

Flint Community Schools

*COVID-19
PROTOCOLS/GUIDANCE
FEBRUARY 25, 2022*

At Flint Community Schools, the safety and well-being of our entire school community – scholars, families, teachers, and staff – is of the utmost importance. To best inform our school community on the district’s safety protocols and procedures, we have developed the **COVID-19 Protocols/Guidance**. This guide contains the key protocols to mitigate the spread of COVID-19 in our schools, and in turn help us provide a safe, in-person learning environment for our scholars.

Information in this brochure has been approved by health officials at the Genesee County Health Department, Michigan Department of Health and Human Services and the Centers for Disease Control. I personally believe in the protocols outlined here, and I’m thankful for our continued partnership with these health organizations.

As always, thank you for your ongoing commitment to our scholars’ academic, social, and emotional journeys. We will continue to work together to provide them with a safe space to learn, grow and play. For questions, please contact **FCS Health Services, healthservices@flintschools.org 810-424-4087**.

Sincerely,

Kevelin Jones, Superintendent

FLINT COMMUNITY SCHOOL IS A UNIVERSAL MASK DISTRICT

This guidance is dated 2/18/2022, effective 2/22/22 and is subject to change based on new recommendations from MDHHS, CDC, local trends, or new information regarding COVID-19.

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Definitions

Positive Case - A person who has a confirmed case of COVID-19 by an antigen test and/or a PCR test

Symptomatic Case – A person showing any **ONE** of the following symptoms: Temperature 100.4°F or signs of fever (chills/sweating); sore throat; new onset of cough; diarrhea, vomiting, or abdominal pain; new onset of headache; loss of taste or smell; congestion or runny nose; shortness of breath or difficulty breathing; fatigue; muscle or body aches.

Asymptomatic Case - A person who has a confirmed case of COVID-19 by an antigen test and/or a PCR test but is not showing any symptoms

Household Contact of Positive Case - A person living in the same household as someone who has tested positive to COVID-19 is considered a household contact. If the contact is experiencing symptoms they must stay home until they receive a provider administered test. If the contact is not experiencing any symptoms they can remain in school and must wear a KN95 mask or surgical mask for 10 days.

Up to date means a person has received all recommended COVID-19 vaccines, including any booster dose(s) when eligible.

Fully vaccinated means a person has received their primary series of COVID-19 vaccines.

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Positive Student

Student will stay home for 10-days. Day 0 is the day symptoms start and/or had a positive test.

Symptomatic Student

If student has any ONE of the following symptoms:

Temperature 100.4°F or signs of fever (chills/sweating); sore throat; new onset of cough; diarrhea, vomiting, or abdominal pain; new onset of headache; loss of taste or smell; congestion or runny nose; shortness of breath or difficulty breathing; fatigue; muscle or body aches.

Students should not come to school with symptoms. They should get a COVID-19 test or receive an alternative diagnosis by a medical provider.

If student is already in school:

- Student will be sent to the isolation room to be evaluated.
- If student has a COVID-19 Testing Consent form, the Medical Assistant (MA) will perform the antigen test on student after trying to notify parents first.
 - If test is negative the nurse will evaluate whether student can stay in school or must go home and communicate with parents. If sent home, the student can't return until symptoms have resolved.
 - If test is positive the student must remain home for 10 days. MA will notify parent to let them know when the student can return.
- If no testing has been performed at the school and the student is sent home, the student must have an alternative diagnosis by a medical provider, or a negative COVID-19 test to return to school.
- A student who is sent home will receive only a 3-day M (medical) excused absence without a confirmed case of COVID-19 or alternative diagnosis.

If asymptomatic but are a household contact of a positive case in the last 10 days, you must wear a KN95 or surgical mask for 10 days after the last exposure when around others.

