COVID-19 Response

and

Continuity of Learning Plan

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**Updated and Approved by MICA Board 4/17/2024*

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I. Introduction

On March 11, 2020, the novel coronavirus, COVID-19, was declared a worldwide pandemic by the World Health Organization. Coronavirus Disease 2019 (COVID-19) is a respiratory disease caused by the SARS-CoV-2 virus, distinct from other diseases caused by coronaviruses, such as severe acute respiratory syndrome (SARS) and Middle East Respiratory Syndrome (MERS). COVID-19 is reported to be extremely contagious.

The current state of the pandemic requires a refined approach to monitoring COVID-19. Community transmission indicators were developed in fall 2020, prior to availability of vaccines and reflect goal of limiting transmission in anticipation of vaccines being available. These prior metrics relied on two metrics to define community transmission:

- Total new cases per 100,000 persons in the past 7 days, and

Percentage of Nucleic Acid Amplification Test results that are positive during the past 7 days. Community transmission levels are largely driven by case incidence, which does not differentiate mild and severe disease. Currently, neither of the community transmission indicators reflects medically significant disease or healthcare strain.

Purpose

Michigan Connections Academy ("MICA") is committed to providing a safe and healthy workplace for all staff-members. To ensure we have a safe and healthy workplace, MICA has developed the following COVID-19 Preparedness and Response Plan ("Plan").

The purpose of this Plan is to provide a framework of policies, procedures, guidelines, and organizational structure to prevent against, prepare for, respond to, and recover from infectious disease and pandemics such as COVID-19. This Plan outlines steps the school should take to safeguard the health and well-being of staff-members during a pandemic while ensuring the school's ability to maintain essential operations and continue providing essential services to students and families.

Scope

This plan is intended for use by school administration, faculty, staff, and community health agencies. It is also intended to inform parents and community leaders of the school's planned actions in response to emergencies as a way of preparing families and local officials.

Facility Overview

MICA'S facility is located at: 3950 Heritage Avenue Okemos, MI 48864. All activities take place in the office areas. This Plan shall be applicable to all buildings and grounds for all events that occur, regardless of the time of day or day of the week.

School Population

MICA is a school of excellence that is a cyber school therefore, no students are in attendance at this location and many staff members work remotely.

Organizational Roles and Responsibilities

Worksite Supervisor

The Worksite Supervisor or designee is responsible for the following:

- Implement, monitor, and report on the COVID-19 control strategies;
- Provide COVID-19 training to staffs that covers, at a minimum:
  - Workplace infection-control practices.
  - The proper use of personal protective equipment.
  - Steps the staff-member must take to notify the business or operation of any symptoms of COVID-19 or a suspected or confirmed diagnosis of COVID-19.
  - How to report unsafe working conditions.
- If transmission levels increase, conduct a daily entry 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.
- Ensure non-medical grade face coverings are provided as needed or upon request from staff.
- Maintain a record of these requirements for at least one year.
- Work with local health officials as necessary
- Maintain a line of communication with the COVID-19 Response Committee.

Sample Questionnaire to Evaluate Staff for COVID-19

Check ☑ the box for each symptom (if any) you are experiencing

❒ **Fever or chills**

If box is checked, it is recommended that the individual stay home until they are free of fever (100.4° F [38.0° C] or greater using an oral thermometer), have signs of a fever, and any other symptoms for at least 24 hours, without the use of fever-reducing or other symptom-altering medicines (e.g. cough suppressants).

- ❒ **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**

❒ **Are you ill, or caring for someone who is ill?**

- **Staff who are well but who have a sick family member at home with COVID-19 should notify their supervisor.**

- **If a staff-member is confirmed to have COVID-19, employers should inform the rest of the staff of their possible exposure to COVID-19 in the workplace but maintain confidentiality as required by the Americans with Disabilities Act (ADA).**

In the two weeks before you felt sick, did you:

- ❒ **Have contact with someone diagnosed with COVID-19?**
- ❒ **Live in or visit a place where COVID-19 is spreading?**

If you have one or more symptom(s) that may be related to COVID-19 stay home and take care of yourself.

COVID-19 Response Committee

To maximize support and resources to ensure the safety, well-being of staff and students and maintain compliance with the rapidly changing state, local and federal guidelines, Pearson Virtual Schools ("PVS") has developed a COVID-19 Response Committee. The Committee will:

- Act as a partner to provide guidance and resources to prepare for and respond to situations as they relate to the COVID-19 Pandemic;
- Provide advice and guidance on how to address staff questions or issues;
- Work with state and local health agencies to provide information in the event of a COVID-19 outbreak in the workplace;
- Monitor emergencies and facilitate major decisions which need to be made.;
- Provide guidance and assistance with release of information to the media if necessary;
- Monitor the rapidly changing COVID-19 regulatory environment and provide updates as appropriate.

	Name/Title	Organization	Contact
Health, Safety & Risk Management	Jeff Budny, Health & Safety Manager	Pearson- North America Organizational Risk and Resilience	Jeff.budny@pearson.com
Compliance	Tara Burns, Senior Compliance Analyst	PVS- Compliance Services	Tara.burns@pearson.com
Facilities	Dion Golatt, Specialist Facilities/Real Estate	PVS-School Facilities Management	Dion.Golatt@pearson.com
Benefits	Julie Fivas, Benefits Manager	PVS-HR Benefits	julie.fivas@pearson.com
Employee Relations	Kimberly Muth, Director, HR Partners	PVS- HR	Kimberly.muth@pearson.com
Communications	Kelly Gazke, Marketing Communication Manager	PVS-Marketing	Kelly.Gatzke@pearson.com

II. Prevention & Preparedness

Continuous Response to COVID-19

Definitions

Close Contact: Someone who was within 6 feet of an infected person for a cumulative total of 15 minutes or more over a 24-hour period.

Isolation: The separation of a person or group of people known or reasonably believed to be sick with COVID-19 and potentially infectious, from those who are not infected. Isolation lasts 5 days regardless of vaccination status. If you have no symptoms or your symptoms are resolving after 5 days, isolation period may end. Followed by wearing a mask around others for an additional 5 days. If individual has a fever, continue to stay home until fever resolves.

Quarantine: The separation of a person or group of people reasonably believed to have been exposed to someone with COVID-19 but not yet symptomatic, from others who have not been exposed.

