

# K-12 COVID-19 Response

*Susan Gale Perry, Chief Deputy Secretary*

*Dr. Betsey Tilson, State Health Director*



## State Board of Education Meeting

October 7, 2021



NC DEPARTMENT OF  
**HEALTH AND  
HUMAN SERVICES**

# Agenda

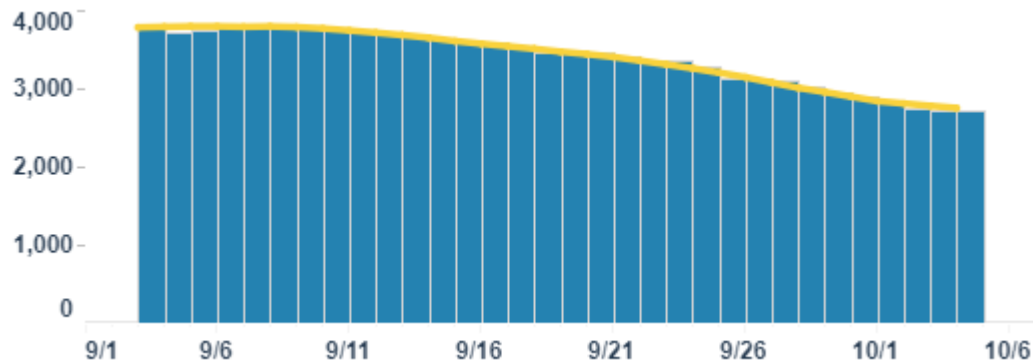
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- **Statewide COVID-19 Updates & Data Trends**
- **Vaccines and Boosters**
- **StrongSchoolsNC Toolkit Changes**

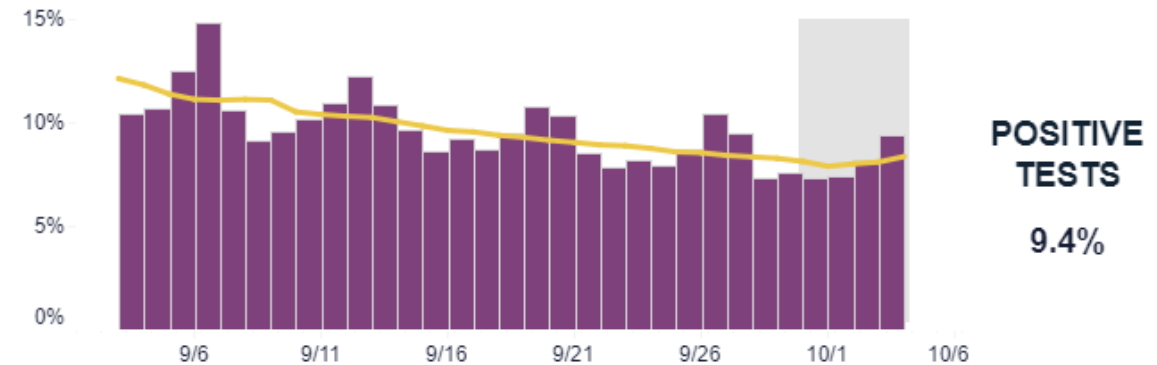
# Four Key Metrics- Signs of Leveling Off and Some Decline