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Positive Staff

Regardless of Vaccination Status:

- Isolate at home for at least 5 days after symptoms onset
 - Day 0 is the day symptoms started or test sample was collected (whichever is first).
- On day 5, if no symptoms or symptoms resolving, they can stop isolation on day 6 and return to work. They must wear a KN95 mask or a surgical mask through day 10.
- If symptoms continue or are not resolving continue isolation for the full 10 days since testing positive or first developed symptoms. If fever is present, continue to isolate until fever goes away (You must be fever-free with no assistance from medication for 24-hours).

Resolving symptoms – means symptoms have gotten noticeably better. Some symptoms (like fatigue and loss of taste and/or smell) may last a longer time. You must be fever free for 24-hours fever-free with no medication.

Symptomatic Staff

If staff has any ONE of the following symptoms:

Temperature 100.4°F or signs of fever (chills/sweating); sore throat; new onset of cough; diarrhea, vomiting, or abdominal pain; new onset of headache; loss of taste or smell; congestion or runny nose; shortness of breath or difficulty breathing; fatigue; muscle or body aches.

Staff will be sent home and may not return to work until they have a negative COVID-19 test (antigen and/or PCR) or an alternative diagnosis by a medical provider and symptoms have resolved. NO home tests will be accepted.

If asymptomatic but are a household contact of a positive case in the last 10 days, you must wear a KN95 or surgical mask for 10 days after the last exposure when around others.

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Athletics

- Athletes will follow all updated COVID-19 protocols.
- All athletes must wear a face mask during practice and games, except for wrestlers.
- Athletes will be tested for COVID-19 once a week, except for wrestlers (need parent/guardian signed consent form).
- Wrestlers are not required to wear face coverings when actively competing as long as they have had a negative rapid antigen test on either the day before or day of a meet or a negative PCR test within 72 hours of competition.
- All spectators must wear a face mask while in our buildings.

Youth Quest and Crim Sports

All after-school programs including Youth Quest and Crim Sports Programs must follow all Flint Community Schools up-dated COVID-19 Protocols.

Testing Information

All testing requires a signed consent form. A ONE time verbal consent to test will be accepted from a parent/guardian but must be followed up with a signed consent form.

All asymptomatic testing will be done 15 - 30 minutes before school starts.

Testing will only be done in the schools if there is staff available. Student testing will be given priority.

Home test will only be accepted to report positive cases.

If testing is not available at the schools, please visit one of the sites listed on page 8 – 10.

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Requirements

- There is a current CDC (federal) <https://www.cdc.gov/quarantine/masks/mask-travel-guidance.html> order that requires face coverings on school bus transportation.
- Schools must also follow the MDHHS Order Reporting of Confirmed and Probable Cases at Schools https://www.michigan.gov/coronavirus/0,9753,7-406-98178_98455-541860--,00.html , which requires schools to post data about case counts on their websites. In addition, standard school infectious disease policies mandate requiring students and staff to stay home when sick.
- Genesee County Health Department Summary of Guidance https://p10cdn4static.sharpschool.com/UserFiles/Servers/Server_18854385/File/COVID-19-19%20Files/GC%20School%20Guidance%201.26.22%20FINAL.pdf

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Community Testing Sites

WORD OF LIFE CHURCH

Visit <https://www.solvehealth.com/book-online/OPm1kA> to make an appointment. *Appointments are strongly encouraged

Address: [460 W. Atherton Rd., Flint, MI 48503](#)

Testing is available: **Tuesday – Thursday from 12 pm to 6 pm**

BETHEL UNITED METHODIST CHURCH

Visit <https://www.solvehealth.com/book-online/OPmnQA> to make an appointment. *Appointments are strongly encouraged

Address: [1309 N. Ballenger Hwy., Flint, MI 48504](#)

Testing is available:

- **Tuesday – Wednesday from 10 am to 4 pm**
- **Thursday from 1 pm to 7 pm**

MACEDONIA BAPTIST CHURCH

Visit <https://www.solvehealth.com/book-online/ABXLkg> to make an appointment. *Appointments are strongly encouraged

Address: [G5443 Saginaw St., Flint, MI 48505](#)

