LELAND PUBLIC SCHOOL
COVID MITIGATION DECISION-MAKING PROCESS
2021-2022
GOALS of DECISION MAKING PROCESS

1. To ensure the health, welfare, and safety of our students, staff, and school community

2. To stay in person and minimize disruptions to the learning environment, our families, and community engagement

3. To protect our school community using the most current and authoritative mitigation strategies at our disposal
COVID MITIGATION LEVELS

- **3**: FULL
- **2**: PRECAUTIONARY
- **1**: STANDARD

(*Only available to Office 365 subscribers*)

To insert your own icons: Insert > Icons
Recommended Mitigation Strategies

1. Vaccination
2. Masking
3. Frequent hand washing and use of hand sanitizer
4. Social distancing
5. Cohorting
6. Increased ventilation
7. Self-monitoring for symptoms
8. Rapid or non-antigen (PCR for example) testing
LPS Current Return to School Mode

1. Per local, regional, state, and CDC health professionals’ recommendations
2. Due to the increase in local case rates
3. Lack of herd immunity among school population
Considerations

➔ Following CDC, MDHHS, American Academy of Pediatrics, local health departments, local pediatricians, Munson, and MIOSHA guidance. For more information visit: MI Safe Start Data Tracking; Northwest Michigan Health Department Jurisdiction Data

➔ One building district with non-vaccinated elementary students mixed with other vaccinated 12-19 year olds. Rate of infection within the school will inform decision to move from mode to mode

➔ Vaccination rates among Leelanau County school aged children: 12-15 yr. olds = 54.1% and 16-19 year olds = 69.8% as of 8/10/21. Herd immunity starts at 70%; higher for Delta variant

➔ Delta variant more contagious than original strain, and new COVID infections predominantly among unvaccinated

➔ Local rates of infection have doubled in the last week alone. MI Safe Start Data Tracking.

➔ Many Michigan colleges are requiring vaccines and masks

➔ Personal responsibility vs. mandates requires us to look out for each other and the entirety of the school community both vaccinated and unvaccinated

➔ Masking and vaccinations worked in the spring. We relaxed mitigation protocols when numbers dropped, and we will be flexible when numbers drop again

➔ Vaccinated individuals can spread and become sick with Delta variant, albeit less severely; MDHHS recommends PCR testing 5 days post-exposure
Standard Mode

- Masks optional
- Federal mandate for masking on school sponsored transportation
- Optional masking but strongly recommended for after-school activities
- Frequent hand washing and use of hand sanitizer
- Routine cleaning protocols
- Volunteers and visitors check in with proof of completed vaccine
- Quarantine positive cases and unvaccinated, direct contacts when not masked or within 3 feet for 15 or more minutes
- Vaccinated individuals should get a PCR test within 3-5 days of exposure. Unvaccinated contacts need to quarantine for 10 days regardless of test results
Precautionary Mode

➔ Universal masking required indoors during normal school hours
➔ Federal mandate for masking on school sponsored transportation with seating chart
➔ Optional masking but strongly recommended for after school activities for aged 12 and up. Required for students (and anyone working with them) if younger than 12.
➔ Volunteers and visitors on invited basis with proof of completed vaccine
➔ Quarantine positive cases and unvaccinated, direct contacts when not masked or within 3 feet for 15 or more minutes
➔ Vaccinated individuals should get a PCR test within 3-5 days of exposure. Unvaccinated contacts need to quarantine for 10 days regardless of test results.
➔ 3-6’ of social distancing for more than 15 minute collaborations when able
➔ Standard lunch schedules with seating charts
➔ Home screening for symptoms before entering school
➔ Frequent hand washing and sanitizing
➔ Seating charts in classrooms
Full Mitigation Mode

➔ Universal masking required indoors, outdoors, and during all extracurricular activities and competitions
➔ Federal mandate for masking on school sponsored transportation
➔ Quarantine positive cases and unvaccinated, direct contacts when not masked or within 3 feet for 15 or more minutes
➔ Vaccinated individuals should get a PCR test within 3-5 days of exposure. Unvaccinated contacts need to quarantine for 10 days regardless of test results.
➔ Weekly rapid testing for athletics and after school activities
➔ 3-6’ of social distancing for more than 15 minute collaborations when able
➔ Cohorting during lunches with two cafes, dividers, and bag lunches
➔ No volunteers or visitors
➔ Increased cleaning, disinfecting, and ventilation protocols
➔ Potential to return to hybrid learning if school incidence warrant
➔ Return to prior MHSAA guidelines regarding concessions, tickets, overnight trips, spectators, scheduling, etc...
CDC, MDHHS, and LOCAL Health Professionals’ Guidelines

Prevention Strategies The most effective way to prevent transmission within school buildings, reduce disruptions to in-person learning and help protect people who are not fully vaccinated is to layer multiple prevention strategies recommended by CDC. All prevention strategies provide some level of protection, and layered strategies implemented at the same time provide the greatest level of protection. The key strategies recommended by the CDC to keep schools safer are as follows:

Promoting vaccination against COVID-19 for eligible staff and students. Vaccination has proven incredibly effective as the leading public health prevention strategy.

Consistent and correct mask use
- CDC recommends universal indoor masking for all educators, staff, students and visitors to schools, regardless of vaccination status.
- CDC has recommendations for proper use of masks.
- CDC’s order requires all persons – regardless of vaccination status – wear masks on public transportation, including school buses.

Physical distancing CDC recommends schools maintain at least three feet of physical distance between students within classrooms, combined with indoor mask wearing by students, teachers and staff, regardless of vaccination status. When it is not possible to maintain a three-foot physical distance, it is especially important to layer multiple other prevention strategies, such as indoor masking, screening testing, cohorting, and improved ventilation to help reduce transmission risk.

Screening testing identifies infected people, including those without symptoms who may be contagious, so that measures can be taken to prevent further transmission or outbreaks.

Ventilation
- Improving ventilation by opening multiple doors and windows, using child-safe fans to increase the effectiveness of open windows and making changes to the HVAC or air filtration systems.
- Avoiding crowded and/or poorly ventilated indoor activities (e.g., engaging in outdoor activities when possible).
- Open or crack windows in buses and other forms of transportation to improve air circulation, if doing so does not pose a safety risk.

Handwashing and respiratory etiquette: Promoting handwashing and covering coughs and sneezes.

Staying home when sick and getting tested
- Encouraging students and staff to stay home if sick or having COVID-19 symptoms.
- Encouraging students and staff, regardless of vaccination status, to get tested for COVID-19 if having symptoms or if they are a close contact of someone who has COVID-19.

Contact tracing in combination with quarantine: Collaborating with the local health department.

Cleaning and disinfection: Cleaning once a day is usually enough to sufficiently remove potential virus that may be on surfaces. Disinfecting (using disinfectants on the U.S. Environmental Protection Agency COVID-19 webpage) removes any remaining germs on surfaces, which further reduces any risk of spreading infection. CDC has information on routine cleaning to help maintain healthy facilities.

The following factors should be used when determining mitigation strategies: Level of community transmission of COVID-19. COVID-19 vaccination coverage in the community and among students, teachers and staff.
The Superintendent in consultation with the Leland Board of Education reserves the right to alter the plan or criteria. Centers for Disease Control & Prevention (CDC), Michigan Department of Health and Human Services (MDHHS), the State of Michigan, and Benzie-Leelanau Health Department (BLDHD) orders supersede this plan. This document will remain a work in progress and we will remain flexible and fluid depending on future data and recommendations.