## Daily Number of People Currently Hospitalized

Currently hospitalized: 2705

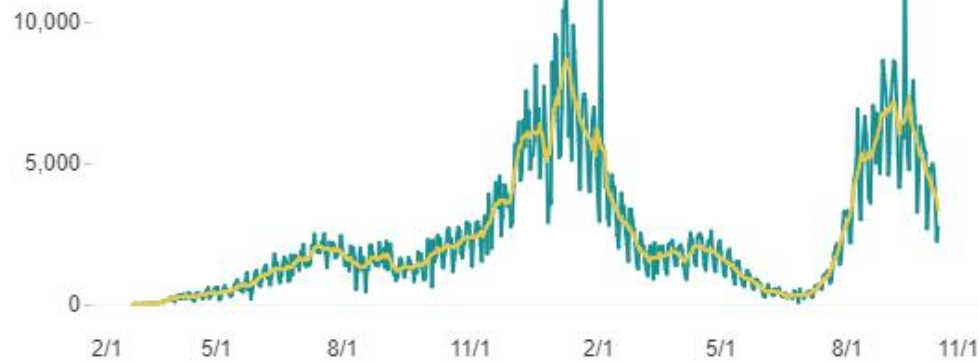


## Positive Tests as a Percent of Total Tests

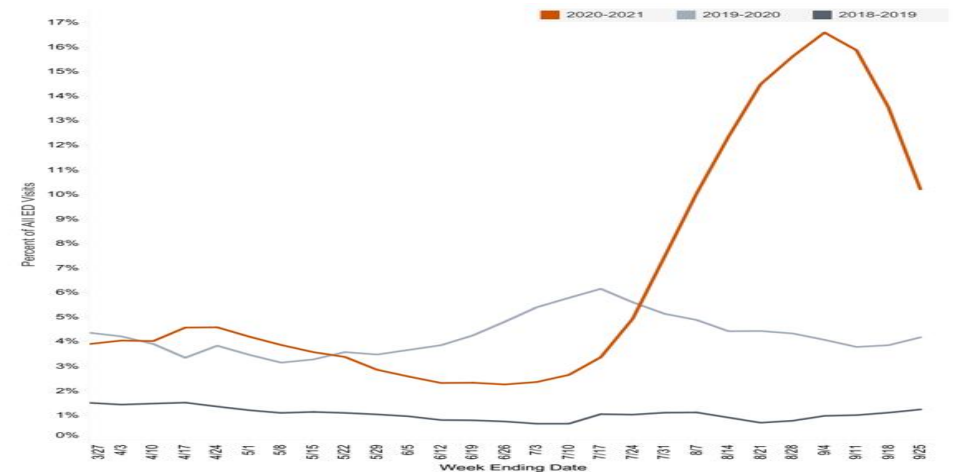


