



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**



#StayStrongNC

StrongSchoolsNC

K-12 Schools NC State Board of Education Meeting

July 8, 2021

Susan Gale Perry, Chief Deputy Secretary
Dr. Elizabeth Cuervo Tilson, State Health Director



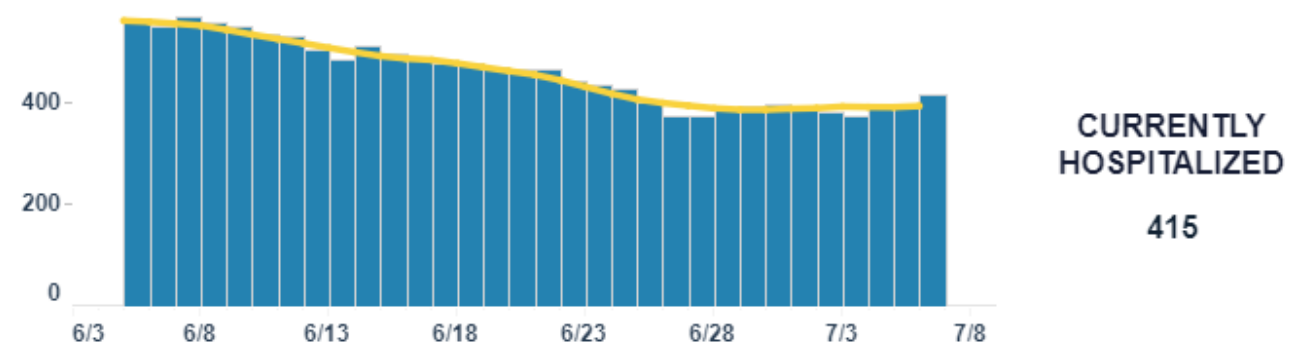


COVID Trends and updates

