



Monroe County Intermediate School District COVID-19 Preparedness and Response Plan

(Head Start, GSRP, ECSE, Early On/MMSE, 32p)

Draft: August 5, 2020

**This plan is subject to change based on further guidance from federal, state, and local authorities and MCISD may amend the plan based on operational needs.*



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I. MICHIGAN SAFE START PLAN: PHASES 1-3

During Phases 1-3 all schools will be closed for in-person instruction. MCISD Early Childhood programs will survey families regarding technology access and preferences during these phases and will support families with developing a plan for engaging in remote learning. The following includes a plan for learning at a distance for all MCISD Early Childhood Programs.

A. Preschool

Lesson Plans: Provide weekly, electronic lesson plans (common template for all educators) to families. (see lesson plan template [Sample Early Childhood Lesson Plan](#))

- a. Teachers, Teacher Assistants, and Teacher Consultants (or ECS, Mentor Teacher, etc.) plan lessons together by classroom during designated, weekly team meetings.
- b. Goal to use items at home for learning materials and to plan lessons based on student needs.
- c. Mail or deliver hard copies to families that do not have electronic access.
- d. Provide draft to supervisor/consultant by Friday at 10am via email.
 - i. ECSE-Director and TC
 - ii. Head Start-Education Coordinator and Mentor Teacher
 - iii. GSRP-Director and ECS
- e. Lesson plans will be reviewed and returned to staff by 2pm Friday via email.
- f. Teachers will send to families via classroom communication platform by 3pm.

Recorded Videos of Staff Presenting Lessons: Staff record one read aloud/learning activity per week to share with families via teacher communication platform. Read aloud should be aligned with Essential Instructional Practices for Early Literacy. Each classroom will also share one video featuring support staff weekly. These videos will be uploaded to YouTube and links will be shared with families via teacher communication platform.

Individualized Instruction and Parent Education Opportunities: Each teaching team schedules a one-to-one virtual visit with each family monthly via Zoom or phone call. Teams will work together to identify the primary service provider for each family who will conduct visits or develop a rotating schedule of primary contacts for family. This includes classroom staff as well as ancillary providers (speech, OT, SW, Psych, etc.). This is an opportunity to talk about how activities are going, problem solve barriers, answer questions, and provide resources. During each call the following components need to be addressed:

- g. **Lesson Plan Review:** Staff will ensure families received the lesson plan and inquire if they have any questions.
- h. **Parent/Child Activity:** Staff present each family with 1 individualized activity that aligns with their IEP/individualized child development goals that can be completed in the home environment.
- i. **Parenting Support:** Staff will ask parents or caregivers about any needs related to parenting support (challenging behavior, routines, sleep, communication, etc.).
- j. **Family Well-Being:** Staff will talk with parents or caregivers about general needs the family may have (food, diapers, etc.).
- k. **Closing/Parent Input Planning:** Staff will seek parent input on content they would like for the following week's individualized activity.
- l. All virtual visit needs will be documented and shared during team meetings.

Teaming and Collaboration: Staff will participate in team meetings weekly with all classroom support staff to debrief virtual visits and identify plans for additional support/resources needed. Refer to the [team meeting schedule](#) and [weekly documentation template](#) for the classroom. Team members follow up with individual families for additional support as needed.

Synchronous Instruction: Teaching teams will schedule synchronous learning opportunities to implement Large Group experiences via Zoom meetings with students and families. Families will also have opportunities to participate in Small Group learning experiences facilitated by classroom teams, and related service providers.

Spring Preschool-Kindergarten Transition Support: During the final virtual home visit of the school year, staff will collaboratively complete the [MCISD transition form](#) for each child and review district registration paperwork questions with each family. Transition packets will be shared electronically with the anticipated receiving LEA building administration.

Mental Health Screening: All programs will conduct screening to address the mental health needs of students using a developmentally appropriate screening tool for preschool-aged students. A designated team member (Social Worker/Mental Health Consultant/Early Childhood Specialist) will follow up with families to determine a plan of support in response to mental health concerns.

Developmental Screening for HS/GSRP Students: During phases 1-3, Head Start and GSRP program staff will conduct a developmental screening with the guardians of enrolled students to assist staff in the identification of students who may display developmental delays. Staff will use a developmentally appropriate screening tool for preschool-aged students (Ages and Stages Questionnaire). Program staff will follow up with families to determine a plan of action in response to screening concerns identified.

Assessment: All programs will conduct ongoing assessment of individual students using Teaching Strategies Gold. Staff will conduct assessment checkpoints three times annually. During phases 1-3, staff will capture ongoing assessment data virtually, relying heavily on parent input.

Support staff roles and responsibilities: During phases 1-3, staff may be utilized in alternative ways to support individual program and family needs.

Grade Level	Curriculum/Resources	Daily Learning Time
<p>Early Childhood</p> <p>Preschool: ECSE Head Start GSRP</p>	<p>Resources:</p> <ul style="list-style-type: none"> ● Creative Curriculum ● Individual IEP/IFSP Goals and Objectives ● Individual Child Goals ● TS Gold Classroom Connect <p>Assessments:</p> <ul style="list-style-type: none"> ● TS Gold ● Documented observations or consultation with staff ● Submitted student work samples ● Progress on IEP Goals and Objectives ● Ages and Stages Questionnaire 	<p>Minutes of Daily Instruction (approximate):</p> <p>Daily Learning time can include:</p> <ul style="list-style-type: none"> •5-minute increments <ul style="list-style-type: none"> ● hands-on activities between instruction ● imaginative play ● creative arts ● music and movement ● outdoor exploration ● fine/gross motor activities <p>5 minutes: Daily Routines/Traditions (review daily schedule, engage in connection activities, review the calendar/date, etc. - teachers can provide ideas that overlap with familiar school routines)</p> <ul style="list-style-type: none"> ○ 5 minutes: Story Time (video from teacher or read to by caregiver) ○ 5 minutes: Brain Break (music and movement - ideas provided by teacher) ○ 5 minutes: Introduce new content (video from teacher or instructed by caregiver) ○ 10 minutes: Hands-on activity related to content or story (activities provided by teacher) <p>Extra Suggestions for Extending Learning</p> <ul style="list-style-type: none"> •30-60 minutes of outdoor play •10-20 minutes of reading with family (books of their choice) •90+ minutes of imaginative play

B. Infants/Toddlers (Programs/Grants: Early On, 32p Home Visiting, EHS, CMHPSM, CTF):

Recorded Videos of Staff Presenting Lessons: Each provider records one read aloud/learning activity a week to share with families via provider communication platform. These videos will be uploaded to YouTube and links will be shared with families via provider communication platform.

