

STATE OF MICHIGAN  
DICKINSON AND IRON COUNTIES  
DICKINSON – IRON DISTRICT HEALTH DEPARTMENT

September 16, 2021

Emergency Order for Control and Prevention of COVID-19 Transmission in Educational Settings  
within Dickinson and Iron Counties, Michigan:

The Health Officer of the Dickinson-Iron District Health Department makes the following factual determinations and issues this Order pursuant to the Michigan Public Health Code, MCL 333.2451 and 333.2453, as well as R. 325.175(4), which is an administrative rule promulgated by the Michigan Department of Health and Human Services pursuant to MCL 333.2226(d). Factual findings include:

1. As of September 15, 2021, the Dickinson-Iron District Health Department has had 3,261 cases of COVID-19 infections in Dickinson County residents and 1,231 cases of COVID-19 infections reported in Iron County residents. Dickinson-Iron District Health Department has had 382 cases of COVID-19 reported from September 1- September 15, 2021, school-aged children have accounted for 37% of the reported cases. Since the start of the school year, school aged cases have increased one and a half times each week. Currently, both counties are designated by the CDC as having a high level of community transmission of COVID-19; both test positivity and new case rates are increasing. Dickinson County has a positivity rate 9% and a weekly case rate of 590.3 per 100,000 population (data from September 8-September 14, 2021). Iron County has a positivity rate 9.2% and a weekly case rate of 334.3 per 100,000 population (data from September 8-September 14, 2021).
2. The principal mode by which people are infected with SARS-CoV-2 (the virus that causes COVID-19) is through exposure to respiratory fluids carrying infectious virus. Exposure occurs in two main ways: (1) inhalation of very fine respiratory droplets and aerosol particles, and (2) deposition of respiratory droplets and particles on exposed mucous membranes in the mouth, nose, or eye by direct splashes and sprays.
3. People release respiratory fluids during exhalation (e.g., quiet breathing, speaking, singing, exercise, coughing, sneezing) in the form of droplets across a spectrum of sizes. These droplets carry virus and transmit infection.
4. The risk of SARS-CoV-2 infection varies according to the amount of virus to which a person is exposed. Once infectious droplets and particles are exhaled, they move outward from the source. The risk for infection decreases with increasing distance from the source and increasing time after exhalation.
5. Two main factors determine the amount of virus to which a person is exposed in the air or by



touching a surface contaminated by virus:

- a. Decreasing the amount of virus in the air
  - b. Progressive loss of viral viability and infectiousness over time influenced by environmental factors such as temperature, humidity, and ultraviolet radiation (e.g., sunlight).
6. Transmission of SARS-CoV-2 from inhalation of virus in the air farther than six feet from an infectious source can occur. Although infections through inhalation at distances greater than six feet from an infectious source are less likely than at closer distances, these transmission events have involved the presence of an infectious person exhaling virus indoors for an extended time (more than 15 minutes and in some cases hours) leading to virus concentrations in the air space sufficient to transmit infections to people more than 6 feet away.
  7. Available evidence continues to demonstrate that existing recommendations to prevent SARS-CoV-2 transmission remain effective. These include physical distancing, community use of well-fitting masks, adequate ventilation, and avoidance of crowded indoor spaces. These methods will reduce transmission both from inhalation of virus and deposition of virus on exposed mucous membranes.
  8. Masks are primarily intended to reduce the emission of virus-laden droplets (“source control”), which is especially relevant for asymptomatic or pre-symptomatic infected wearers who feel well and may be unaware of their infectiousness to others, and who are estimated to account for more than 50% of transmissions. Masks also help reduce inhalation of these droplets by the wearer (“filtration for wearer protection”). The community benefit of masking for SARS-CoV-2 control is due to the combination of these effects; individual prevention benefit increases with increasing numbers of people using masks consistently and correctly.
  9. The Delta variant of the SARS-CoV-2 virus is the dominant variant in Michigan and is significantly more contagious than the original form that entered the United States in the winter of 2020. While the risk of severe disease is lower in children, low risk does not equal no risk. According to the American Academy of Pediatrics, among 23 states reporting, children ranged from 1.6%-4% of their total cumulated hospitalizations, and 0.2%-1.9% of all their child COVID-19 cases resulted in hospitalization. Additionally, nearly one half of these hospitalizations are in children without reported underlying health conditions.
  10. The most effective way to prevent transmission in schools is to support your community by being vaccinated. Achieving high levels of COVID-19 vaccination among eligible students, as well as teachers, staff, and household members, is the most critical strategy to help schools stay open safely. People 12 years and older are eligible for COVID-19 vaccination. Students younger than 12 years of age are ineligible to receive vaccination.
  11. According to the American Academy of Pediatrics (AAP), the Centers for Disease Control and Prevention (CDC), and the Michigan Department of Health and Human Services