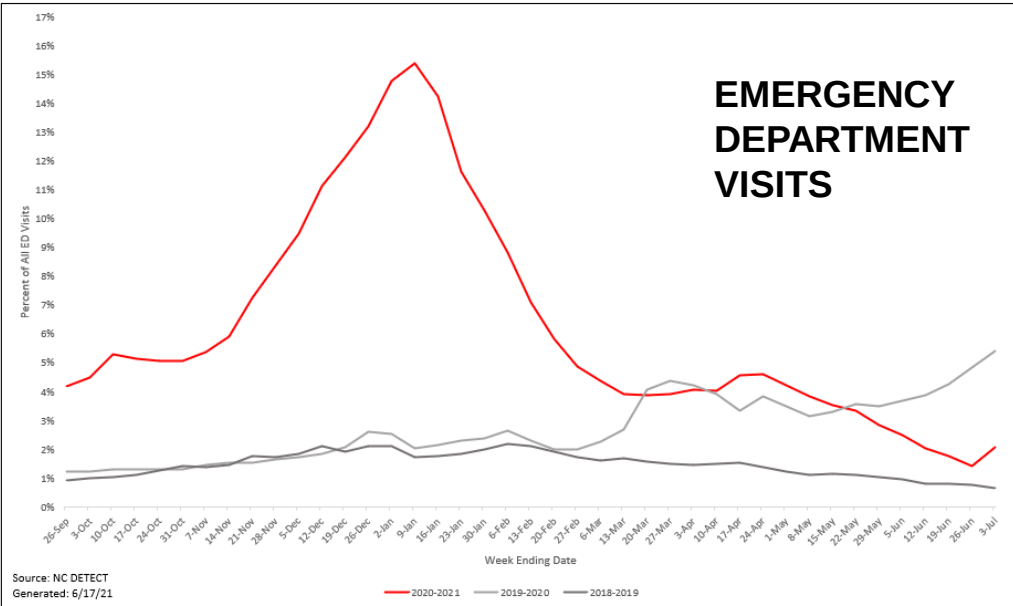
Elizabeth Tilson, MD, MPH

Four Key Metrics – overall low, but recent upticks

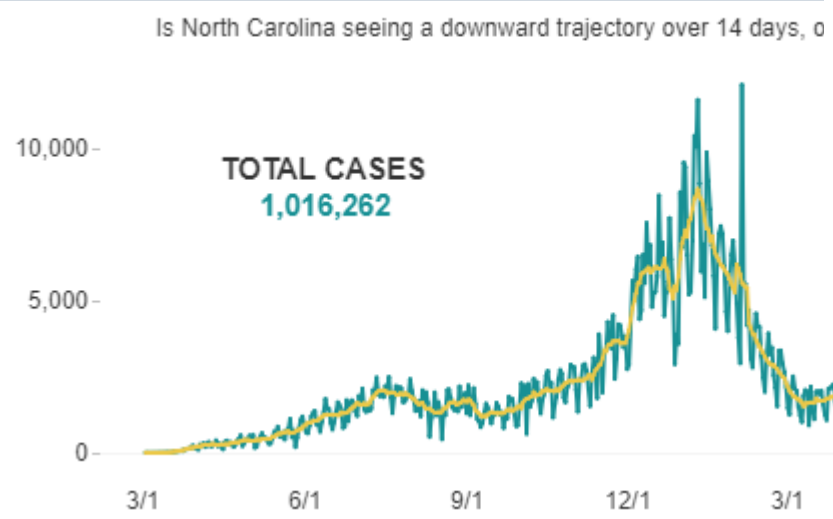
Daily Number of People Currently Hospitalized



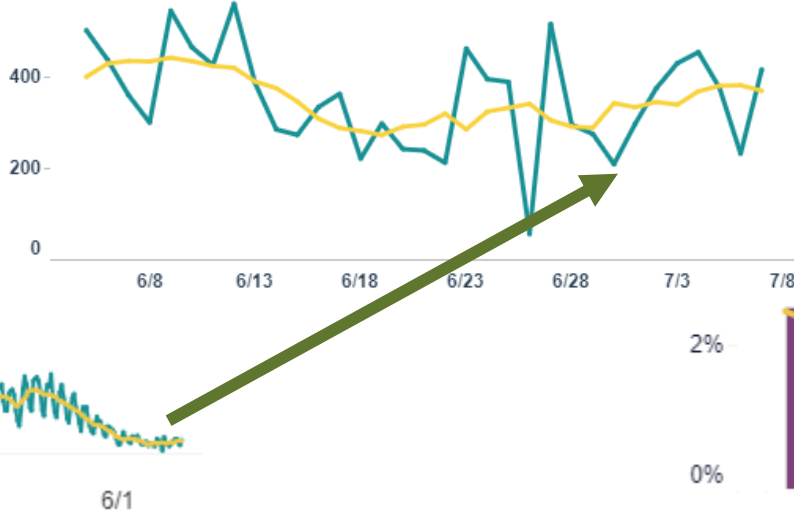
What Percentage of ED Visits this Season are for COVID-like Illness Compared to Previous Seasons?