Virtual Home Visits: Each provider schedules a one-to-one virtual visit with each family using frequency required by your program (EHS: weekly, EO as required by IFSP, etc.) via Zoom or phone call. Teams will work together to identify the primary service provider for each family who will conduct virtual home visits. This includes teachers/home visitors as well as ancillary providers (speech, PT, OT, SW, Psych, etc.) This is an opportunity to talk about how activities are going, problem solve barriers, answer questions, and provide resources. During each call the following components need to be addressed:

- a. **Parent/Child Activity:** Providers present each family with 1 individualized activity that aligns with their IFSP/individualized child development goal that can be completed in the home environment.
- b. **Parenting Support:** Providers will ask parents or caregivers about any needs related to parenting support (challenging behavior, routines, sleep, communication, etc.).
- c. **Family Well-Being:** Providers will talk with parents or caregivers about general needs the family may have (food, diapers, etc.).
- d. **Closing/Parent Input Planning:** Providers will seek parent input on content they would like for the next visit's individualized activity.
- e. All virtual visit needs will be documented in a Google sheet to be shared during team meetings.

Teaming and Collaboration: Staff will participate in staff meetings weekly with all support staff to debrief virtual visits and identify plans for additional support/resources needed. Refer to the [team meeting schedule](#) and [weekly documentation template](#) for the team. Team members follow up with individual families for additional support as needed.

Synchronous Learning Opportunities: Providers will schedule synchronous learning through scheduling and implementing playgroups via a Zoom meeting with students and families.

Mental Health Screening: All infant/toddler providers will conduct screening to address the mental health needs of families using any appropriate screening tool. A designated team member (Social Worker/Mental Health Consultant) will follow up with families to determine a plan of support in response to mental health concerns.

Assessment: All programs will conduct ongoing assessment of individual students using Teaching Strategies Gold. Staff will conduct assessment checkpoints three times annually. During phases 1-3, staff will capture ongoing assessment data virtually, relying heavily on parent input.

*Infant/toddler daily learning time based on individual needs and embedded within naturally occurring daily routines

Additional Early On Procedures

- Early On referrals, evaluations, and services will continue in a modified format. Alternate modes of communication/interaction will be used to implement services, evaluations, assessments, initial IFSPs, periodic reviews, annual IFSPs and transition plans/conferences, in place of in-person visits and meetings. Each family's needs, resources and preferences will be taken into consideration and staff members may use the following modes of service delivery/communication: video conferencing, audio conferencing, sharing video recordings, telephone interactions, printed materials, email, text messages, and using postal delivery services.
- Documentation: All Early On services will be documented in PSSP, including contacts with families indicating that they wish to suspend services and/or delay meetings due to the impact of COVID-19 on their family. Attempts to contact families will be documented in PSSP Contact Log, and all services that are provided will be documented in Service Capture.
- Eligibility Determinations and Evaluations: Evaluation teams will continue to use all existing evaluation information to determine if there is enough information to make eligibility determinations for Part C and for MMSE. This will include use of established conditions, informed clinical opinion, and to the best of our ability, administration of standardized assessments virtually with parent support. Possible modes of completing evaluations and assessments will be based on family needs and resources. Staff members may use the following modes of communication when conducting evaluations: video conferencing, audio conferencing, sharing video recordings, telephone interactions, printed materials, email, text messages, and using postal delivery services.

- Consent and Signatures: Adobe Sign will be used to gather electronic signatures indicating parent consent for evaluations and services as feasible. In cases when it is impossible to obtain electronic signatures, staff will document verbal consent received in an email to families, and upload email into PSSP as a file-based document.

C. Great Start Collaborative

The Great Start Collaborative and Great Start Parent Coalition will continue to implement activities virtually for the duration of school closures. GSC/GSPC meetings will continue to engage community partners and families in virtual, monthly meetings to focus on action agenda items and supporting families with young children during the COVID-19 crisis. The GSC/GSPC will continue to distribute information and resources to families electronically via email and social media.

II. MICHIGAN SAFE START PLAN: PHASES 4-5

During Phases 4-5 in-person instruction is permitted with required safety protocols. MCISD Early Childhood Programs will implement the following safety measures in all programs:

A. Preschool

Monitoring Symptoms of COVID-19

MCISD will monitor symptoms of COVID-19 as recommended by the State of Michigan and by following the guidance provided by the Monroe County Health Department. The necessary supplies will be provided to all locations and classrooms. Staff members will be trained on monitoring procedures and specific staff will be assigned to conduct monitoring at each location. Arrival and dismissal times and procedures will be restructured to minimize the potential spread of COVID-19.

Commonly Seen Symptoms of COVID-19

- Fever of 100.4 or higher
- A new uncontrolled cough that causes difficulty breathing
- New onset of severe headache
- New loss of taste or smell
- Sore throat
- Abdominal pain
- Vomiting
- Diarrhea

The following procedures will be adhered to ensure the proper screening of staff, children, parents/caregivers, and classroom visitors for COVID-19 symptoms.

Children

Prior to children's arrival (either at drop off or when boarding school bus):

- Parents/guardians will perform and record temperature checks and answer the following questions via Google form.
 - Has your child been in close contact with a person who has a positive COVID-19 test?
 - Is your child currently experiencing any of the COVID-19 Symptoms? (listed on page 10)
 - If families answer yes to either question, their child will be excluded until the return to school conditions have been met as outlined below in the section **Procedures for COVID exclusions and return to school**
- MCISD staff will visually check the child for signs of illness, including all known COVID-19 symptoms (as listed on page 12).
- MCISD staff will continue to monitor symptoms throughout the day and monitor temperatures when children appear ill or "not themselves."
- Each school building will identify a staff person who will be responsible for handling questions and reporting about COVID-19 concerns. All MCISD staff will know who this person is and how to contact them.

Staff

Prior to entering a school building, MCISD staff must self-screen utilizing the MCISD Workplace Screening Survey. MCISD staff will take their temperature daily and answer the following questions:

- Have you ever tested positive for COVID-19?
- Are you currently awaiting the results of a COVID-19 test?
- Have you had contact with a COVID-19 positive person in the last 14 days?
- Do you have any of the following known COVID-19 symptoms?
 - Fever of 100.4 or higher
 - A new uncontrolled cough that causes difficulty breathing
 - New onset of severe headache
 - New loss of taste or smell
 - Sore throat
 - Abdominal pain
 - Vomiting
 - Diarrhea
- If staff answer yes to any question, they should contact Betsy Taylor at 734-322-2640 immediately for further guidance. They will be excluded from work until the return to school conditions have been met as outlined below in the section **Procedures for COVID exclusions and return to school**

Families

MCISD staff will share with families the importance of the COVID -19 health and safety guidelines and encourage transparency with communication.