## Daily Cases by Date Reported

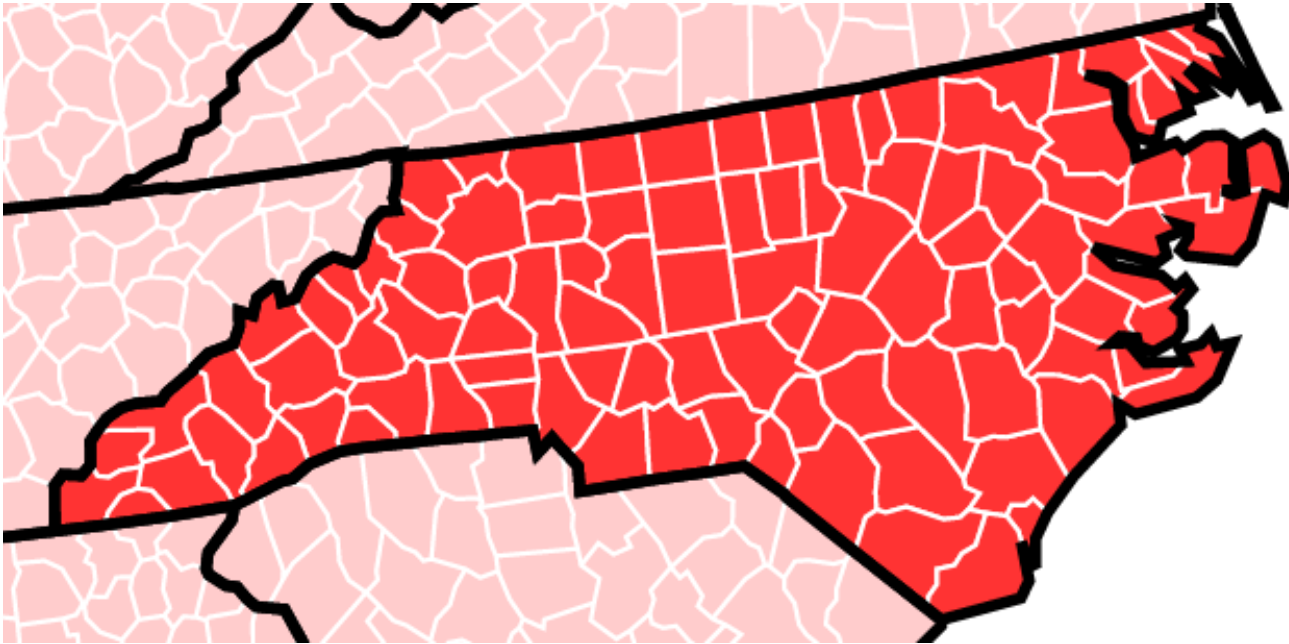
Total Cases: 1,413,605



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



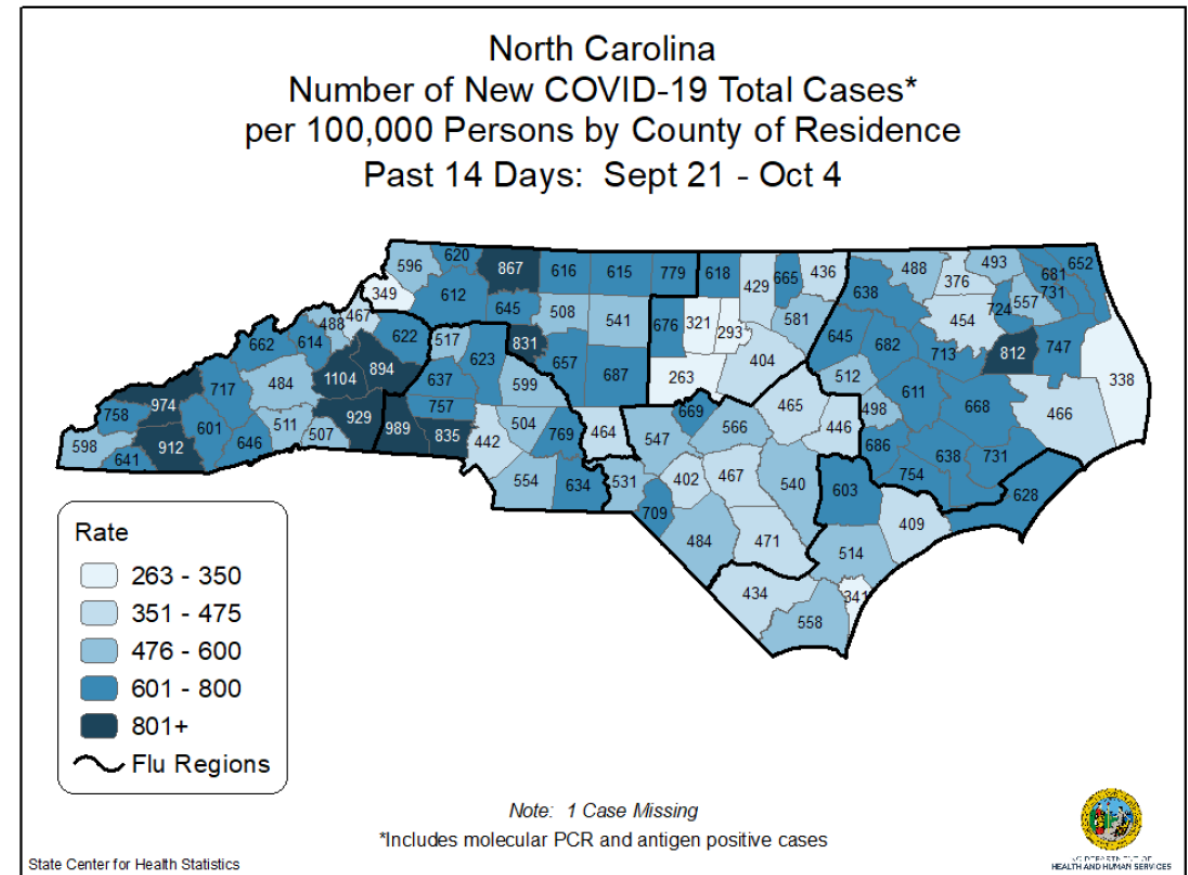
# Case Rates May be Declining, But Still High