"Substantial" or "high" transmission levels: Transmission levels are defined by the number of weekly cases per 100,000 population. The level of community transmission can be found using the CDC Transmission Indicator Framework found on the MI Safe Start Map which uses State of Michigan Metrics. For Ingham County to be deemed an area of substantial transmission, we would need to reach a 7-day average of 71 daily cases per one million population, OR 8% positivity. For Ingham County to be deemed an area of high transmission, we would need to reach a 7-day average of 143 daily cases per one million population, OR 10% positivity.

Up to date on all recommended COVID-19 vaccines: An individual is up to date on all recommended COVID-19 vaccines that they are currently eligible for per the CDC definition, meaning:

- If eligible, individual has been boosted, or
- Individual has completed the primary series of Pfizer or Moderna vaccine within the last five months, or
- Individual has completed the primary series of J&J vaccine within the last 2 months

Click here for more COVID-19 definitions from the Centers for Disease Control and Prevention

How COVID-19 Spreads

COVID-19 spreads when an infected person breathes out droplets and very small particles that contain the virus. These droplets and particles can be breathed in by other people or land on their eyes, noses, or mouth. In some circumstances, they may contaminate surfaces they touch. Anyone infected with COVID-19 can spread it, even if they do NOT have symptoms. Additional factors include:

Intensity of Exposure

The intensity of exposure refers to the quantity of virus fragments you were exposed to (e.g. level of contagiousness, whether the person exhibited symptoms with or without a mask, close contact, sharing drinks, etc.).

Duration of Exposure

The duration of exposure refers to how long you were exposed. If you were in a classroom or conference room with someone contagious with COVID-19 for 6 hours a day 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 to be at higher risk for developing COVID-19.

Personal Health

Your personal health, like the strength of your immune system, plays a part in whether or not you will be infected, as does whether you were using all the COVID-19 risk reduction methods possible.

Vaccination Status

COVID-19 vaccines available in the United States are effective at protecting people from getting seriously ill, being hospitalized, and dying. As with other vaccine-preventable diseases, you are protected best from COVID-19 when you stay up to date with the recommended vaccinations, including recommended boosters. Four COVID-19 vaccines are approved or authorized in the United States:

- Pfizer-BioNTech
- Moderna
- Novavax
- Johnson & Johnson's Janssen (J&J/Janssen) (However, CDC recommends that the J&J/Janssen COVID-19 vaccine only be considered in certain situations, due to safety concerns.)

Age

Age also seems to play a part in risks for COVID-19. Children may be at lower risk of both catching and spreading COVID-19 to others, both to other children and to adults.

Pearson Virtual Schools ("PVS") Facilities Management-Phased Approach to Re-Entering the Workplace

At the start of the pandemic, the PVS Facilities Team implemented a phased approach to assist the school in safely returning to the office facilities as outlined below. The current CDC Guidelines match Phase III of the PVS Facilities Management-Phased Approach to Re-Entering the Workplace, as illustrated below. In Phase III, the school's facility is able to transition staff to return to the office. However, most staff at MICA work remotely except for select staff-members who require access to the facility to perform essential functions which they are otherwise unable to perform from home. The Facilities Team understands its role in keeping staff safe and keeping infection rates low and will continue to monitor CDC Risk Level Metrics consistent with Ingham County and adjust planning in accordance with risk-level.

Phase I

❒ Local COVID response site planning
- ✓ Reporting
- ✓ On-site point of contacts needs to be identified
- ✓ Plan for a possible exposure or reported exposure
- ✓ Impact/Exposure Assessment plan
- ✓ Cleaning Plans and response

- ✓ Employee communications

❒ Technology readiness support

❒ Supplies and PPE

- ✓ Legal review to ensure all requirements are being met
- ✓ Availability of cleaning suppliers i.e. sanitizer, wipes, etc.
- ✓ Face coverings (may be required, highly recommended, personal choice)
- ✓ Gloves (likely limited to specific tasks and available for self-cleaning where appropriate.
- ✓ Temperature checks – If appropriate/required - may be cost associated
- ❒ Other
- ✓ Costs to maintain facility (e.g. cleaning) suspend operations from an exposure
- ✓ Employee readiness to return (childcare, health concerns, public transportation)
- ✓ Certain Cities and building landlords may require PPE and have additional building access controls (i.e. elevator capacity, spatial distancing, temperature screening.

Prepare office

❒ Implement site startup check list
❒ Start-up Cleaning
❒ Post Signage
❒ Building systems start ups
❒ Check AV equipment
❒ Check copiers
❒ Prepare workspaces for Physical distancing
❒ Storage furniture
❒ Distribute supplies- wipes, sanitizers, etc.

Entering Building (Landlord) Guidelines

- Contact Landlord and confirm building restrictions and confirm the following:

❒ if landlord provides cleaning service:

- If yes request office cleaning prior to return to office date
- If no, coordinate cleaning service

❒ Parking changes
❒ Lobby requirements
❒ Elevator protocol

Common Area Guidelines

❒ Coffee Service/kitchen Areas are closed
❒ Conference/Meeting rooms remain closed with seating modifications to comply with physical distance guidelines during phase 2
❒ Group meetings in Phase 1 highly discouraged, most conference rooms closed
❒ **In Phase II**, conference room use may expand but remain limited
❒ Large rooms 8+ will be posted at ½ or no more than 10 capacity and chairs removed
❒ No large meetings over 10 people
❒ Signage for wiping AV equipment before and after will be posted

Site Services

❒ All reusable cups will be stored, only disposables to be used for water.
❒ Non-automatic ice machines will be turned off
❒ Cleaning of high touch points

- ❒ Packages/mail
- ❒ Shipping and Receiving Areas: Before reopening operators and building managers should review current processes for inbound and outbound deliveries (parcels, mail, food deliveries, couriers, etc.) and develop a revised plan to align to COVID-19 safety precautions. These may include:
  - ✓ Routine instructions and plans to avoid deliveries through employee or main entrance and instead reroute through areas that will minimize contact with the larger building population.
  - ✓ Separating shipping and receiving areas from the general population.
  - ✓ Require staff handling mail and parcels to wear PPE, face-covering or other protective gear to receive parcels, mail and other deliveries and provide training on proper use and disposal of PPE.
  - ✓ Sanitize the exterior of packaging
  - ✓ If appropriate, remove items from boxes and discard accordingly
  - ❒ Employees should use every precaution- wipes and wash hands if using refrigerators.