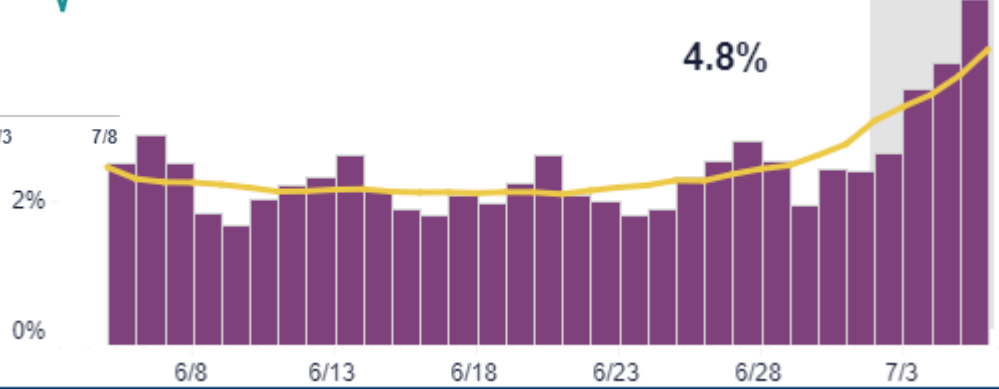
Daily Cases by Date Reported



Daily Cases



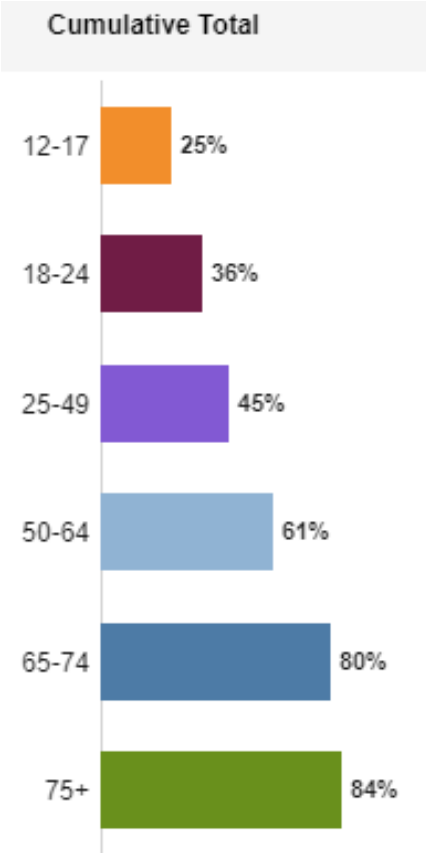
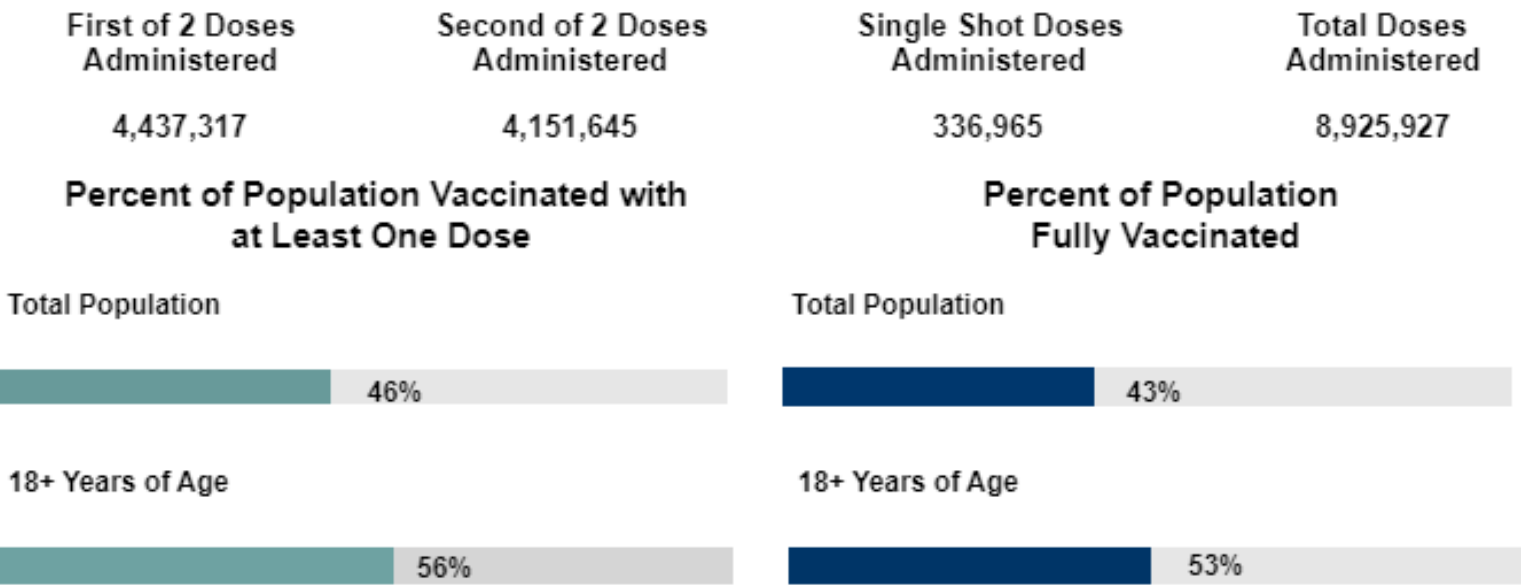
POSITIVE TESTS