Testing is available: **Monday, Friday, and Saturday from 10 am to 3 pm**

Guidelines & Site Information

- **Rapid antigen testing** is performed at these sites
- **PCR (Polymerase Chain Reaction) Tests** are available upon request
- **Testing is available at no-cost to all.** Uninsured individuals are welcome.
- **All people can be tested, with or without symptoms. No doctor's order needed.**
- Saliva testing will be used for all ages
 - **DO NOT** eat, drink, chew gum, or use tobacco 30 minutes prior to your visit
- On-demand translation is available
- ADA accessible
- No ID is required to be tested
- If using insurance, please bring your insurance card
- Considerations after receiving COVID-19 testing:
 - [After-Test Care + Information](#)
 - [Quarantine vs. Isolation](#)

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Getting Your Test Results

- **If you provided a phone number when you registered for your test**, you will get a phone call with your results up to 3 days after your test:
 - Your results will not be left in a voicemail
 - If you do not answer, two more attempts to contact you between 8 am and 8 pm, Monday through Sunday
- **If you gave a cell phone number and chose to receive text messages**, you will receive a text when your results are ready (up to 3 days after your test). Once you receive the text message, you can then:
 - Call the HELP Center at (517) 940 – 8811 (or toll free (855) 873 – 6996), **OR**
 - Wait for a phone call with your test results, **OR**
 - Log into the results portal at www.honumg.info/results, **OR**
 - Ask for the results to be emailed to you by emailing COVID-1919help@honumg.com

Drive-Thru COVID-19 Testing

WALGREENS

Visit www.walgreens.com/COVID-1919Testing to make an appointment. Testing is available at no-cost to all – uninsured individuals are welcome. Testing is available for ages 3 and up and is a self-administered nasal swab; parent or guardian may need to assist children in sample collection. No walk-up testing available, must arrive in a vehicle.

Address: [2815 Davison Road, Flint, MI 48506](http://www.walgreens.com/COVID-1919Testing)

Testing is available: **daily from 9 am to 5 pm**

RITE-AID

Visit www.riteaid.com to schedule an appointment – testing is free. Testing is available for ages 4 and up and is a self-administered nasal swab; parent or guardian must be present and bring their photo ID for children aged 4 to 17. **Testing is by appointment only in the drive-thru pharmacy lanes.*

Testing is available Monday through Friday from 10 am to 8 pm and Saturday through Sunday from 10 am to 5 pm.

Locations

- (#04948) [G-4007 S. Saginaw St., Burton, MI](http://www.riteaid.com)
- (#04340) [G4033 Fenton Rd., Burton, MI 48529](http://www.riteaid.com)
- (#04438) [3717 Fenton Rd., Flint, MI 48507](http://www.riteaid.com)
- (#04471) [1020 E. Hill Rd., Grand Blanc, MI 48439](http://www.riteaid.com)
- (#04956) [5370 E. Hill Rd., Grand Blanc, MI 48439](http://www.riteaid.com)
- (#07733) [2506 E. Hill Rd., Grand Blanc, MI 48439](http://www.riteaid.com)

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- (#04319) [8360 S. Saginaw S., Grand Blanc MI 48439](#)
- (#03667) [4001 Davison Rd. Suite A, Burton, MI 48509](#)
- (#04761) [1124 N. Ballenger Hwy., Flint, MI 48504](#)
- (#07736) [11801 N. Saginaw St., Mount Morris, MI 48458](#)
- (#04806) [6026 Lapeer Rd., Burton, MI 48509](#)
- (#04333) [100 E. Vienna Rd., Clio, MI 48420](#)
- (#07738) [521 N. State Rd., Davison, MI 48423](#)
- (#04439) [841 S. State Rd., Davison, MI 48423](#)
- (#04588) [3521 Corunna Rd., Flint, MI 48503](#)
- (#04442) [4515 Corunna Rd., Flint, MI 48532](#)
- (#01587) [4519 Richfield Rd., Flint, MI 48506](#)
- (#04443) [1565 E. Pierson Rd., Flushing, MI 48433](#)
- (#04447) [4515 E. Mount Morris Rd., Mount Morris, MI 48458](#)
- (#04440): [9090 Miller Rd., Swartz Creek, MI 48473](#)
- (#04310): [5018 Clio Rd., Flint, MI 48504](#)



