID-19.

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 this 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. Report exposure and 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 below) complete contact tracing across any setting.

Higher-risk school settings:

- High-risk extracurriculars (e.g., basketball, ice hockey, competitive cheer, wrestling, lacrosse, field hockey, football)
- Classes or school events where masks are not/cannot be worn (e.g., special education classes where students cannot be masked, band, choir, unmasked theater)
- Any declared outbreaks

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

Masking

Indoor in-public masking (including transportation modes) has been shown to reduce the transmission of COVID-19 in K-12 facilities in individuals ages 2 years and older, including students, teachers, staff, and visitors. Masking should be strongly considered when the city of Detroit, Wayne County has a “High” COVID-19 Community Level or when hosting a large gathering (> 100 individuals) in an indoor

To determine COVID-19 Community Level, see: [COVID-19 by County | CDC](#). Furthermore, the DHD will monitor COVID-19 Community Level internally and can be contacted with any questions.

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 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. Only fully vaccinated + boosted (if 18+ y/o and eligible) players, coaching staff, and officiating staff should be permitted to participate, from all participating teams
2. 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
3. Teams should play/practice outdoors, when possible
4. Hand sanitizer should be readily available
5. Disposable drinking vessels (i.e., no multiple-use water bottles) should be available

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.

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 frequently around vulnerable populations (e.g., immunocompromised students and staff) consider isolating for longer (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

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.

Regular Surveillance Testing

- Regular testing for COVID-19 surveillance purposes should be strongly considered when the city of Detroit has a “High” COVID-19 Community Level.

Resources and Notes

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