Phase II

- ❒ Slowly" expand operational scope and head count not to exceed 50% capacity.
- ❒ Timeline: 3 to 6 months

Phase III

- ❒ Transition to 'new normal' use of the office
- ❒ Timeline: 6 months+

Ongoing Virus Transmission Prevention Strategies:

- Where possible, increasing ventilation rates and circulation throughout the facility;
- Performing routine environmental cleaning and disinfection, especially of common areas; and
- Where available, providing hand sanitizer in high-traffic areas.

Engineering Controls

Engineering controls involve isolating staff from work-related hazards. In workplaces where they are appropriate, these types of controls reduce exposure to hazards without relying on worker behavior and can be the most cost-effective solution to implement such as:

- Installing high-efficiency air filters.
- Increasing ventilation rates in the work environment.

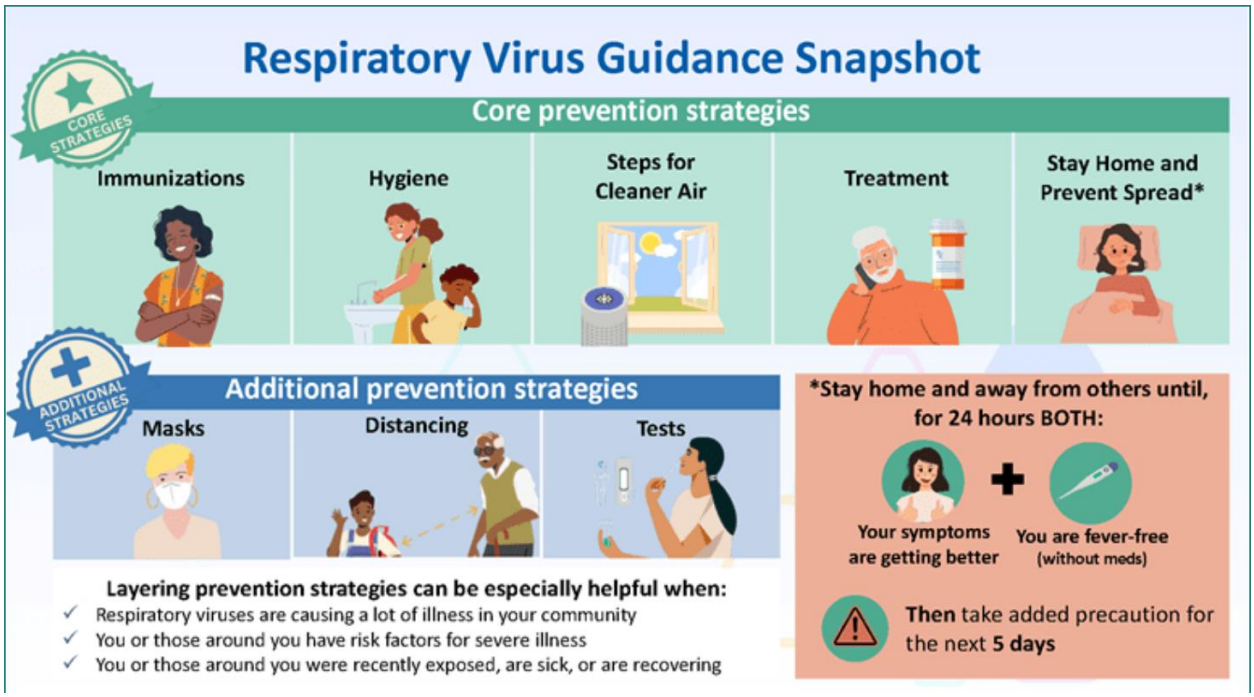
Spatial Changes

When transmission rates increase, it may be necessary to temporarily alter workspaces in order to facilitate maintenance of spatial distancing and physically separating staff-members. Some strategies may include:

- Implement flexible work hours (e.g., rotate or stagger shifts to limit the number of individuals in the workplace at the same time).
- Increase physical space between individuals at the worksite by modifying the workspace.
- Increase physical space between individuals and customers (e.g., drive-through service, physical

barriers such as partitions).

- Use signs, tape marks, or other visual cues such as decals or colored tape on the floor, placed 6 feet apart, to indicate where to stand when physical barriers are not possible.
- Implement flexible meeting and travel options (e.g., postpone non-essential meetings or events in accordance with state and local regulations and guidance).
- Shift site visits by vendors to off-peak or after hours, when possible.
- If in-person meetings are unavoidable, please consider the following:
    - How many staff-members will be in attendance
    - Whether the meeting room has adequate space to allow for proper spatial distancing
    - Level of ventilation



***Source**: Michigan Department of Health and Human Services (MDHHS)*

Physical Distancing Measures

When necessary, physical distancing measures may be put in place to reduce the risk of contracting COVID-19. Physical distancing includes:

- Maintaining at least 6 feet (about 2 arms' length) from other people
- Avoiding crowded places and mass gatherings

Administrative Controls

- Monitor public health communications about COVID-19 recommendations and ensure that workers have access to that information.
- Frequently check the CDC COVID-19 website: www.cdc.gov/coronavirus/2019-ncov and Ingham County Health Department's website for the latest information.
- Collaborate with staff to designate effective means of communicating important COVID-19

information.

Training

Provide staff with training on:

- Policies to reduce the spread of COVID-19
- Hand-washing hygiene
- COVID-19 Symptoms and what to do they become sick
- Cleaning and disinfection
- Proper use of masks/cloth face covers (when necessary)
- Physical distancing (when necessary)
- Safe work practices and how to report unsafe working conditions
- Stress management
- Changes to this plan or new information becomes available about COVID-19

Personal Protective Equipment (PPE)/Face Coverings

During an outbreak of an infectious disease, such as COVID-19, recommendations for PPE specific to occupations or job tasks may change depending on geographic location, updated risk assessments for workers, and information on PPE effectiveness in preventing the spread of COVID-19. All types of PPE must be:

- Selected based upon the hazard to the worker.
- Properly fitted and periodically refitted, as applicable (e.g., respirators).
- Consistently and properly worn when required. Regularly inspected, maintained, and replaced, as necessary.
- Properly removed, cleaned, and stored or disposed of, as applicable, to avoid contamination of self, others, or the environment.