Consent Form for Rapid COVID-19 Antigen Test

Testing Facility/School: _____

Address: _____

Phone: _____ Organization: Flint Community Schools

Testing Date: _____

Personal Information

First Name: _____ Last Name: _____ Middle: _____

Phone Number: (____) - ____ - _____ Email Address: _____

DOB: (mm/dd/yyyy) ____/____/____ Biological Sex: * Male * Female * Prefer not to answer

Street Address: _____

City/State/Zip: _____

Race: Please check the box next to the one that best describes your race.

- American Indian/Alaskan Native
- Black/African American
- Asian
- White/Caucasian
- Hawaiian/ Pacific Islander
- Other
- Unknown

Hispanic or Latino: Please check the box next to one of the following that best describes your ethnicity.

- Latino or Hispanic
- Not Latino or Hispanic
- Unknown or decline to specify

Arab or Middle Eastern: Please check the box next to one of the following that best describes your ethnicity.

- Arab or Middle Eastern
- Not Arab or Middle Eastern
- Unknown or decline to specify

Do you have symptoms related to COVID-19? Yes No Unknown

If yes, what is the date the symptoms started? _____

A parent or guardian **must** be present to test a student to stay in school because they were a contact to a positive case.

This testing is done in the morning before school starts.

Consent Form for Rapid COVID-19 Antigen Test

First Name: _____ Last Name: _____
DOB: _____
School: _____

Please carefully read the following informed consent:

Please carefully read the following notice and sign the authorization to test for COVID-19.

1. I understand that the COVID-19 testing will be conducted through a BinaxNOW antigen test, or other acceptable test as ordered by an authorized medical provider or a public health official.
2. I understand that my ability to receive testing is limited to the availability of test supplies.
3. I understand that I am not creating a patient relationship with the ordering physician by participating in this testing. I understand the entity performing the test is not acting as my medical provider. Testing does not replace treatment by my medical provider. I assume complete and full responsibility to take appropriate action with regards to my test results and my medical care. I agree I will seek medical advice, care, and treatment from my medical provider or other health care entity if I have questions or concerns, if I develop symptoms of COVID-19, or if my condition worsens.
4. I understand it is my responsibility to inform my health care provider of a positive test result, and that a copy will not be sent to my health care provider for me.
5. I understand that my antigen test result will be available in 15-30 minutes.
6. I understand and acknowledge that a positive antigen test result is an indication that I need to self-isolate to avoid infecting others.
7. I have been informed of the test purpose, procedures, and potential risks and benefits. I will have the opportunity to ask questions before proceeding with a COVID-19 diagnostic test at the testing site. I understand that if I do not wish to continue with the COVID-19 diagnostic test, I may decline to test.
8. I understand that to ensure public health and safety and to control the spread of COVID-19, my test results may be shared with the appropriate school personnel.
9. I understand that my test results will be disclosed to the appropriate public health authorities as required by law.
10. I understand that I may withdraw my consent to participate in testing at any time.

AUTHORIZATION/CONSENT TO TEST FOR COVID-19

- I agree to undergo the COVID-19 antigen testing, as needed, as long as FCS is offering testing / I authorize my child to undergo testing, as needed, as long as FCS is offering testing.

Patient/Parent/Legal Guardian Signature

Date

TESTER (PRINT) _____

**Free or low-cost health coverage for children under the age of 19,
or pregnant women of any age**

Call the MI Child and Healthy Kids hotline at 1.888.988.6300 or apply online at www.michigan.gov/mibridges

**Health care coverage & services for eligible people up to age 21 years
and pregnant women exposed to the Flint water since April 2014**

Call 1.855.789.5610 or apply online at www.michigan.gov/mibridges