Families will be informed in advance of daily temperature checks and the protocol for sending children and staff home.

Families will be asked to report possible illness if anyone in their household shows symptoms or has tested positive for COVID-19, including the child or family members if they or their children experience possible symptoms or have a positive test.

Procedures for COVID exclusions and return to school: Preschool

Isolation procedures

MCISD understands the critical role schools have in helping communities limit the spread of the virus. People who become ill while in care will be isolated.

- If a child becomes ill while at school, the child will be isolated in a designated location until the child can be picked up within 30 minutes of parent/caregiver notification.
- Proper health and safety precautions will be taken while the child is waiting to be picked up. This includes staff wearing masks, gloves and disinfecting the space once the child has been picked up.
- If a staff member begins to feel ill during the day, they will be sent home immediately.
- MCISD will contact our local health department for guidance and best practices and to determine if the classroom or school location must close.

Exclusion of children and staff with COVID-19 symptoms (based upon guidance provided by Monroe County Health Department): Preschool

1. If a child or staff member reports COVID-19 symptoms, they will be excluded from school until one of the following indicators are met.
 - a. They are 24 hours with no fever (without fever-reducing medication) AND symptoms have improved AND 10 days have passed since symptoms have first appeared.
 - b. Their health care provider has provided them with an alternative diagnosis for their symptoms and released them back to work/school.
 - c. Provide documentation of a negative COVID-19 diagnostic test (nose/throat swab) and symptoms have improved.

2. If a child or staff member reports that they have tested positive for COVID-19 or they have been in close contact with a person with a positive COVID-19 test, the following indicator must be met. Close contact is defined as someone being within 6 feet of an infected person, masked or unmasked, for at least 15 minutes.

The student or staff is excluded from school until 10 days since they were swabbed for the test that yielded a positive COVID-19 result OR 10 days past the last known close contact exposure to COVID-19 positive person. If one or more negative tests are received during the 10-day period, it does not change the length of the quarantine period and does not allow them to return to school.

3. If a child or staff member reports close contact with a person with COVID-19 symptoms or a pending COVID-19 test, the following indicator must be met:
 1. Household members and classmates and other close contacts of a symptomatic, but undiagnosed person, or a quarantined person may continue to attend school and self-monitor for symptoms.
 2. If the household member or contact tests positive for COVID-19, they should follow number 2 above

Mitigation Strategies

Hybrid Learning Plan:

ECSE: In order to minimize the risk of exposure between AM and PM sections and to have ample time to disinfect materials, classrooms and buses, the ECSE program will follow a hybrid learning plan that includes both face-to-face instruction and learning from a distance opportunities. All students assigned to the “A” section will attend school in person two days a week. All students assigned to the “B” section will attend school in person two opposite days per week. The length of the day will be extended, and students will be in session from 8:40 am -1:25 pm (361 hours per year, 76 days of face-to-face instruction, 76 days of remote instruction). Students whose developmental needs necessitate a shorter school day will be transported home at 11:40 am. In addition to in-person instruction, remote learning opportunities will include parent/child activities designed to promote development in all areas that can be implemented at home. This will include a calendar of developmentally appropriate activities, recordings of providers implementing developmentally appropriate activities, and synchronous learning opportunities via Zoom with MCISD staff. MCISD staff will implement this remote instruction after student departure daily. Families with children whose medical needs necessitate that they receive instruction in the home environment will also be engaged in these remote learning opportunities. The district is still pursuing options of how to be able to provide 4 half days of instruction per week and will be re-evaluating this plan at the first semester. This plan is dependent upon forthcoming guidance from the Michigan Department of Education.

GSRP and Head Start : In order to comply with the CDC and LARA best practices for group size to minimize exposure and mitigate community spread, MCISD GSRP/HS will follow a hybrid learning environment that includes both face-to-face instruction and learning from a distance opportunities during phases 4-5. Students will attend two days a week in person and be offered virtual learning experiences on the days not in session at school. Virtual learning opportunities will include parent/child activities designed to promote development in all areas that can be implemented at home. This will include a calendar of developmentally appropriate activities, recordings of providers implementing developmentally appropriate activities, and synchronous learning opportunities via Zoom with MCISD staff. MCISD CBOs (Speckled Frog and Discover Our World) will implement a full face-to-face GSRP experience with COVID-19 precautions in place during phases 4-5. They will implement learning at a distance in phases 1-3 in accordance to the MCISD plan outlined in section I. This plan is dependent upon forthcoming guidance from the Michigan Department of Education and the Office of Head Start.

Maintaining Consistent Groups

- Consistent teaching staff will be assigned to each classroom.
- Contact with external program staff and between classroom groups will be limited.

Preparing Physical Spaces

- Toys and objects that cannot be easily cleaned or sanitized between use will be temporarily removed from classrooms.
- Duplicates and alternative toys will be kept on hand for rotation into the classroom, to replace those that are removed for cleaning.
- Dramatic play materials for dress-up play will be temporarily removed from classrooms.
- Sand and water tables in classrooms will not be used. Sensory play will occur in individual bins for one child to use at a time. Materials that cannot be cleaned and sanitized will be discarded after each use.
- Playground equipment will be sanitized between classroom group usage or in accordance with local district procedure.
- Rearrange classroom seating and interest areas to maintain 6 feet between children whenever possible.
- Touchless trash cans will be provided for a hands-free way to dispose of tissues and other materials in the classrooms.

Limit Use of Common Spaces

- Common building spaces, such as gyms and playgrounds, will not be used by more than one classroom group at a time.
- Classrooms will be provided with a schedule of gym and outdoor times.
- MCISD will identify a staff member designated to clean shared spaces between the classroom groups.
- There will be no special school events that convene larger groups of children and families until it is determined that it is safe to do so.

Arrival and Dismissal Procedures

To minimize the potential spread of COVID-19, MCISD will limit the number of adults in the school buildings. School drop off and pick up times will be restructured to allow for maximum social distancing.

- Parents/caregivers will be required to wear masks during school drop off and pick up times, and exchange of students will happen outside of the school building in designated areas.
- MCISD will stagger arrival and drop off times and plan to limit direct contact with parents to the extent possible. Each center and classroom will establish routines to minimize the number of people in the building or room at any time. This may include:
 - MCISD staff meeting children at the cars, near the building, and escorting them into and out of the school building.
 - School buildings having hallway space available for drop offs and pickups will have social distancing expectations clearly communicated.
 - Directing parents/caregivers to drop off and pick up at the classroom's outside entrance, rather than going through the school building, where possible.
- Families/caregivers will need to limit the number of people dropping off or picking up a child at school to one adult.
- Families will be reminded to avoid congregating in a single space or large group while waiting for their child or teacher.