VACCINATION STATUS BY AGE

Data: December 14, 2020 – July 6, 2021 at 4.00 a.m.
Vaccinations Data will be updated Monday - Friday

0-12 years – 0%
Not currently eligible for vaccination



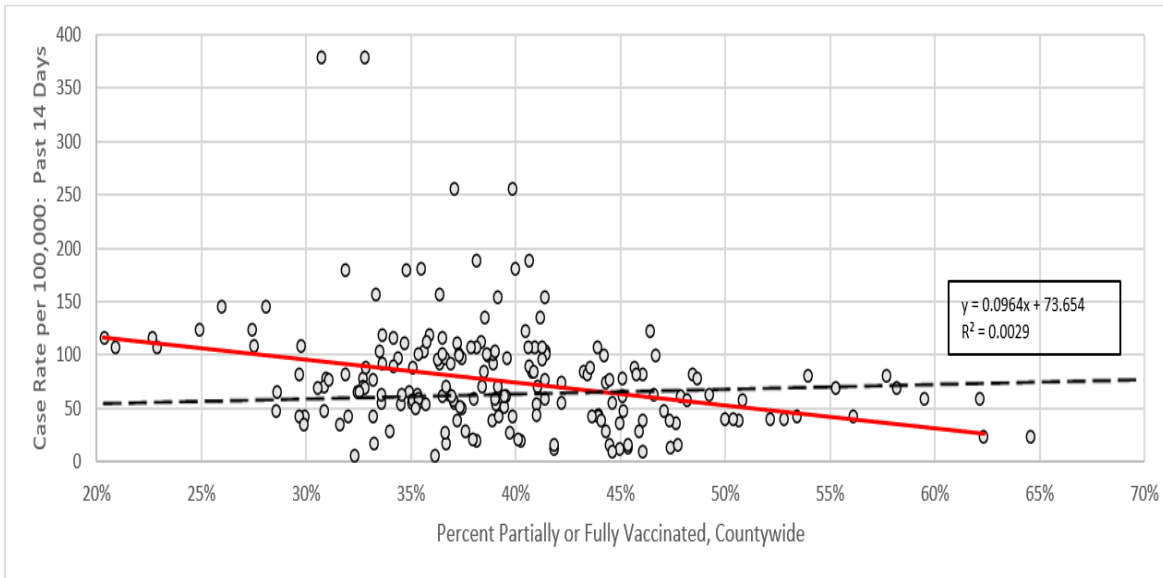
VACCINE EFFECTIVENESS: DATA FROM NORTH CAROLINA