<https://covid.cdc.gov/covid-data-tracker/#county-view>

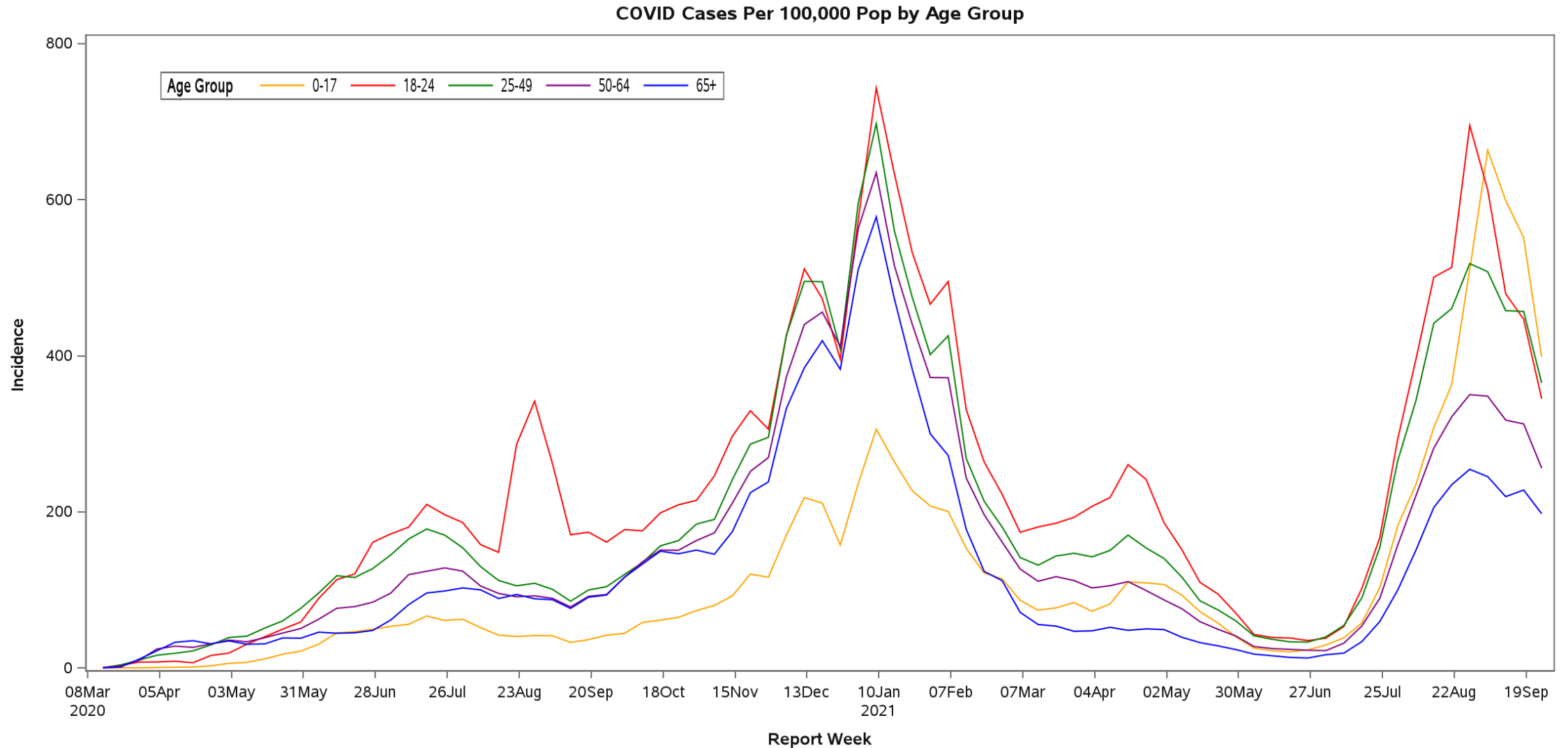
North Carolina as a whole is 2½ times above the threshold for High Level of Community Transmission by the CDC