Limit Non-essential Visitors and Volunteers

MCISD will restrict non-essential visitors, volunteers, and activities including groups of children or adults from coming into the classrooms. When it is necessary to have an essential worker for custodial needs, repairs, deliveries, inspections, etc. they will be required to wear a mask and adhere to social distancing recommendations.

MCISD will accept student teachers into classrooms for the purpose of face-to-face student teaching experiences with the approval of all classroom staff members. Student teachers will be expected to adhere to all health and safety standards outlined in this plan under "staff".

Cleaning, Disinfecting, and Hygiene Practices

MCISD will reinforce the best practices already in place with staff and children to limit the spread of COVID-19.

Hand washing

The programs will continue to reinforce regular health and safety practices with children and staff. In order to limit the number of illnesses that come into the classrooms, the following handwashing steps are used and posted at every sink per LARA guidance:

- Wet hands and apply a small amount of liquid soap.
- Rub hands together vigorously for at least 20 seconds or the time needed to sing ABCs.
- Get a paper towel and dry hands.
- Use the paper towel to turn off the water.
- Hand sanitizers should not be used in place of proper hand washing at any time in the classroom when there is available running water. If hand sanitizer is used, it will be an alcohol base with at least 60% alcohol.

Children and staff will be expected to wash their hands at the following times:

- Before, during, and after preparing food
- Before eating food
- Before and after caring for someone who is sick or treating a cut or wound
- After using the bathroom
- After assisting children in the bathroom with diapering and/or toileting
- After blowing your nose, coughing, or sneezing
- After touching garbage
- Upon entering the classroom at any time (from the bus, from outside, from another classroom)

Cleaning and Disinfecting

- Common areas require at least a daily deep clean (for example, sinks, bathrooms, doorknobs, tabletops, and shared items). Areas used by more than one group of children will be cleaned and disinfected between groups.
- MCISD staff will closely supervise to ensure that toys are cleaned after each child uses them (especially if a child has mouthed the toy). Each room will be prepared with a set of clean duplicates of some materials and a “used toy box” for heavily used items to be disinfected.

Items from Home/Personal Items

- MCISD staff will require families to limit the number of personal items brought into the school building and classroom.
- Nap blankets and comfort items will be stored in a cubby, bin or locker and be used at naptime. If possible, these items should remain in the classroom to avoid cross contamination from another site. Items will be sent home weekly to be washed, or at the school location where available.

Safety Equipment and Personal Protective Equipment (PPE)

Personal protective equipment (PPE) is necessary in many settings to keep individuals safe. MCISD staff will use these guidelines, as well as technical assistance from the United States Department of Labor, Occupational Safety and Health Administration.

- **Masks or Cloth Face Coverings: For MCISD Staff**

- MCISD staff will wear face coverings except during meals and unless face coverings cannot be medically tolerated. Staff are to contact Human Resources if unable to medically tolerate a mask.
- MCISD will make masks available to all staff. By Executive Order, Governor Whitmer required all employers whose workers perform in person work to provide non-medical grade face coverings to their workers. Cloth face coverings, such as a homemade mask, scarf, bandana, or handkerchiefs, are best. N95 masks and surgical masks are not recommended at this time. The CDC provides more guidance for how to properly wear and sanitize a cloth face covering.
- MCISD staff who wish to provide their own masks may do so. Staff will be expected to properly wear and sanitize their personal masks daily.

- **Masks or Cloth Face Coverings: For Children**

- All students over 2 years of age will wear a face covering when on a school bus, in indoor hallways, and common areas unless face coverings cannot be medically tolerated, or unable to remove the facial covering without assistance.
- Families who wish to provide their child with their own facial covering to be worn on the school bus and in indoor hallways, and common areas may do so. For those families who do not provide their students with their own facial covering, MCISD staff will provide them with a disposable paper mask.

- All disposable paper masks will be disposed of at the end of each day. Homemade facial coverings must be washed daily.
- Facial coverings will not be mandated for students in classrooms.
- Cloth face coverings should never be placed on anyone who has trouble breathing, or anyone unable to remove the face covering without assistance.
- All MCISD early childhood programs will follow guidance provided below by Michigan Licensing and Regulatory Affairs in accordance with Executive 2020-164:

Phase	Environment	Staff	Children Ages 2-3	Children Ages 4-11	Children Ages 12 and up	Parents and visitors
Phases 1-4	Classrooms, Small Groups, and Homes	Required	Should be encouraged*	Should be encouraged*	Required	Required
	Common spaces	Required	Should be encouraged*	Required	Required	Required
	Outside with social distancing	Not required	Not required	Not required	Not required	Not required
	Transportation	Required	Required	Required	Required	Required
Phase 5	All environments	Providers are strongly encouraged to continue wearing cloth face coverings as described in phases 1 through 4.				

* Although cloth face coverings are not required in these settings, they should be encouraged if tolerated.

There are exceptions. Children under 2 should never wear a mask. Anyone that cannot medically tolerate a mask should not wear one. And masks are not appropriate during some activities including meal time, sleeping, swimming, and some high intensity activities.

- **Gloves**

- MCISD will continue the current practice of using gloves to prevent the spread of illness. MCISD staff should wear gloves when handling contaminated items, changing diapers, assisting with toileting, or cleaning. Gloves are not recommended for broader use.
- Non-latex gloves are provided for the above purposes. MCISD staff members should wash hands before putting gloves on and immediately after gloves are removed. Gloves are intended for single use and should be discarded in a covered container.
- Food service gloves are provided for serving food to children and should only be worn for that purpose. Staff members should wash hands before and after wearing these gloves, as well.

Partnering and Communicating with MCISD Staff Members

Staffing Plans

- Directors will assess staffing needs based on projected enrollment, the need to limit exposure across groups, and the need to practice social distancing.
- Staffing plans will include substitutes and alternative teaching staff to address the potential need to quarantine staff or allow for longer absences from the classroom than normal.

Staff Training

MCISD will provide all early childhood staff with training about COVID-19. This may include how COVID-19 is transmitted, signs and symptoms of COVID-19, steps employees must take to notify MCISD of signs and symptoms of COVID-19 and a suspected or confirmed diagnosis, and the measures the MCISD will be taking to limit the spread of the virus.

Other Considerations

Food Service

- Meal service will be modified so that programs are not implementing family style meals during phases 4-5.