(MDHHS), the universal use of masks in schools is a safe, essential, and proven strategy to reduce the spread of COVID-19 in schools.

12. When multiple prevention strategies are applied consistently, including ensuring ventilation for increased air exchange within a setting, proper and frequent hand-washing, and consistent and proper mask use, school-associated transmission of COVID-19 is reduced.

THEREFORE, IT IS HEREBY ORDERED that all Educational Institutions and all Persons in Educational Settings must adhere to the following rules:

1. The Educational Institutions shall ensure that children in kindergarten through grade six consistently and properly wear a facial mask covering both nose and mouth while inside any enclosed building or structure of the institution.
2. The Educational Institutions shall ensure that all persons, regardless of vaccination status, providing service to any child in kindergarten through grade six, properly and consistently wear a facial mask while inside any enclosed building or structure of the institution.

IT IS FURTHER ORDERED that the following terms shall have the following definitions for purposes of this ORDER:

1. "Educational Institutions" or "Educational Settings" includes youth camps, youth programs, childcare centers, tutoring centers, preschools, primary through secondary schools, vocational schools, colleges, and universities and other organized activities outside the home where coursework is taught.
2. "Persons in Educational Settings" means students Kindergarten through grade 6, teachers, administrative staff, attendees, volunteers or students who may be present in the educational setting of younger students, coaches, camp leaders, and other employees or volunteers of Educational Institutions.

FURTHERMORE, this ORDER shall not apply to the following Persons:

1. Persons in the act of eating or drinking.
2. Persons outside if not engaged in activities involving direct physical contact.
3. Persons under the age of five years; however, supervised masking is strongly recommended for children who are at least two years of age.
4. Students with developmental conditions of any age attending school, although supervised masking is encouraged.
5. Persons who have a current medical reason confirmed in writing from a Medical Doctor (MD) or Doctor of Osteopathic Medicine (DO) currently licensed to practice medicine in the State of Michigan.



IT IS FURTHER REMINDED that:

1. On January 29, 2021, the Centers for Disease Control and Prevention issued an ORDER that required face masks to be worn by all people while on public transportation (which included all passengers and all personnel operating conveyances) traveling into, within, or out of the United States and U.S. territories. That ORDER includes school buses, both public and private.
2. On July 27, 2021, the Centers for Disease Control and Prevention issued recommendations calling for universal indoor masking for all teachers, staff, students, and visitors to schools, regardless of vaccination status, and independent of community transmission rates of COVID-19, due to the circulating and highly contagious Delta variant. The Dickinson-Iron District Health Department reminds Educational Institutions of this recommendation and encourages them to enact policies to this effect.
3. This order does not repeat, supersede, or rely on any current MDHHS or Federal Epidemic Orders, but as long as such orders remain in effect, they are incorporated by reference herein.

THIS ORDER is effective, Monday, September 20, 2021 and remains in effect until six weeks past the date the COVID-19 vaccine is authorized and available to persons aged five years through age eleven, The CDC Transmission levels reach "Low" or until further notice from the Health Officer.



\_\_\_\_\_

Dated: September 16, 2021

Daren Deyaert  
Health Officer  
Dickinson-Iron District Health Department