Classifying Worker Exposure to SARS-CoV-2

Worker risk of occupational exposure to SARS-CoV-2, the virus that causes COVID-19, during an outbreak may vary from very high to high, medium, or lower (caution) risk. The level of risk depends in part on the industry type, need for contact within 6 feet of people known to be, or suspected of being, infected with COVID-19, or requirement for repeated or extended contact with persons known to be, or suspected of

being, infected with COVID-19. Medium exposure risk jobs include those that require frequent and/or close contact with (i.e., within 6 feet of) people who may be infected, but who are not known or suspected COVID-19 patients.

Community Transmission

In areas without ongoing community transmission, workers in this risk group may have frequent contact with travelers who may return from international locations with widespread COVID-19 transmission. In areas where there is ongoing community transmission, workers in this category may have contact with the general public (e.g., schools, high-population-density work environments, some high-volume retail settings).

High Risk Individuals

Everyone is at risk for getting COVID-19 if they are exposed to the virus. Some people are more likely than others to become severely ill, which means that they may require hospitalization, intensive care, or a ventilator to help them breathe, or they may even die.

- Among adults, the risk for severe illness from COVID-19 increases with age, with older adults at highest risk. Severe illness means that the person with COVID-19 may require hospitalization, intensive care, or a ventilator to help them breathe, or they may even die.
- People of any age with certain medical conditions are at increased risk of severe illness from COVID-19.
- By understanding the factors that put you at an increased risk, you can make decisions about what kind of precautions to take in your daily life.

MICA is committed to ensuring the safety and well-being of school staff. Staff-members with questions regarding reasonable accommodations under the ADA, should reach out to their supervisor and julie.fivas@pearson.com for assistance.

MDHHS COVID-19 Readiness, Response & Recovery Cycle

MDHHS recognizes the importance of adjusting response actions and public recommendations as we cycle through periods of readiness, response, and recovery. In addressing current impacts and working to prevent and respond to COVID-19, MDHHS bases decisions on current data and science and the following guiding principles:

- To prevent death and severe outcomes,
- To protect health care capacity, and
- To keep vital infrastructure functioning safely. MDHHS will cycle through periods of readiness, response, and recovery to continue to address predicted impacts of COVID-19 across these guiding principles.

Currently, the COVID-19 cycle can be broken down into three key phases:

- Readiness – A surge in cases is expected, with implications on severity of illness and hospital capacity. Increased communication to the public regarding possible new risks.
- Response – Local and state public health implement rapid response to a surge. The public may be advised to increase masking, testing and spacial distancing.

- Recovery – Post-surge. No immediate resurgence predicted. Local and state public health will monitor conditions that could lead to future surges.

To prevent the transmission of COVID-19, the following protocols are recommended:

In addition to basic health and hygiene practices, like handwashing, CDC recommends some prevention actions at all COVID-19 Community Levels, which include:

- Staying Up to Date with COVID-19 Vaccines: COVID-19 vaccines help your body develop protection from the virus that causes COVID-19. Although vaccinated people sometimes get infected with the virus that causes COVID-19, staying up to date on COVID-19 vaccines significantly lowers the risk of getting very sick, being hospitalized, or dying from COVID-19. CDC recommends that everyone who is eligible get a booster and stay up to date on their COVID-19 vaccines, especially people with weakened immune systems.
- Improving Ventilation: Actions that can improve ventilation and filtration include:
    - Bringing in as much outdoor air as possible—for example, opening windows.
    - Increasing air filtration in your heating, ventilation, and air conditioning (HVAC) system, such as by changing filters frequently and using filters that are properly fitted and provide higher filtration.
    - Using portable high-efficiency particulate air (HEPA) cleaners.
    - Turning on exhaust fans and using other fans to improve air flow.
    - Turning your thermostat to the "ON" position instead of "AUTO" to ensure your HVAC system provides continuous airflow and filtration.
- Getting Tested for COVID-19 If Needed Get tested if you have COVID-19 symptoms. Knowing if you are infected with the virus that causes COVID-19 allows you to take care of yourself and take actions to reduce the chance that you will infect others.
- Following Recommendations for What to Do If You Have Been Exposed: If you were exposed to someone with COVID-19, you may have been infected with the virus. Follow CDC's

recommendations for what to do if you were exposed. This includes wearing a high-quality mask when indoors around others (including inside your home) for 10 days, testing, and monitoring yourself for symptoms.

- Staying Home If You Have Suspected or Confirmed COVID-19: If you have COVID-19, you can spread it to others, even if you do not have symptoms. If you have symptoms, get tested and stay home until you have your results. If you have tested positive (even without symptoms), follow CDC's isolation recommendations. These recommendations include staying home and away from others for at least 5 days (possibly more, depending on how the virus affects you) and wearing a high-quality mask when indoors around others for a period of time.
- Seeking Treatment If You Have COVID-19 and Are at High Risk of Getting Very Sick If you don't have timely access to a healthcare provider, check if a Test to Treat location is in your community. You can get tested, receive a prescription from a healthcare provider (either onsite or by telehealth), and have it filled all at one location.
- Avoiding Contact with People Who Have Suspected or Confirmed COVID-19: Avoiding contact with people who have COVID-19, whether or not they feel sick, can reduce your risk of catching the virus from them. If possible, avoid being around a person who has COVID-19 until they can safely end home isolation. Sometimes it may not be practical for you to stay away from a person who has COVID-19 or you may want to help take care of them. In those situations, use as many prevention strategies as you can, such as practicing hand hygiene, consistently and correctly wearing a high-quality mask, improving ventilation, and keeping your distance, when possible, from the person who is sick or who tested positive.

III. Response

Process for Responding to a COVID-19 Exposure at Work

Notifying Staff of Suspected or Confirmed COVID-19 Case

- Within 24 hours of learning of a suspected or confirmed COVID-19 case, notification will be provided to all staff who may have had contact with the infected individual.
- It is important to note that privacy laws exist to protect an individual's confidential medical information. Communications must be carefully worded in order to avoid revealing the individual's identity, unless they have signed an authorization to disclose their diagnoses.
- Please consult with your HR Partner and the Compliance Team prior to issuing communications to ensure compliance with state and federal privacy laws.