• Almost all viral transmission is now in unvaccinated people

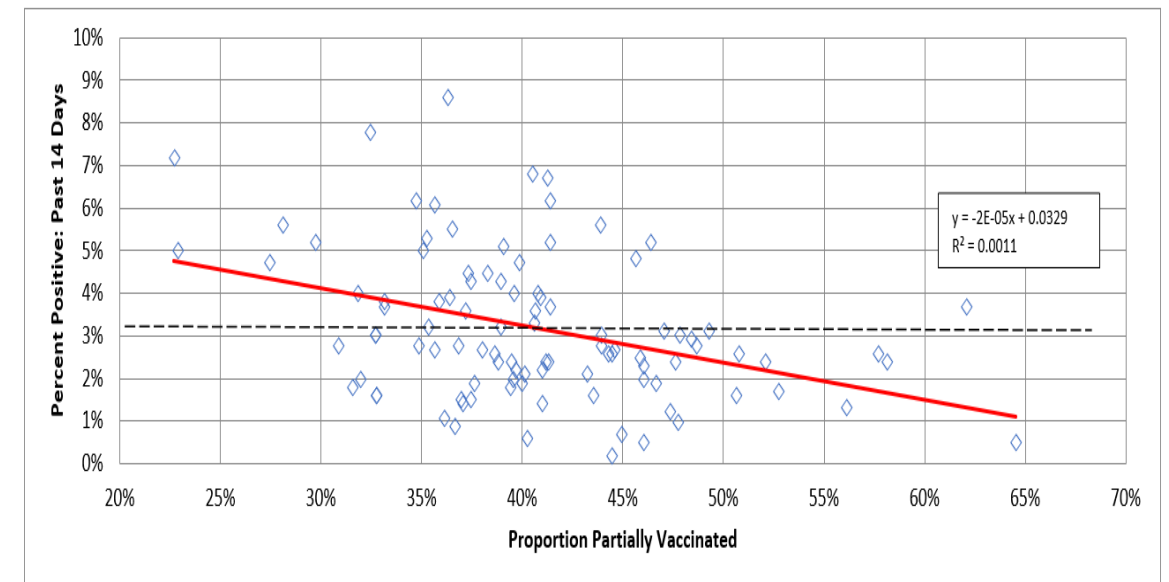
- From May 6–June 28, people who were not fully vaccinated accounted for † :
 - 99.2% of cases*
 - 98.7% of hospitalizations*
 - 98.9% of COVID deaths**

• Virus transmission is lower in counties with higher vaccination rates

Case rate and percent of population vaccinated by county ‡



PCR test percent positivity and percent of population vaccinated by county ‡



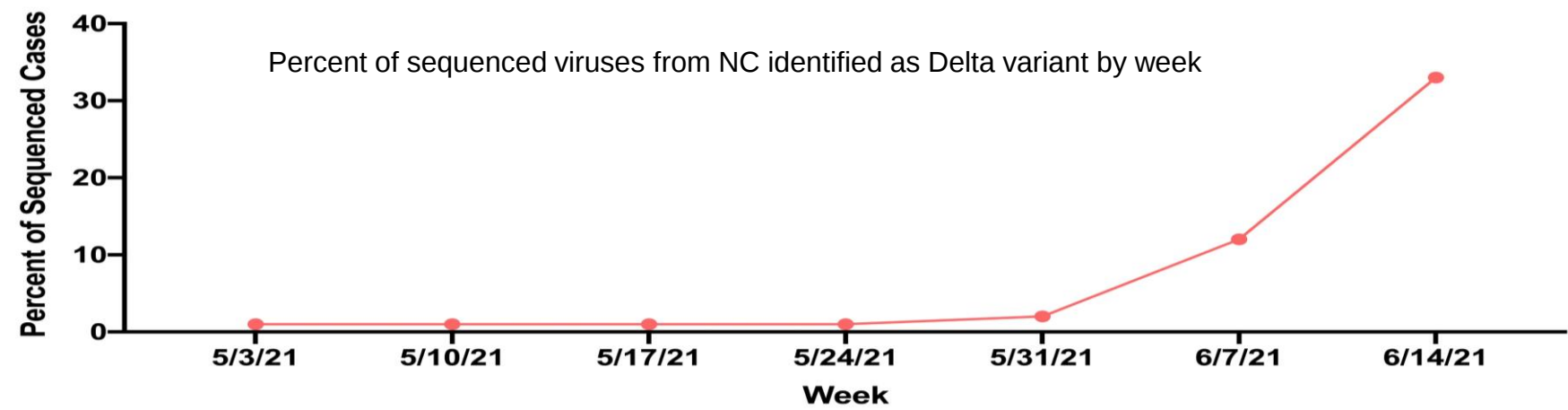
† Preliminary analysis based on vaccine data pulled from the COVID Vaccine Management System on 6/24 and case data pulled from database of reported COVID-19 cases on 6/28. Does not include vaccines given by the Department of Defense, Veteran's Administration, or Indian Health Service; Hospitalization data are missing for many reported COVID cases; Hospitalization numbers include those identified by screening during admission for reasons other than COVID * Based on date of report to public health ** Based on date of death ‡ Case rates and positivity are from June 6–June 19