Rest Time

- Bedding will be sent home weekly to be washed or will be laundered at the facility, as available.
- Children's nap materials will be stored in individually labeled bins, cubbies, lockers, or bags.
- Children's naptime cots/mats will be spaced out as much as possible, ideally 6 ft apart
- If cots/mats cannot be 6 ft apart, children will be asked to rest head-to-toe (i.e., one child with their head at the top of the mat, the next child over with their head at the bottom of the mat)

Transportation

Prior to children boarding the bus:

- Parents/guardians will perform and record temperature checks and answer the following questions via google form.
 - Has your child been in close contact with a person who has a positive COVID-19 test?
 - Is your child currently experiencing any of the COVID-19 Symptoms? (listed on page 10)
 - If families answer yes to either question, their child will be excluded until the return to school conditions have been met as outlined below in the section **Procedures for COVID exclusions and return to school**
- MCISD staff will visually check the child for signs of illness, including all known COVID-19 symptoms (as listed on page 10).
- MCISD staff will continue to monitor symptoms throughout the ride to/from school and monitor temperatures when children appear ill or "not themselves."
- All staff and students will wear a face covering when on a school bus, unless face coverings cannot be medically tolerated, or an individual is unable to remove the facial covering without assistance.
- Seating arrangements will be modified to allow for children and staff to be seated 6 ft apart, when possible.
- Buses will be sanitized between each group of children and/or route.

B. Infant and Toddler/Home Visiting Services

Due to the infant/toddler programs offered through MCISD being home-based, MCISD relied upon guidance provided in the Guidelines for Resuming Home-based Early Childhood Services ([Home Visiting Guidance](#)) when developing program plans to return to face-to-face programming during phases 4-5 of Michigan's Safe Start Plan.

As state and local early childhood professionals:

- We will put the safety of young children, families, and providers first. We all have a central role in limiting the spread of COVID-19, and we must maintain safety efforts and vigilance to prevent further spread. We will continue to utilize guidance and regulation provided by the State of Michigan, and we will continue to consult with our local Health Department to make decisions as we slowly resume face-to-face home visiting.
- We will be equitable. It is especially important to continue early childhood services during the COVID-19 pandemic when many families are experiencing additional economic hardships, social isolation, and stressors. We will consult with families to make decisions about how, when, and where services occur based on what is best for young children, families, and providers—especially those most affected by COVID-19. For families who opted out of virtual services previously, we will continually reassess their interest in services as service delivery methods change.
- We will be flexible in how we respond. While in-person services are preferred, there are many virtual/remote options that provide pregnant women, young children, and families the support they need. These options will continue to be a central part of our service delivery strategy throughout the COVID-19 pandemic, especially for those with chronic or complex health conditions. We are prepared to shift back to virtual services as the need arises for individual families or providers, or across portions of or entire services areas.

Hybrid Schedule

Due to the nature of home visitor's work and the nature of the office space a hybrid in-person/remote schedule is recommended. During phases 4-5, Home Visitors will begin to implement some in-person services on an as needed basis. Priority for in-person services will be scheduled according to family comfort level and will include:

1. Families with limited connectivity/internet access.
2. To address critical health and safety issues that are not able to be addressed remotely.
3. Evaluations that cannot be conducted remotely.
4. Enrollments that cannot be conducted remotely.
5. Parent/Child Interaction Groups-For children and families who regularly attend parent/child interaction groups for the purpose of receiving Special Education Services, all mitigation strategies listed above will be implemented including screenings, hygiene, face coverings, and social distancing. Special Education Providers will meet with small groups of no more than 3-4 children and one caregiver for one hour. Additional remote learning opportunities (synchronous and asynchronous) will be made available throughout the week for these families. Early On and Early Head Start Socializations will be held remotely through Phases 1-5.

In-person services may take place on-site at MCISD, in an outdoor area, or in the home, observing all safety precautions and with mitigation strategies outlined below (see below). To protect confidentiality of families and other privacy/FERPA concerns, it is not recommended that Home Visitors conduct remote visits from their cubicle areas.

Home Visitors will need to access the office for the following purposes:

1. Filing documents
2. Making copies
3. Mailing documents
4. Obtaining materials
5. Other clerical tasks
6. Conducting prioritized in-person services with families including evaluations/enrollments

All Home Visitors will have access to the MCISD building 2 days per week based on an assigned rotation schedule. The other scheduled working days the home visitors will conduct visits in the field or conduct remote visits off-site. All staff members will share their calendars electronically for the sake of accountability and supervisors/consultants will monitor documentation of visits as well as schedule monthly co-visits with families. The following in-office schedule is based on the physical space available in the special education service center office area so that staff can maintain at least 6 ft distance from each other:

	Monday	Tuesday	Wednesday	Thursday	Friday
In Office	Group A	Group B	Group A	Group B	Non-Scheduled
In Field/Remote	Group B	Group A	Group B	Group A	EHS Groups A and B

Assessing Readiness of Resuming Infant/Toddler Face-to-Face Services

A. Staff

Home Visitors are assessed on their readiness to return to in-person services taking into consideration the following:

- The availability of required PPE to ensure guidelines in this document can be fully implemented.
- Identify which staff members are part of the vulnerable population or are the primary caregiver for an individual that is part of the vulnerable population. This includes individuals who have a weakened immune system, are over the age of 65, have chronic health conditions, or [other COVID-19 risk factors](#), as identified by the Centers for Disease and Protection (CDC). Administrators will hold conversations with staff who are identified as part of the vulnerable population and who may need accommodations/a plan to support and engage families virtually and/or remotely vs. in person.

Children and Families

Children and families are assessed on their readiness to return to in-person services taking into consideration the following:

- The availability of required PPE to ensure guidelines in this document can be fully implemented.
- Identify which families are part of the vulnerable population or are the primary caregiver for an individual that is part of the vulnerable population. This includes individuals who have a weakened immune system, are over the age of 65, have chronic health conditions, or [other COVID-19 risk factors](#), as identified by the Centers for Disease and Protection (CDC). Staff will hold conversations with families who are identified as part of the vulnerable population and who may need accommodations/a plan to support and engage them virtually and/or remotely vs. in person.

Monitoring Symptoms of COVID-19

MCISD staff will monitor symptoms of COVID-19 as recommended by the State of Michigan and by following the guidance provided by the Monroe County Health Department. The necessary supplies will be provided to all in-person locations and staff. Staff members will be trained on monitoring procedures.

Commonly Seen Symptoms of COVID-19

- Fever of 100.4 or higher
- A new uncontrolled cough that causes difficulty breathing
- New onset of severe headache
- New loss of taste or smell
- Sore throat
- Abdominal pain
- Vomiting
- Diarrhea

The following procedures will be adhered to ensure the proper screening of staff, children, and parents/caregivers, for COVID-19 symptoms prior to any face-to-face work.