Cleaning and Disinfecting

Develop Cleaning & Disinfection Plan in consultation with the Facilities Team and service providers, to include the following provisions:

- Increase of fresh air make-up in HVAC system

- If less than 24 hours have passed since the person who is sick or diagnosed with COVID-19 has been in the space, clean and disinfect the space.
- If more than 24 hours have passed since the person who is sick or diagnosed with COVID-19 has been in the space, cleaning is enough. You may choose to also disinfect depending on certain conditions or everyday practices required by your facility.
- If more than 3 days have passed since the person who is sick or diagnosed with COVID-19 has been in the space, no additional cleaning (beyond regular cleaning practices) is needed.

Whether an employee should stay or be sent home depends on if new, different, or worse than any longstanding conditions develop:

ONE of the following:	**OR**	**TWO or more of the following:**
❒ **New or worsening cough**		❒ **Chills**
❒ **Shortness of breath or difficulty breathing**		❒ **Muscle aches**
❒ **New loss of taste or smell**		❒ **Headaches**
❒ **Temperature 100.0 F or signs of fever (chills/sweating)**		❒ **Sore throat**
		❒ **Diarrhea**
		❒ **Nausea or vomiting**
		❒ **Congestion or runny nose**

If "YES" to any symptoms above, isolation is required. Testing is recommended.

Close contact with a person with confirmed COVID-19

If the individual:
- **Has been boosted, or**
- **Completed the primary series of Pfizer or Moderna vaccine within the last 6 months, or**
- **Completed the primary series of J&J vaccine within the last 2 months**

If the individual:
- **Completed the primary series of Pfizer or Moderna vaccine over 6 months ago and is not boosted, or**
- **Completed the primary series of J&J vaccine over 2 months ago and is not boosted, or**
- **Is unvaccinated**

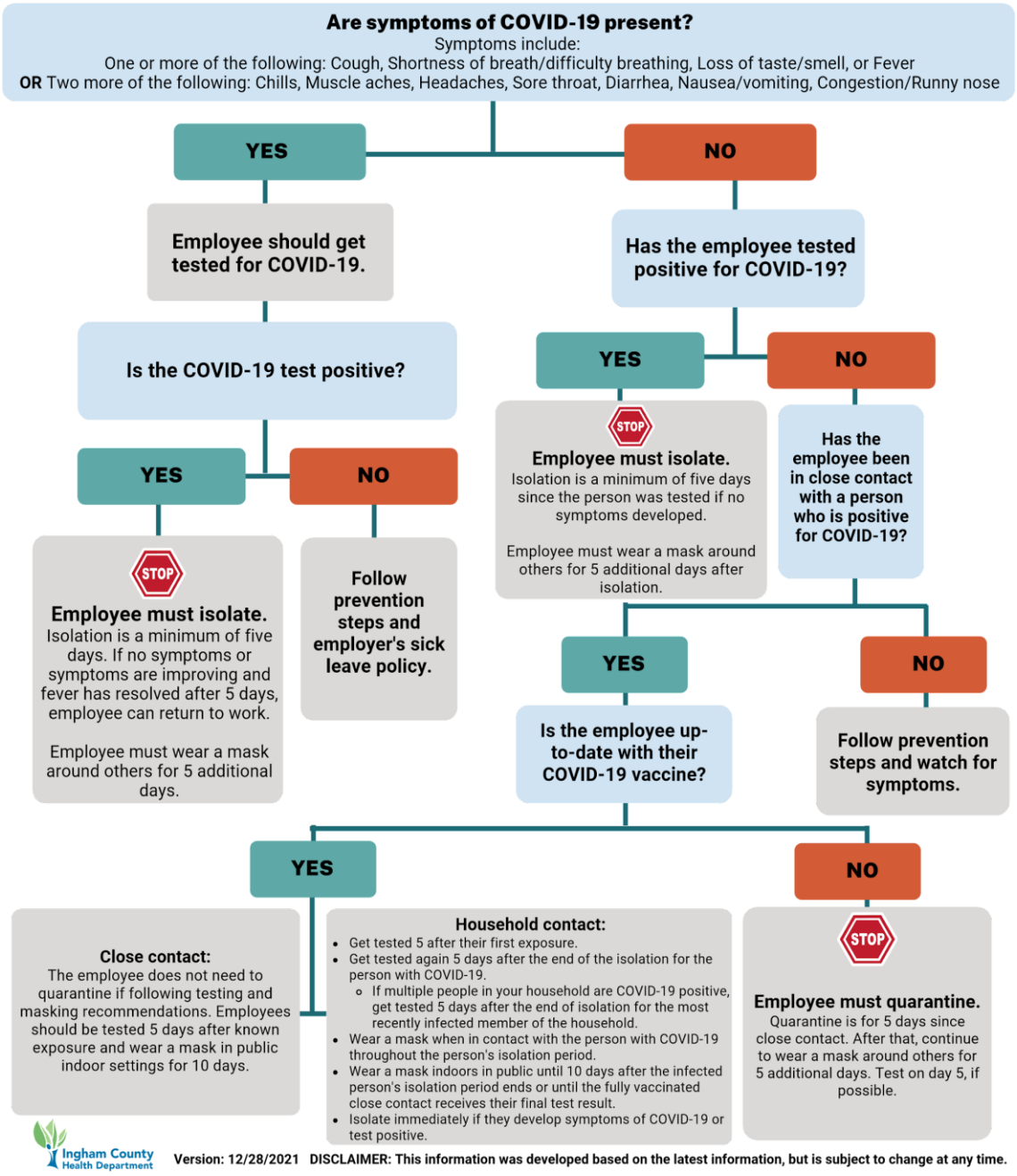
- **Wear a mask around others for 10 days**
- **Test on day 5, if possible.**

If individual develops symptoms, get tested and stay home.

- **Stay home for 5 days. After that continue to wear a mask around others for 5 additional days.**
- **If unable to quarantine, the individual must wear a mask for 10 days.**
- **Test on day 5, if possible.**

If the individual develops symptoms, get tested and stay home.

COVID-19 Decision Tree for Staff



Benefits for Staff Affected by COVID-19

There are many resources available to school staff on the Virtual Library. These resources range from information on the federal CARES Act, how to take leave under the programs, and wellness resources focused on staff mental and physical wellbeing. For specific questions regarding benefits eligibility please contact Julie.fivas@pearson.com.