DELTA VARIANT: MORE TRANSMISSIBLE AND RAPIDLY EMERGING

- Data variant has rapidly replaced other variants in the United Kingdom and elsewhere
- Early data from United Kingdom in table are summarized below:

Transmission	Increased	Estimated 64% more transmissible than Alpha variant (which is more transmissible than previous variants)
Severity	Possibly increased	Early evidence suggests increased hospitalizations compared to Alpha variant (could change)
Vaccines	Reduced	Vaccines still effective against Delta variant; early evidence suggests some reduced effectiveness, particularly after 1 dose of 2-dose series (15-20% reduction)

- The Delta variant is rapidly replacing other variants in North Carolina and elsewhere in the US.



Source: Data from CDC contract labs. Data are preliminary and subject to change – percentage for week ending 6/14 is based on a low volume of sequenced viruses



Considerations and Timing for StrongSchools Toolkit Guidance Revisions

Susan Gale Perry, Chief Deputy Secretary

What Science Says About Preventing COVID-19 in North Carolina's K-12 Schools

WHAT DID THE ABC SCIENCE COLLABORATIVE STUDY?

Researchers with the ABC Science Collaborative collected data from 100 school districts and 14 charter schools in North Carolina from March through June 2021. These schools represent more than 1.2 million students and 160,000 staff.

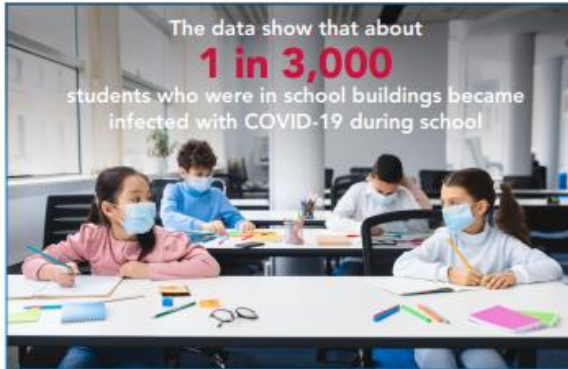
Researchers studied how many people caught COVID-19 in "Plan A" schools that offered full in-person instruction, and compared results with "Plan B" schools, which offered hybrid instruction to enable six feet of physical distance.

100
school districts




14
charter schools





WHO FUNDED THIS RESEARCH?

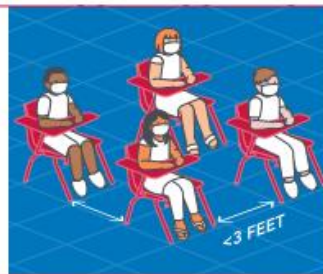
The state of North Carolina funded the ABC Science Collaborative to collect this data from schools after legislation mandated that all districts open for in-person education.

WHAT DID RESEARCHERS LEARN?

Researchers found schools did a great job preventing COVID-19 spread, regardless of whether they used Plan A or B. Keeping students, teachers, and staff properly masked prevented spread. Even with this success, 40,000+ students and staff were quarantined, resulting in hundreds of thousands of missed school days.

WHAT ABOUT DISTANCING IN SCHOOLS?

When students, teachers, and staff are masked, how much distance is maintained between people does not matter. Whether schools required greater than 3 feet of distance between people or less than 3 feet, researchers found no difference in the number of positive COVID-19 cases.