Staff

Prior to entering a school building, home, community agency for a work-related reason, MCISD staff must self-screen utilizing the MCISD Workplace Screening Survey. MCISD staff will take their temperature daily and answer the following questions:

- Have you ever tested positive for COVID-19?
- Are you currently awaiting the results of a COVID-19 test?
- Have you had contact with a COVID-19 positive person in the last 14 days?
- Do you have any of the following known COVID-19 symptoms?
 - Fever of 100.4 or higher
 - A new uncontrolled cough that causes difficulty breathing
 - New onset of severe headache
 - New loss of taste or smell
 - Sore throat
 - Abdominal pain
 - Vomiting
 - Diarrhea
- If staff answer yes to any question, they should contact Human Resources immediately for further guidance. They will be excluded from work until the return to school conditions have been met as outlined below in the section **Procedures for COVID exclusions and return to school.**

Children and Families

Prior to the in-person contact (either at the home, in public setting):

- MCISD staff will assess the family’s willingness to participate in face-to-face services.
- MCISD staff will request the parent limit the number of people participating in the visit to allow for appropriate social distancing to occur, recognizing this may not always be possible.
- Parents/guardians will perform and record temperature checks and answer the following questions via Google form:
 - Have you, your child or any other member of the household been in close contact with a person who has a positive COVID-19 test?
 - Are you, your child or any other member of the household currently experiencing any of the COVID-19 Symptoms? (listed on page 28)
 - If families answer yes to either question, their child will be excluded from face-to-face services until the return to school conditions have been met as outlined below in the section **Procedures for COVID exclusions and return to school**
- MCISD staff will visually check the child and parent/guardian for signs of illness, including all known COVID-19 symptoms (as listed on page 28).
- MCISD staff will continue to monitor symptoms throughout the visit and monitor temperatures when those participating in the visit appear ill or “not themselves.”
- Each school building will identify a staff person who will be responsible for handling questions and reporting about COVID-19 concerns. All MCISD staff will know who this person is and how to contact them.

Prior to the in-person contact at the MCISD:

- MCISD staff will assess the family's willingness to participate in face-to-face services.
- MCISD staff will inform families that due to limited space in evaluation rooms, one parent/guardian will be permitted to attend the in-person services when conducted at the MCISD.
- Parents/guardians will perform and record temperature checks and answer the following questions via google form.
 - Have you, your child or any other member of the household been in close contact with a person who has a positive COVID-19 test?
 - Are you, your child or any other member of the household currently experiencing any of the COVID-19 Symptoms? (listed on page 28)
 - If families answer yes to either question, their child will be excluded from face-to-face services until the return to school conditions have been met as outlined below in the section **Procedures for COVID exclusions and return to school**
- MCISD staff will visually check the child and parent/guardian for signs of illness, including all known COVID-19 symptoms (as listed on page 28).
- MCISD staff will continue to monitor symptoms throughout the visit and monitor temperatures when those participating in the visit appear ill or "not themselves."
- Each school building will identify a staff person who will be responsible for handling questions and reporting about COVID-19 concerns. All MCISD staff will know who this person is and how to contact them.

Procedures for COVID exclusions and return to school: Infants/Toddlers

Isolation procedures

MCISD understands the critical role schools have in helping communities limit the spread of the virus.

- If a child or person participating in a visit begins to feel ill during the visit, the staff member will end the visit immediately.
- If a staff member begins to feel ill during the day, they will be sent home immediately.
- MCISD will contact our local health department for guidance and best practices and to determine if the classroom or school location must close.

Exclusion of children, household members or staff members with COVID-19 symptoms (based upon guidance provided by Monroe County Health Department)

1. If a child, household member, or staff member reports COVID-19 symptoms, they will be excluded from face-to-face services until one of the following indicators are met:
 - a. They are 24 hours with no fever (without fever-reducing medication) AND symptoms have improved AND 10 days have passed since symptoms have first appeared.
 - b. Their health care provider has provided them with an alternative diagnosis for their symptoms and released them back to work/school.
 - c. Provide documentation of a negative COVID-19 diagnostic test (nose/throat swab) AND symptoms have improved.

2. If a child, household member or staff member reports that they have tested positive for COVID-19 or they have been in close contact with a person with a positive COVID-19 test, the following indicator must be met. Close contact is defined as someone being within 6 feet of an infected person, masked or unmasked, for at least 15 minutes.

The child, household member or staff member are excluded from face-to-face services until 10 days since they were swabbed for the test that yielded a positive COVID-19 result OR 10 days past the last known close contact exposure to COVID-19 positive person. If one or more negative tests are received during the 10-day period, it does not change the length of the quarantine period and does not allow them to return to school.

3. If a child, household member or staff member reports close contact with a person with COVID-19 symptoms or a pending COVID-19 test, the following indicator must be met:
 - a. Children, household members, and staff of a symptomatic, but undiagnosed person, or a quarantined person may continue to attend in person related activities and self-monitor for symptoms.
 - b. If the child, household member or staff tests positive for COVID-19, they should follow number 2 above.

Mitigation Strategies

Limit Use of Common Spaces

- Common building spaces, such as socialization rooms and evaluation rooms, will be available for use on a limited basis, for the following reasons:
 1. Families with limited connectivity/internet access
 2. To address critical issues that are not able to be addressed remotely
 3. Evaluations that cannot be conducted remotely
 4. Enrollments that cannot be conducted remotely
 5. Parent/Child Interaction Groups-For children and families who regularly attend parent/child interaction groups for the purpose of receiving Special Education Services, all mitigation strategies listed above will be implemented including screenings, hygiene, face coverings, and social distancing. Special Education Providers will meet with small groups of no more than 3-4 children and one caregiver for one hour. Additional remote learning opportunities (synchronous and asynchronous) will be made available throughout the week for these families. Early On and Early Head Start Socializations will be held remotely through Phases 1-5.

Preparing Physical Spaces

- Toys and objects that cannot be easily cleaned or sanitized between use will be temporarily removed from socialization and evaluation rooms.
- Duplicates and alternative toys will be kept on hand for rotation into the socialization and evaluation rooms, to replace those that are removed for cleaning.
- Dramatic play materials for dress-up play will be temporarily removed from socialization and evaluation rooms.
- Sand and water tables will not be used. Sensory play will occur in individual bins for one child to use at a time. Materials that cannot be cleaned and sanitized will be discarded after each use.
- Playground and large motor equipment will be sanitized between group usage or in accordance with local district procedure.
- Rearrange socialization and evaluation room seating to maintain 6 feet between people whenever possible.
- Touchless trash cans will be provided for a hands-free way to dispose of tissues and other materials in the socialization and evaluation rooms.

Limit Non-essential Visitors and Volunteers

MCISD will restrict non-essential visitors, volunteers, and activities including groups of children or adults from coming into the socialization and evaluation rooms. When it is necessary to have an essential worker for custodial needs, repairs, deliveries, inspections, etc. they will be required to wear a mask and adhere to social distancing recommendations.