Mental Health Resources

- If you feel you or someone in your household may harm themselves or someone else:
  - National Suicide Prevention Lifeline: Toll-free number 1-800-273-TALK (1-800-273-8255)
  - The Online Lifeline Crisis Chat is free and confidential. You'll be connected to a skilled, trained counselor in your area.
  - National Domestic Violence Hotline: Call 1-800-799-7233 and TTY 1-800-787-3224
- If you are feeling overwhelmed with emotions like sadness, depression, or anxiety:
  - Disaster Distress Helpline: Call 1-800-985-5990 or text TalkWithUs to 66746
  - Check with your employer for information about possible employee assistance program resources.
- If you need to find treatment or mental health providers in your area:
  - Substance Abuse and Mental Health Services Administration (SAMHSA) Find Treatment

COVID-19 Resources

- CDC Coronavirus (COVID-19) Stress and Coping
- American Psychological Association
- National Alliance on Mental Illness
- NIOSH Workplace Safety and Health Topic
- CDC COVID-19 CDCINFO: 1-800-CDC-INFO (1-800-232-4636) cdc.gov/info
- Ingham County Health Department Employer Reporting
- Michigan Department of Health and Human Services

Coping with Stress

Dealing with illness in the workplace can be challenging at any time, but it is especially so during an infectious disease outbreak such as the COVID-19 pandemic. Some people may be anxious and fearful about contracting the virus, bringing it home to their families. Recognize the symptoms of stress you may be experiencing:

- Feeling:
  - irritation, anger, or in denial
  - uncertain, nervous, or anxious
  - sad or depressed
  - tired, overwhelmed, or burned out
- Lacking motivation
- Having trouble sleeping
- Having trouble concentrating

Know the common work-related factors that can add to stress during a pandemic:

- Concern about the risk of being exposed to the virus at work
- Taking care of personal and family needs while working
- Managing a different workload
- Lack of access to the tools and equipment needed to perform your job
- Feelings that you are not contributing enough to work or guilt about not being on the frontline
- Uncertainty about the future of your workplace and/or employment
- Learning new communication tools and dealing with technical difficulties
- Adapting to a different workspace and/or work schedule

Follow these tips to build resilience and manage job stress:

- Communicate with your coworkers and supervisors about job stress while maintaining spacial distancing (at least 6 feet).
- Identify things that cause stress and work together to identify solutions.
- Talk openly about how the pandemic is affecting work. Expectations should be communicated clearly by everyone.
- Ask about how to access mental health resources in your workplace.
- Identify those things which you do not have control over and do the best you can with the resources available to you.
- Increase your sense of control by developing a consistent daily routine when possible — ideally one that is similar to your schedule before the pandemic.
- Keep a regular sleep schedule.
- Take breaks from work to stretch, exercise, or check in with your supportive colleagues, coworkers, family, and friends.
- Spend time outdoors, either being physically active or relaxing.
- If you work from home, set a regular time to end your work for the day, if possible.
- Practice mindfulness techniques.
- Do things you enjoy during non-work hours.

Know the facts about COVID-19. Be informed about how to protect yourself and others. Understanding the risk and sharing accurate information with people you care about can reduce stress and help you make a connection with others.

- Remind yourself that each of us has a crucial role in fighting this pandemic.
- Remind yourself that everyone is in an unusual situation with limited resources.
- Take breaks from watching, reading, or listening to news stories, including social media. Hearing about the pandemic repeatedly can be upsetting and mentally exhausting
- Connect with others. Talk with people you trust about your concerns, how you are feeling, or how the COVID-19 pandemic is affecting you.
- Connect with others through phone calls, email, text messages, mailing letters or cards, video chat, and social media.
- Check on others. Helping others improves your sense of control, belonging, and self-esteem. Look for safe ways to offer social support to others, especially if they are showing signs of stress, such as depression and anxiety.
- If you feel you may be misusing alcohol or other drugs (including prescription drugs) as a means of coping, reach out for help.

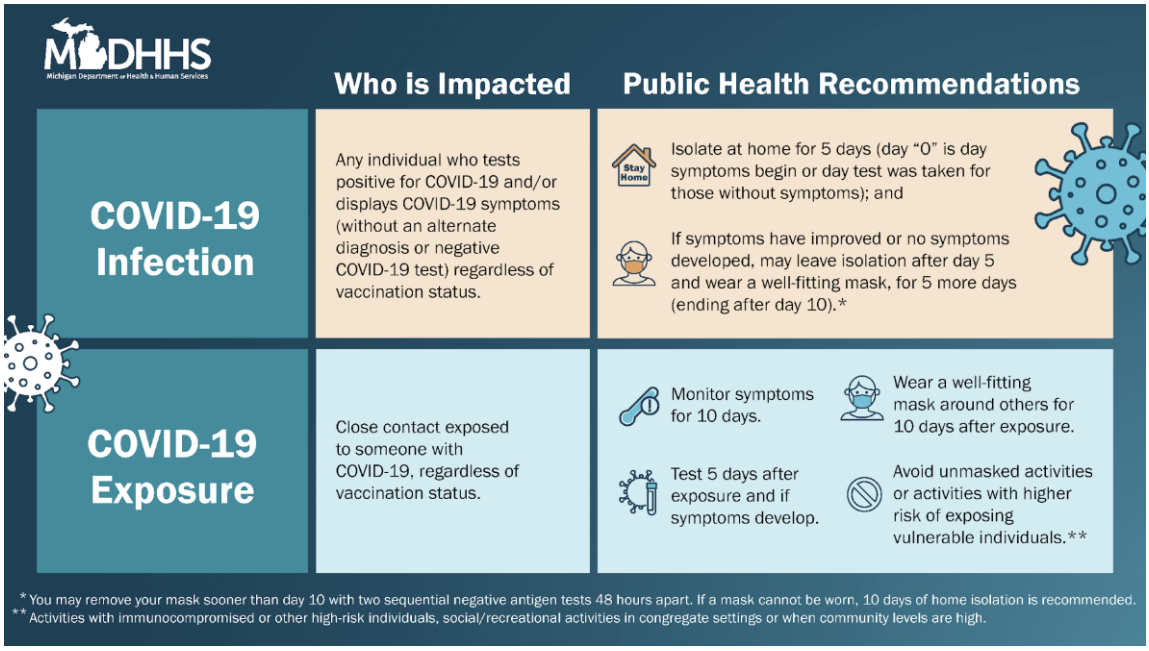
If you are being treated for a mental health condition, continue with your treatment and be aware of any new or worsening symptoms.