[A new report issued on June 30, 2021, by the ABC Science Collaborative](#)

shows that North Carolina schools were highly successful in preventing the transmission of COVID-19 within school buildings

The findings demonstrate that:

- Proper masking is the most effective mitigation strategy to prevent COVID-19 transmission in schools when vaccination is unavailable, or there are insufficient levels of vaccination among students and staff;
- With masking in place, Plan A – full, in-person instruction – is appropriate for all grades and all schools;
- Full-capacity bus transportation can and should resume, with the seating of up to three masked students per bus seat;
- Some within-school guidelines can be relaxed, e.g., quarantine can be modified for people who were exposed to COVID-19 but are either vaccinated or were appropriately masked when exposed;
- Schools should examine safety protocols surrounding athletics. With proper safety protocols in place, particularly vaccination, schools could resume fall athletics while limiting the spread of COVID-19.

Factors to Consider for Revised Toolkit

- **Vaccines are now widely available and very effective for people 12 and over.** Vaccination rates variable across the state. Children < 12 are not eligible for the vaccine.
- **Community rates of viral transmission are currently low.** Will continue to watch Delta variant and any seasonality impact.
- **The CDC recommends unvaccinated people continue to wear masks – 99% of new COVID cases are from those who are unvaccinated.**
- **Studies continue to show lower risk of spread and disease among younger children.** Toolkit recommendations have differed for elementary vs middle/high school for this reason.
- **New research about the virus and transmission (e.g. ABC report) allows for tailoring to high value interventions and layering protective strategies (e.g., screening testing strategies).**
- **CDC is expected to issue updated school guidance as soon as next week.**
- **Districts want flexibility to react to the unique circumstances of their community.**
- **Level of operational complexity and lead time are very important.**



Support for School Nurses and Screening Testing

Ann O. Nichols MSN, RN, NCSN

State School Health Nurse Consultant, Nursing Supervisor

K-12 Reopening Schools: Support for Screening Testing

Program Overview

- To enable schools to establish COVID-19 screening testing programs to support and maintain in-person learning, the federal government is providing funds to enable and expand school-based screening testing
- Funds are available April 2021 through July 2022
- 85% of funds must be allocated to support schools (public or private) that cover all or some K-12 grades.
- Screening guidance will be implemented consistent with CDC guidance



School Health Staff 68%

Funding to LEAs and charters schools to hire temporary school health staff to support testing related efforts and meet other school health needs



Vendor 16%

Contract an end-to-end vendor that any public or private school may request to provide screening testing



Test Supplies 14%

State purchase of additional testing supplies



Program Support 2%

Bolster IT infrastructure for reporting and hire state-level personnel to support local staff and manage program, vendor and reporting

Testing Program Options

Schools must opt-in to testing through the opt-in form by September 13 for priority support*

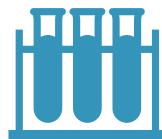


State Contracted Vendor

NCDHHS vendor available to support testing program at school/district

Available to all schools

OR



Independent Testing

NCDHHS provides free tests that schools may request to perform screening and/or diagnostic testing

Available to all schools



Staffing Support**

NC DHHS provides funds for LEAs/charters to hire, train, support clinical staff

Available to LEAs and charters who participate in screening testing

Districts will define their own testing programs or may choose not to participate in testing for 2021-2022.
NC DHHS COVID-19 Testing Program for K-12 Schools

* The opt-in form will be released in early July, along with additional guidance on vendor versus school/ district testing responsibilities

**Staffing support is a program that LEAs and charters can take advantage of in addition to state contracted vendor or independent testing

Testing Program Options

Add-on: Funding to Hire Temporary School Health Staff

Eligibility Requirements:

- Only open to all public school districts and charter schools for the 2021-22 school year
- Schools / districts must complete opt-in form by September 13, 2021 and enroll in either state vendor or independent screening testing program to receive funds*
- We anticipate that there will be a minimum testing requirement in order to receive funds. We will share more details as they become available