Cleaning, Disinfecting, and Hygiene Practices

MCISD will reinforce the best practices already in place with staff, families, and children to limit the spread of COVID-19.

Hand washing

The programs will continue to reinforce regular health and safety practices with children, families, and staff. To limit the number of illnesses transmitted during face-to-face services, the following handwashing steps are used and posted at every sink per LARA guidance:

- Wet hands and apply a small amount of liquid soap.
- Rub hands together vigorously for at least 20 seconds or the time needed to sing ABCs.
- Get a paper towel and dry hands.
- Use the paper towel to turn off the water.
- Hand sanitizers should not be used in place of proper hand washing at any time in the classroom when there is available running water. If hand sanitizer is used, it will be an alcohol base with at least 60% alcohol.

Children, families, and staff will be expected to wash their hands at the following times:

- Before, during, and after preparing food
- Before eating food
- Before and after caring for someone who is sick or treating a cut or wound
- After using the bathroom
- After assisting children in the bathroom with diapering and/or toileting
- After blowing your nose, coughing, or sneezing
- After touching garbage
- Upon entering the building at any time

Cleaning and Disinfecting

- Common areas require at least a daily deep clean (for example, sinks, bathrooms, doorknobs, tabletops, and shared items). Areas used by more than one group of children will be cleaned and disinfected between groups.
- MCISD staff will closely supervise to ensure that toys are cleaned after each child uses them (especially if a child has mouthed the toy). Each room will be prepared with a set of clean duplicates of some materials and a “used toy box” for heavily used items to be disinfected.

Items from Home/Personal Items

- MCISD staff will require families to limit the number of personal items brought into the school building.

B. Social Distancing Measures

- MCISD staff will request the parent limit the number of people participating in the visit to allow for appropriate social distancing to occur, recognizing this may not always be possible. Due to limited space in evaluation/socialization rooms, one parent/guardian will be permitted to attend the evaluation/socialization when conducted at the MCISD.
- Providers should strive to limit the number of rooms they visit inside the home when possible.
- Providers are encouraged to engage in creative social distancing solutions when home visiting, such as, but not limited to the following.
 - Bring a small folding seat that will allow you to social distance (garden seats/lawn chairs/step stools are great for this and can be wiped down after the visit).
 - Conduct the visit outside when feasible.
 - Conduct the visit in the community. For example, at a local park.
 - Do some of the visit in person, and follow-up with other parts virtually and/or remotely.
 - To the extent possible, providers should avoid physical contact with infants, toddlers, and young children.
 - Use of coaching and modeling strategies to support parent interaction with young children will be most important during this time.
 - Physical contact with children and families should be limited. If physical contact is necessary to complete assessments, this shall be done in the safest manner possible (including additional protective equipment is necessary).
 - To the extent possible, providers should avoid sharing materials such as paperwork, pens, etc.
 - Providers should think through how to handle hellos and goodbyes with each family. New rituals can strengthen relationships and keep everyone safe.

Safety Equipment and Personal Protective Equipment (PPE)

Personal protective equipment (PPE) is necessary in many settings to keep individuals safe. MCISD staff will use these guidelines, as well as technical assistance from the United States Department of Labor, Occupational Safety and Health Administration.

- **Masks or Cloth Face Coverings: For MCISD Staff**

- MCISD staff will wear face coverings except during meals and unless face coverings cannot be medically tolerated. Staff are to contact Human Resources if unable to medically tolerate a mask.
- MCISD will make masks available to all staff. By Executive Order, Governor Whitmer required all employers whose workers perform in person work to provide non-medical grade face coverings to their workers. Disposable or Cloth face coverings, such as a homemade mask, scarf, bandana, or handkerchiefs, are best. N95 masks and surgical masks are not recommended at this time. The CDC provides more guidance for how to properly wear and sanitize a cloth face covering.
- A clean facial covering is to be worn to each in person home visit. Following a home visit, the staff member must discard the disposable mask, or properly wash the cloth mask before it can be worn to another location.
- MCISD staff who wish to provide their own masks may do so. Staff will be expected to properly wear and sanitize their personal masks daily.
- If a provider serves a family that is deaf or hard of hearing, they should use a face covering that has a clear section in front of the mouth or a face shield to allow for better communication. Clear face masks may also be appropriate when providing services that rely on children and families seeing facial expressions such as speech services or developing recognition of social cues for children with autism.

- **Masks or Cloth Face Coverings: For Children and Families**

- Per CDC guidance, cloth face coverings should never be placed on young children under age 2, anyone who has trouble breathing, or anyone unable to remove the face covering without assistance.
- Children over 2 years of age should wear a facial covering when in indoor hallways, and common areas unless face coverings cannot be medically tolerated, or unable to remove the facial covering without assistance. Facial coverings will not be mandated for children during home visits or in socialization/evaluation rooms.
- Adults who are medically able, will be required to wear a facial covering during all in person service delivery.
- Families who wish to provide their child with their own facial covering to be worn in indoor hallways, and common areas may do so. For those families who do not provide their child(ren) with their own facial covering, MCISD staff will provide them with a disposable paper mask.
- All disposable paper masks will be disposed of at the end of each day. Homemade facial coverings must be washed daily.

- **Gloves**

- MCISD will continue the current practice of using gloves to prevent the spread of illness. MCISD staff should wear gloves when handling contaminated items, changing diapers, assisting with toileting, or cleaning. Gloves are not recommended for broader use.
- Non-latex gloves are provided for the above purposes. MCISD staff members should wash hands before putting gloves on and immediately after gloves are removed. Gloves are intended for single use and should be discarded in a covered container.

- **Hand Hygiene: “Sanitize in, sanitize out”:**
 - Providers should use hand sanitizer with at least 60% ethanol or 70% isopropanol upon arrival. If possible, it is always preferable to wash their hands for at least 20 seconds with soap and water.
 - Providers should sanitize or wash their hands frequently during the visit if they perform tasks where they are touching items that people have touched or have direct contact with a child or family member.
 - Once the provider leaves, they should sanitize or wash their hands.
 - Providers should be given hand sanitizer to take with them on each visit. If available, providers should also have single use towels and disinfectant wipes.
 - Providers should always cover coughs and sneezes preferably with a tissue or the inside elbow of an arm and not a hand and ask others to do the same.
 - Providers should also avoid touching things in the home and should not touch their eyes, nose, mouth, or face during the visit.

- **Sanitizing Materials**
 - When sanitizing spaces and items, consult the CDC guidelines for [Cleaning and Disinfection for Households](#).
 - Providers should limit the number of items they bring into the home and only bring items that can be sanitized after use or that can stay with the family.
 - Procedures and appropriate supplies will be given to providers so they can disinfect all toys, books, etc., between visits
 - Anything that cannot be properly disinfected between home visits should be put in a large bag for cleaning later. Items that have not been sanitized should not be used until they have been sanitized.
 - Providers should wash their work clothing daily and regularly sanitize the interior of their car as they travel between visits.