IV. Updated MI Safe Start/Return to School Roadmap

COVID-19 Infection Mitigation

Schools can play a major role in helping to reduce or prevent the incidence of illness among children and adults in our communities. Encouraging good hand hygiene, following cleaning recommendations, and adhering to the most up-to-date mask requirements and recommendations contribute to a safe and

healthy learning environment for children. When schools report illness to their local health department, public health specialists can assist schools with disease prevention and control guidance.



At this time, based on CDC as well as, state/local guidelines, that the management of COVID-19 transition from a pandemic emergency response model toward a more standard approach used in the mitigation of other respiratory viral diseases, such as influenza. Seasonal variations in COVID-19, as well as the appearance of more virulent or contagious variants may cause modification in this approach. However, for the time being, in the K-12 school setting, the school will focus on basic illness prevention and detecting and responding to ongoing transmission and outbreaks and rely less on factors such as case investigation, contact tracing, and quarantining of students or staff following school exposures.

- Basic Public Health Recommendations include:
- Requiring sick students and staff to stay home.
- Sharing resources with the school community to help staff and families understand when to stay home. See When to Keep Your Child Home guidance from the American Academy of Pediatrics.

Michigan Law requires schools and childcare centers to report specific diseases . Any reportable disease that is suspected or known to have occurred in the school or a school-sanctioned activity, including chicken pox, COVID-19, pertussis, measles, mumps, rubella, *Haemophilus influenzae* Type B, meningitis, encephalitis, hepatitis, tuberculosis, or any other serious or unusual communicable disease must be reported within 24 hours as follows:

- Name of the disease.

- Student demographic information including full name, date of birth, grade, classroom, street address along with zip code, name of parent/guardian, and phone number(s). o The date the student was first absent.
- The individual who identified the disease (e.g., healthcare provider, parent/guardian, etc.).

Exclusion Times for Common Childhood Illnesses

Disease	Exclusions (unless longer per healthcare provider; consult with LHD as needed)
Chickenpox (Varicella)	Until lesions crusted and no new lesions for 24hr (for non-crusting lesions: until lesions are fading, and no new lesions appear)
Common Cold, Croup	Exclude until 24hr with no fever **and** symptoms improving
COVID-19	Exclude until 24hr with no fever **and** symptoms have improved **and 5** days since onset (or positive test if no symptoms); mask use recommended for days 6-10
Diarrhea, no specific diagnosis	Exclude until diarrhea has ceased for 24h or until medically cleared
Fifth Disease *Erythema infectiosum*/Parvovirus B19)	No exclusion if rash is diagnosed as Fifth disease by a healthcare provider
Hand Foot and Mouth Disease(Coxsackievirus/ Herpangina)	If secretions from blisters can be contained, no exclusion needed
Head lice (*Pediculosis*)	Students with live lice may stay in school until end of day; immediate treatment at home is advised
Impetigo (*Impetigo contagiosa*)	Treatment may be delayed until end of the day; if treatment started before next day's return, no exclusion necessary; cover lesions
Influenza	Exclude until 24hrs with no fever (without fever-reducing medication) and cough has improved
Molloscum contagiosum	No exclusion necessary
Mononucleosis	Exclude until able to tolerate school activities; Exclude from contact sports until recovered or cleared by a healthcare provider
MRSA (Methicillin-resistant *Staphylococcus aureus)*	No exclusion if covered and drainage contained; No swim exclusion if covered by waterproof bandage
Norovirus (viral gastroenteritis)	Exclude until illness (vomiting and diarrhea) has ceased for at least 2 days; exclude from food handling for 3 days after recovery
Pink Eye (conjunctivitis)	Exclude only if diagnosed by a healthcare provider with herpes simplex conjunctivitis and eye is watering; exclusion also may be necessary if 2 or more associated children have watery, red eyes; contact LHD if questions
Ringworm (Tinea)	Treatment may be delayed until end of the day; if treatment started before next day's return, no exclusion necessary; exclude from contact sports and swimming until start of treatment
Strep throat / Scarlet Fever	Exclude until 12hrs after start of antimicrobial therapy

Vomiting, no specific diagnosis	Exclude until 24hrs after last episode
Whooping Cough (Pertussis)	Exclude until 5 days after proper antibiotic treatment **OR** until 21 days after onset if not treated

For a complete list of reportable and exclusionary diseases, see: "Managing Communicable Diseases in Schools" Prepared by Michigan Department of Education and Michigan Department of Health and Human Services, Divisions of Communicable Disease & Immunization.

Continuity of Instruction

As indicated in MICA's 2020-2021 Return to School Roadmap/Safe Start Plan, since MICA is a Cyber School, no students are onsite, and all instruction is delivered remotely.

The school will continue to implement all necessary processes and procedures to sustain virtual operations to ensure students will receive maximum support to avoid academic interruption. Students with disabilities who are receiving in-person instructional services will continue to receive individualized accommodations that have been identified through the IEP team process.

MICA will continue to follow guidance from the CDC, Michigan Department of Health and Human Services and Ingham County Health Department to update this plan based upon recommended and, or mandated changes from governmental agencies, as well as local metrics. This includes local outbreaks, potential variants, risk of severe disease, hospitalizations, and increased risk of death.

In-Person Student Assessment COVID-19 Safety Protocols

This guidance is intended to aid school administrators as they consider how to protect the health, safety, and wellbeing of students, teachers, and other school staff who may have close contact at a testing/assessment site. The following guidelines are recommended to help prepare facilities, staff and students on how to implement COVID-19 mitigation strategies at testing/assessment sites.

These protocols are adopted from the most recent Centers for Disease Control (CDC) guidelines, as well as, state or local public health regulations and are subject to change as the pandemic evolves.

Guidelines for Facilities

- Confirm with venue what current COVID-19 precautions are in place for large groups and request copies of any written policies, if available.
- Confirm that site will be cleaned and disinfected prior to testing in accordance with CDC Guidelines.
- Ensure adequate supplies of sanitizing wipes and hand sanitizer are available on test/assessment day, preferably at designated stations which can be easily monitored.
- Designate multiple check-in stations properly spaced to speed up the check-in process and account for additional safeguards
- Consider setting up a virtual check in process for families
    - Identify Check-in staff for each test site. Consider assigning multiple staff members split by grade level or testing rooms.
    - Provide Check-in Staff member name and phone number for Caretakers to text upon arrival. Caretaker should text a photo ID for verification.
- Caretaker completes the Health Screening Questionnaire Data View prior to arrival or completes

a printed form upon entry.
    - Check In staff confirms check in and advises family of the time they should enter, staggering entry limited to small groups.
- Signage:
    - Visual signs should be placed on the floor at check-in stations measuring six (6) feet apart where students should stand during the check-in process.
    - Post signs outside of the testing site or room and internally, reminding students to remain six (6) feet apart.
- Designate locations as **"entrance only"** and **"exit only"** to account for controlled flow of traffic, prevent crowding, and to ensure physical distancing is met. Ensure all entrances and exits are continually monitored throughout the test day.
- Check all nearby restrooms to ensure adequate stock of soap, materials for drying hands and waste receptacles.
- Conduct frequent cleaning of high-touch surfaces such as door handles and restrooms throughout the day.
- Space students six (6) feet apart, side-to-side and front-to-back, during the testing/assessment administration.

