

## Frequently Asked Questions and Answers

*The Benzie-Leelanau District Health Department has compiled this document to answer some frequently asked questions about the [Public Health Order](#) requiring universal masking in grades K-12 for all school districts within the department's two county jurisdiction of Benzie and Leelanau counties.*

What factors or indicators will be used to determine if the mandate can be lifted?

- **Pandemic risk indicators and trends such as transmission level (consists of positivity rate and case rate), trends in deaths and hospitalizations, healthcare system capacity (hospital and EMS staffing concerns, ICU bed availability, diversion needs), public health capacity (testing, investigation, contact tracing, public information, vaccination). Some pandemic risk indicators can be monitored by visiting the [MI Safe Start Map](#) and the [CDC COVID Data Tracker](#), other elements of monitoring the healthcare system involve regular communication with hospitals, providers, and EMS leadership.**

How often will those indicators be evaluated?

- **All elements of pandemic risk are monitored and reviewed frequently, often daily and weekly.**

Does the Health Department have any comparable data on schools who have left masking optional and the infection rate with all other mitigation measures in place?

- **There is a science brief that was published by the CDC which includes links to multiple studies demonstrating the effectiveness of masking in reducing the risk of transmission which can be found here <https://www.cdc.gov/coronavirus/2019-ncov/science/science-briefs/masking-science-sars-cov2.html>**
- **The prevalence of the Delta variant makes masking even more important now.**

Page 4, #2 of the public health order reads: "Persons outside if not engaged in activities involving direct physical contact." Could you clarify what this means? Last year soccer and football had to have face coverings. Is this meant to indirectly say we are the same as last year or something different?

- **The order includes indoor sports. Recommendations continue to be in place from the CDC for masking in outdoor contact sports but that was not included in this order.**

Does the order apply to preschool staff but not preschool children?

- **This is correct, masking is required for staff but recommended for children 2-5.**

For employees, how does this order interact with MIOSHA rules?

- **Current MIOSHA guidance refers directly to OSHA federal guidance which are now recommendations for all employers except for healthcare who continue to have requirements.**

Is the increase in COVID hospitalizations due to school age children? If it is other segments of the population, then why mask the children?

- **There are a multitude of factors to consider in evaluating the risk to the public's health and these are some examples. Hospital admissions are in fact skewing younger but local hospitalizations are not necessarily children at this point. However, it has been the experience reported by hospitals in other areas so we are trying to prevent this from happening. Strained hospital capacity is a concern for everyone as it impacts their ability to provide all types of care COVID and non-COVID). Practicing strict mitigation measures in the school setting (including universal masking) has been shown to significantly reduce the risk of transmission**

**decreasing the need for disruption/absence due to quarantine and increasing the chance of successfully maintaining in-person learning.**

Is the increase of COVID cases from visitors from out of town (tourists)?

- **Cases are reported by county of residence so the numbers we report are those with local addresses. Hospitalizations are certainly impacted by tourists and travelers, which increases the risk for our community during times of high volume travel.**

Why was this decision made and released at 5:30 p.m. on a Friday? This prevents any input from Board of Health members and the community.

- **Prior to the order being released we had received many communications including emails, calls, and letters, from the public, parents, schools, hospital leadership, local pediatricians, and other doctors, including infectious disease. These recommendations and concerns were all considered very carefully. In addition, Health Officer Lisa Peacock and Medical Director Joshua Meyerson had previously strongly recommended schools adopt policies following the CDC guidance as well as made themselves available each week on multiple calls with school leadership and other medical professionals to advise and guide them in their planning. The authority granted to the Health Officer under the Public Health Code is broad so that protective actions can be taken quickly. Due to the growing risk and the growing number of schools that did not adopt policies consistent with CDC recommendations, we spoke with school leadership about these steps on Thursday and worked with our attorneys all day on Friday to develop an order based on objective evidence and medical input. We then released the information to the schools as quickly as possible as school was starting immediately for some districts.**

Can the Health Department put an option for private schools to opt out or sign a waiver?

- **The order as written applies to all schools and we do not issue waivers for masking.**

Does the order include volleyball (for the athletes inside) and soccer/football (for the athletes outside)?

- **The order includes indoor sports; recommendations continue to be in place from the CDC for masking in outdoor contact sports but that was not included in this order.**

Can you provide clarity as to whether this order is binding on a private 9–12 grade boarding school? We have over 90% vaccination rate.

- **As currently drafted, it does apply to a private boarding school, as it applies to all schools and does not vary based upon private vs. public, boarding, or other protective factors like high vaccination rates or implementation of serial testing. High vaccination rates are encouraging, and we will consider this as we monitor future transmission trends, review the order and consider future amendments.**

Why are vaccinated children and staff required to mask in schools?

- **The risk of SARS-CoV-2 infection varies according to the amount of virus and the duration to which a person is exposed. With the Delta variant the “viral load” an infectious person carries and can expel through breathing and talking is many times greater than compared to the original strain that circulated. This increases the risk of infection in those around them. Similarly, duration also determines risk with the longer the duration of exposure within an indoor setting, the risk of infection increases.**

Can a staff member remove their mask if they are alone in a room or building (ie night custodian)?

- **Yes, if there is no risk of exposing anyone else since they are alone.**

What Counties are covered by the BLDHD/HDNW order?

- **Benzie, Leelanau, Antrim, Charlevoix, Emmet, and Otsego counties.**