Partnering and Communicating with MCISD Staff Members

Staffing Plans

- Directors will assess staffing needs based on projected enrollment, the need to limit exposure across groups, and the need to practice social distancing.
- Staffing plans will include substitutes and alternative teaching staff to address the potential need to quarantine staff or allow for longer absences from the classroom than normal.

Staff Training

MCISD will provide all early childhood staff with training about COVID-19. This may include how COVID-19 is transmitted, signs and symptoms of COVID-19, steps employees must take to notify MCISD of signs and symptoms of COVID-19 and a suspected or confirmed diagnosis, and the measures the MCISD will be taking to limit the spread of the virus.

Other Considerations

Food Service

- Snacks during socializations will be suspended during phases 4-5.

EHS Transportation

EHS staff may transport families to and from necessary locations as permitted through the ***EHS-HS van usage procedures*** on a limited basis with prior approval from direct supervisor. The decision to transport or not transport a family is always left to the willingness and comfortability of the EHS home visitor and family.

During phases 4-5, EHS transportation is limited to one family at a time. EHS transportation is also limited to one parent/guardian and enrolled children at a time. Prior to families boarding the van:

- Parents/guardians will perform and record temperature checks and answer the following questions via Google form:
 - Have you, your child or any other member of the household been in close contact with a person who has a positive COVID-19 test?
 - Are you, your child or any other member of the household currently experiencing any of the COVID-19 Symptoms? (listed on page 10)
 - If families answer yes to either question, their child will be excluded from face-to-face services until the return to school conditions have been met as outlined below in the section **Procedures for COVID exclusions and return to school**
- MCISD staff will visually check the parent/guardian and child(ren) for signs of illness, including all known COVID-19 symptoms (as listed on page 10).
- MCISD staff will continue to monitor symptoms throughout the necessary transport and monitor temperatures when the parent/guardian or child(ren) appear ill or “not themselves.”
- The Staff, parent/guardian, and student(s) (over 2 years of age) will wear a face covering when on a school bus, unless face coverings cannot be medically tolerated, or an individual is unable to remove the facial covering without assistance.
- Seating arrangements will be modified to allow for the child(ren) and staff to be seated 6 ft apart, when possible.
- Vans will be sanitized between each transported family.

C. Great Start Collaborative

The Great Start Collaborative and Great Start Parent Coalition will continue to implement activities virtually for the duration of school closures. GSC/GSPC meetings will continue to engage community partners and families in virtual, monthly meetings to focus on action agenda items and supporting families with young children during the COVID-19 crisis. The GSC/GSPC will continue to distribute information and resources to families electronically via email and social media.

III. Additional Information

Infant/Toddler In-Person Service Checklist

Staff will utilize the in-person checklist to serve as an at-a-glance reminder of steps to take when resuming face-to-face services during phases 4-5.

Before the Visit	During the Visit	After the Visit
<ul style="list-style-type: none"> <input type="checkbox"/> Contact the family and ask their permission to meet. <input type="checkbox"/> Prepare the family. Help them understand how the visit will proceed with new guidelines, share expectations about face coverings, social/physical distancing, and hygiene. Answer any questions. <input type="checkbox"/> Ask the family to complete the health screening form electronically or assist them in completing it if they are not able to do so. <input type="checkbox"/> Take your temperature <input type="checkbox"/> Plan how to practice social distancing and hygiene during and after the visit. Ensure you have all required materials to be able to do so. 	<ul style="list-style-type: none"> <input type="checkbox"/> Wear a cloth face covering and encourage the family you are visiting to do the same. <input type="checkbox"/> Provide disposable or clean face coverings if needed to the family members. <input type="checkbox"/> Sanitize/wash your hands upon arrival. <input type="checkbox"/> Remind families of social distancing measures and health precautions you will take during the visit. <input type="checkbox"/> Do your best to respect any additional precautions families ask you to take while in their home. 	<ul style="list-style-type: none"> <input type="checkbox"/> Sanitize/wash hands upon leaving <input type="checkbox"/> Update your records about who was present at the visit in case contact tracing is needed later. <input type="checkbox"/> Sanitize any items you used during your visit and your vehicle. <input type="checkbox"/> Dispose or wash your facial covering. <input type="checkbox"/> Discuss any COVID-19 related concerns with your supervisor.

Local COVID-19 Testing Sites

Location	Address	Hours	Appointment Needed?	Type of Test	Prescription Required?	Results # of Days	Contact
<i>Dundee Urgent Care</i>	<i>100 Powell Dr. #8 Dundee, Mi. 48131</i>	<i>8am-8pm Everyday</i>	<i>Yes-Call for a screening</i>	<i>COVID-19 Nasal Swab</i>	<i>No</i>	<i>7</i>	<i>734-823-5900</i>
<i>Family Medical Center MONROE</i>	<i>1085 N Macomb St. Monroe, Mi. 48162</i>	<i>10am-12pm Wednesdays</i>	<i>Yes-Call for a screening</i>	<i>COVID-19 Nasal Swab Antibody Test</i>	<i>Yes</i>	<i>2-3</i>	<i>734-654-2169</i>
<i>Family Medical Center TEMPERANCE</i>	<i>8765 Lewis Ave. Temperance, Mi. 48182</i>	<i>10am-12pm Fridays</i>	<i>Yes-Call for a screening</i>	<i>COVID-19 Nasal Swab Antibody Test</i>	<i>YES</i>	<i>2-3</i>	<i>734-654-2169</i>
<i>Med Express Urgent Care</i>	<i>1261 N. Telegraph Monroe, Mi. 48162</i>	<i>8am-8pm Everyday</i>	<i>No</i>	<i>COVID-19 Nasal Swab</i>	<i>No</i>	<i>2-3</i>	<i>734-457-2142</i>
<i>Monroe Urgent Care</i>	<i>337 Stewart Rd. Monroe, Mi. 48162</i>	<i>9am-6pm Everyday</i>	<i>No</i>	<i>Antibody Test Only</i>	<i>No</i>	<i>2-3</i>	<i>734-243-3200</i>
<i>ProMedica Monroe Family Medicine Residency Center</i>	<i>650 Stewart Rd. Monroe, Mi. 48162</i>	<i>830am-12pm 130pm-4pm M-F</i>	<i>Yes-Call for a screening</i>	<i>COVID-19 Nasal Swab</i>	<i>No</i>	<i>2-3</i>	<i>734-240-1707</i>

The Monroe County Intermediate School District

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