Guidelines for Administrators, Coordinators, Proctors, and other Staff Members

- Ensure staff remain aware of current state and local regulations, and related developments in your community.
- All testing/assessment staff are expected to appear for state testing duties as assigned.
- Test Administrators should communicate with designated testing staff members prior to the test date to ensure staff are healthy and able to serve on test day.
- Test Administrators should have backup testing staff (i.e., proctors, coordinators and other staff) available in the event staff members become ill.
- Ensure all testing/assessment staff are informed on COVID-19 State Testing Safety Protocols and that test-day activities are to be conducted accordingly.
- Ensure all testing/assessment staff members are aware of the current signs and symptoms of COVID-19.
- Testing staff should expect to come prepared with face masks on test day, including extra disposable masks in the event a student forgets to bring one.
- Health Screening questions should be administered at the time of check-in.

Staff, Parents/Caretakers [1]

All adults will be screened, including temperature check[1] upon entering the test site. Upon arriving onsite, they will also be asked the following screening questions, which are consistent with CDC guidelines:

1. ***Are you experiencing any of the following symptoms?***

    ❒ Fever or chills

[1] *These safeguards were put into place at the height of the pandemic and may no longer be applicable. All protocols are subject to change reflective of any changes to state and local guidelines as well as, community infection and transmission rates.*

Individuals who have symptoms of acute respiratory illness are recommended to stay home until they are free of fever (100.4° F [38.0° C] or greater using an oral thermometer), and any other symptoms for at least 24 hours, without the use of fever-reducing or other symptom-altering medicines (e.g. cough suppressants).

- ❒ 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

2. **Are you ill, or caring for someone who is ill?** Yes ❒ No ❒

3. **In the two weeks before you felt sick, did you:**
   - Have contact with someone diagnosed with COVID-19?
   - Live in or visit a place where COVID-19 is spreading?

If you have one or more symptom(s) that may be related to COVID-19 stay home and take care of yourself.

Students

It is important to note that there are limitations to symptom screenings in children. It is possible that symptom screenings will fail to identify some students who have COVID-19 as children are more likely than adults to be asymptomatic or pre-symptomatic. Others may have symptoms that are so mild they may not notice them. Additionally, students with chronic conditions like asthma or allergies may have symptoms like cough or nasal congestion without having any infection at all. As a result, symptom screenings have the potential to exclude some students from school repeatedly even though they do not have COVID-19 or any contagious illness.

Although CDC does not currently recommend conducting universal symptom screening at school, students should not attend school or other in-person events when they are sick. Home symptom screenings rely on students and their parents, guardians, or caregivers initially identifying when the student may have signs and symptoms of illness and taking action (such as staying home). This process can also be followed by school staff by monitoring children for overt symptoms of any infectious illness that may develop during the school day and helping the student and family take needed actions.

Symptom screening at home can be helpful to determine if a student:
- Currently has an infectious illness that could impair their ability to learn, or
- Is at risk of transmitting an infectious illness to other students or to school staff.

Temperature checks will still be performed on test day however, in order to protect the privacy of students, parents, guardians, and caregivers can self-report the answers to these questions through a

state testing health screening data view up until the day before testing. Schools can use the template below to share with parents and aid in daily reporting.

Student Health Screening Questionnaire for Parents[1]

If your child has any of the following symptoms, that indicates a possible illness that may decrease the student's ability to learn and also put them at risk for spreading illness to others, please do not attend testing and contact your school/teacher immediately. Please check your child for these symptoms:	Yes/No
▪ Temperature 100.4 degrees Fahrenheit or higher when taken by mouth	
▪ Sore Throat	
▪ New uncontrolled cough that causes difficulty breathing (for students with chronic allergic/asthmatic cough, a change in their cough from baseline)	
▪ Diarrhea, vomiting or body pain	
▪ New onset of severe headache, especially with a fever	
Have you had close contact (within 6 feet of an infected person for at least 15 minutes) with a person with confirmed COVID-19 within the last 14 days ?	
Have you recently traveled to an area where the local, Tribal, territorial, or state health department is reporting large numbers of COVID-19 cases as described in the Community Mitigation Framework?	
Do you currently live in an area of high community transmission?	

If the answer is "yes" to any of the health screening questions, testing staff need to determine if access to the test facility is denied.

- Complete an Irregularity Report indicating the reason the examinee was denied admittance, if the decision is made to deny entrance.
- Document all irregularities related to COVID-19.
- Test Administrators/Coordinators are required to notify the testing staff who serve on test day of any potential exposure to COVID-19, if they become aware that someone who was present at the testing site had a positive COVID-19 case.

Guidelines for Students, Caretakers and Accompanying Family Members

Inform students/caretakers via email at least two days prior to the test date, with the following directions:

- Students will be expected to adhere to face covering and physical distancing practices of six feet apart throughout the test day as determined by state and local guidelines[1].
- Caretakers and other family members not participating in the test will not be permitted to wait inside the test site. Caretakers should be prepared to wait in their cars or, if they live locally, leave and return once the test has ended[1].
- Families should be familiar with the signs and symptoms of COVID-19 by checking the CDC website.
- Caretakers are expected to complete a health screening questionnaire prior to the exam. An answer of "yes" to any of the health and wellness questions may result in exclusion on test day.
- It is the responsibility of caretakers to notify the school of any preexisting conditions such as

allergies or asthma.

- Cell phones will be collected from each student prior to entering testing room. Students will be provided with a Ziplock bag to place their phone in, which will be labeled with their name.
- Upon completion of testing, students may retrieve cellphones. Hands must be sanitized prior to reaching into container for phone.