



**COVID -19 SUPPLEMENTAL  
HANDBOOK REVISED**

**APPROVED BY BOE JULY 25, 2022**

## **Health and Safety Precautions**

Staff should continually monitor themselves for fever, chills, or other COVID-19 symptoms. If a staff member has symptoms they should not report to work or should leave work if symptoms develop during the day.

Staff is required to wear and properly utilize any PPE required by the district and their direct supervisor. Any substitution or changes an employee wishes to request must be approved by email or in writing by their supervisor.

## **COVID-19 Related Leave Provisions**

### **A. Quarantines**

Staff will follow the latest District COVID-19 Plan protocols as approved by the Board of Education and administered by District nursing staff. Changes to the District COVID-19 Plan may occur throughout the year. As of the start of the 2022-23 school year, the District COVID-19 Plan would require COVID positive staff to quarantine for 10 calendar days from onset of symptoms. Staff are encouraged to participate in the Test-to-Stay program which allows them to return after five calendar days if they are fever free for 24 hours with other symptoms improving AND they successfully participate in the Test-to-Stay program. The same quarantine provisions also apply to household contacts of a COVID positive individual.

### **B. Work from Home—COVID-19 Positive Staff Who Are Otherwise Healthy and/or Asymptomatic**

Employees who are unable to work due to testing positive for COVID-19, but who are otherwise healthy and able to work, may complete some of their work duties from home as their job and the school district operations status allows. Any staff member who is feeling well and able enough to work from home will be treated as .70 Off with Pay and .30 sick leave for each day they are absent and working from home. Some jobs and duties may not allow for this provision. (i.e. custodial, food service, etc.)

### **C. Unpaid Leave**

Employees are allowed up to 10 unpaid days for COVID-19 related absences. These reasons may include to take care of themselves or a family member who has been diagnosed with COVID-19, absences due to COVID-19 symptoms of self or a child, quarantines for self, or to care for a child who is quarantined. There will be no impact on benefits for this leave, when meeting this section's criteria, until 10 unpaid days has been exceeded.

#### **D. At-Risk Employees**

Employees who are identified by federal, state or local health agencies as being at-risk for COVID-19 may request adjustments or accommodations to their work from the Business Administrator (Ron Olson). Adjustments or accommodations may be as simple as additional Personal Protective Equipment (PPE), additional breaks for personal hygiene, or could require work modification. The Center for Disease Control (CDC) is continually revising their at-risk standard as they learn more about the pandemic and virus.

### **COVID-Related Compensation**

#### **A. Coaching and Advisor Pay**

Activities and sports may be canceled, run at different times of the year, or be modified during the pandemic. Coaches and advisors will be paid in full if their season or activity starts and the activity continues for greater than 50% of the season or established schedule. Coaches and advisors will be paid a minimum of 50% of their stipends whether the activity or sport occurs or not. Payments will be made during the season or time of the year that event occurs unless it is a year-round activity. Payments may be adjusted based on activities or sports being cancelled.

## RECEIPT AND ACKNOWLEDGMENT

I hereby acknowledge that it is my responsibility to become familiar with the contents of the School District of Monroe's *COVID-19 Supplemental Handbook*. My signature below indicates that I have read the *Handbook* and understand that I am expected to abide by the standards, policies and procedures defined or referenced in this document. The information contained in this *Handbook* is subject to change. I understand that changes in District policies may supersede, modify, supplement, or eliminate the information summarized in the *Handbook*. As the District provides updated policy information, I accept responsibility for reading and understand the expectation that I abide by the changes.

I acknowledge and understand that this *Handbook* supersedes all prior practices, customs, and procedures, including any other representations, verbal or written, by any employee or representative of the District.

\_\_\_\_\_  
Employee's Printed Name

\_\_\_\_\_  
Position

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
Date

A signed original copy of this form must be returned to Cindy Rupnow at the District Administrative Center. It will be filed in your personnel file.