NC DHHS	School/District
• Provide funds for LEAs/Charter schools to hire a registered nurse (RN) and/or other licensed or unlicensed clinical personnel • Provide resources and technical assistance through School Health Nurse Consultant Team for onboarding • Provide Office Hours for RN School Nurses	• Hire registered nurse (RN), and/or other licensed or unlicensed clinical personnel • If school/district does not have a full-time registered nurse on staff, they are required to hire a RN prior to hiring additional staff • Use funds to also cover training, hardware/software, PPE, communications materials • Report on staff hired and activities

Hired staff are required to assist with COVID-19 testing program and COVID mitigation support; however, they can also be available to complete other school health program needs that support student access to education.

** The opt-in form will be released in early July, along with additional guidance on how funds will be distributed*

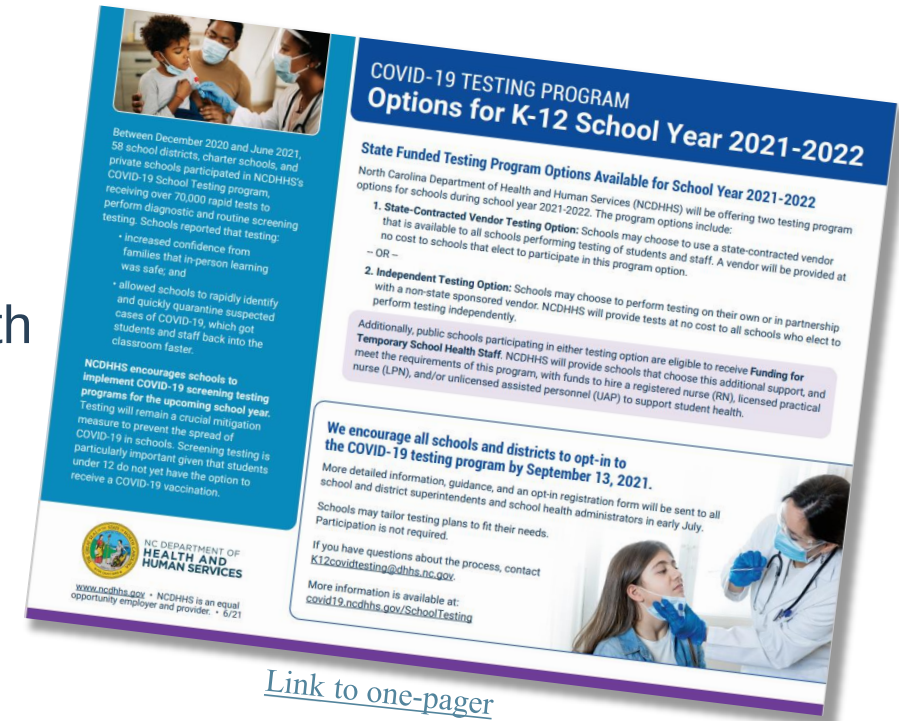
Allowable Uses for Staffing Funding

List currently in development

1. Employ temporary school health staff (RN School Nurse, LPN, unlicensed)
 - a) Support testing program activities not covered by vendor
 - b) COVID-19 support and response
 - c) School health program activities that have been side-lined (catch up)
2. Expenses associated with hiring of temporary staff
3. Supplement current part-time salaries to bring to full-time status
4. Provide hardware/software for staff necessary for reporting, communication, and response for testing and related activities
5. Training for temporary staff
6. Tests to provide supplemental testing at the school
7. Costs associated with testing not otherwise covered (PPE, printing, communications materials, etc.)

Next Steps

- Begin discussing testing with **school staff and families**
- Take a look at [our FAQ document](#) for the testing program
- Keep an eye out for the opt-in form that will be distributed to superintendents, assistant superintendents and school health administrators in early July – **due September 13** for priority assistance from NC DHHS!
- Email K12COVIDTesting@dhhs.nc.gov with any questions
- [COVID-19 Testing Program Options for K-12 One-pager](#)



[Link to one-pager](#)