All 100 North Carolina Counties are categorized as High Level of Community Transmission



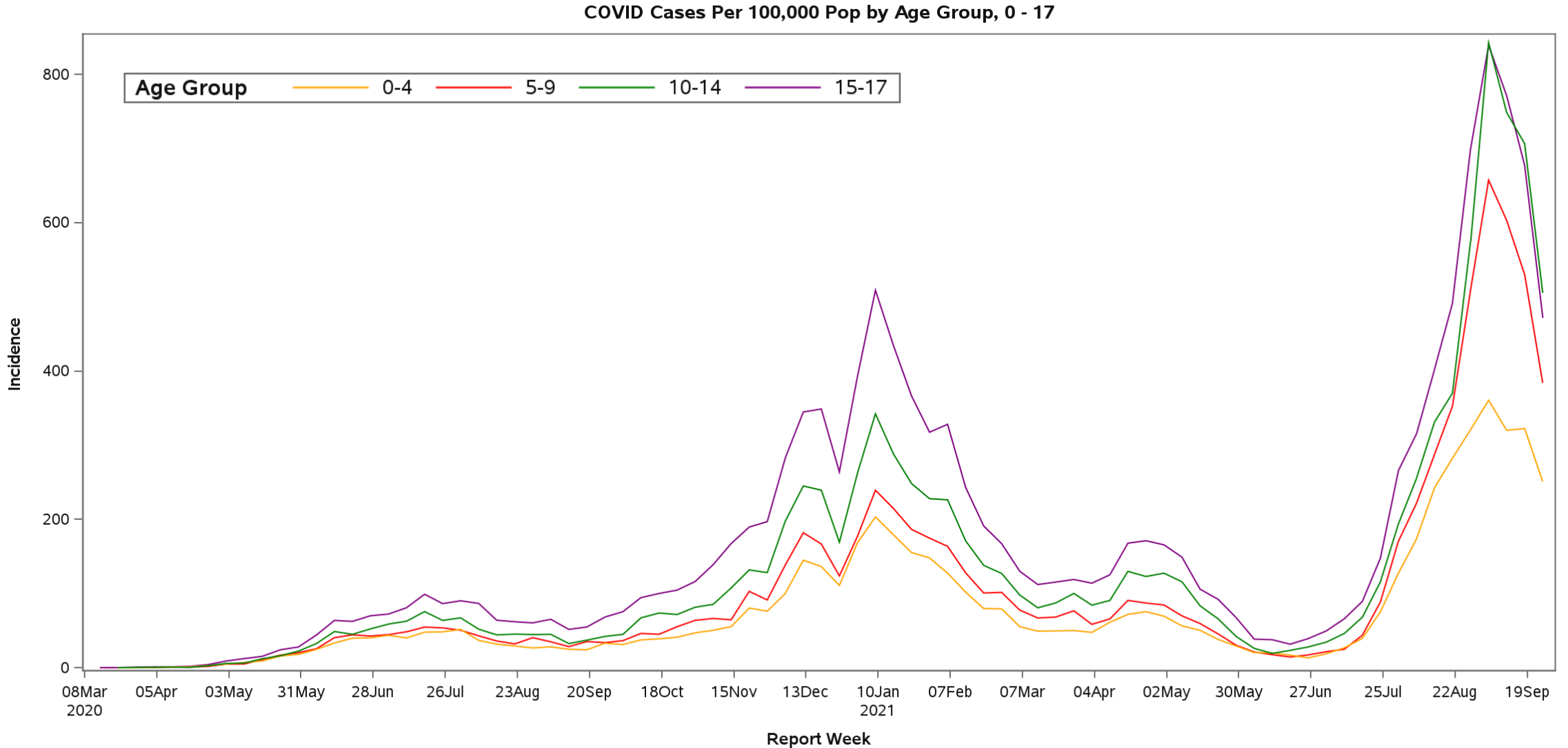
# Case Rates Decrease Across All Age Groups

Case rates have fallen most rapidly for individuals ages 0-17 and 18-24 since the summer peak. Case rates for children continue to be higher than January peak levels.



# Case Rates Declining Among Children

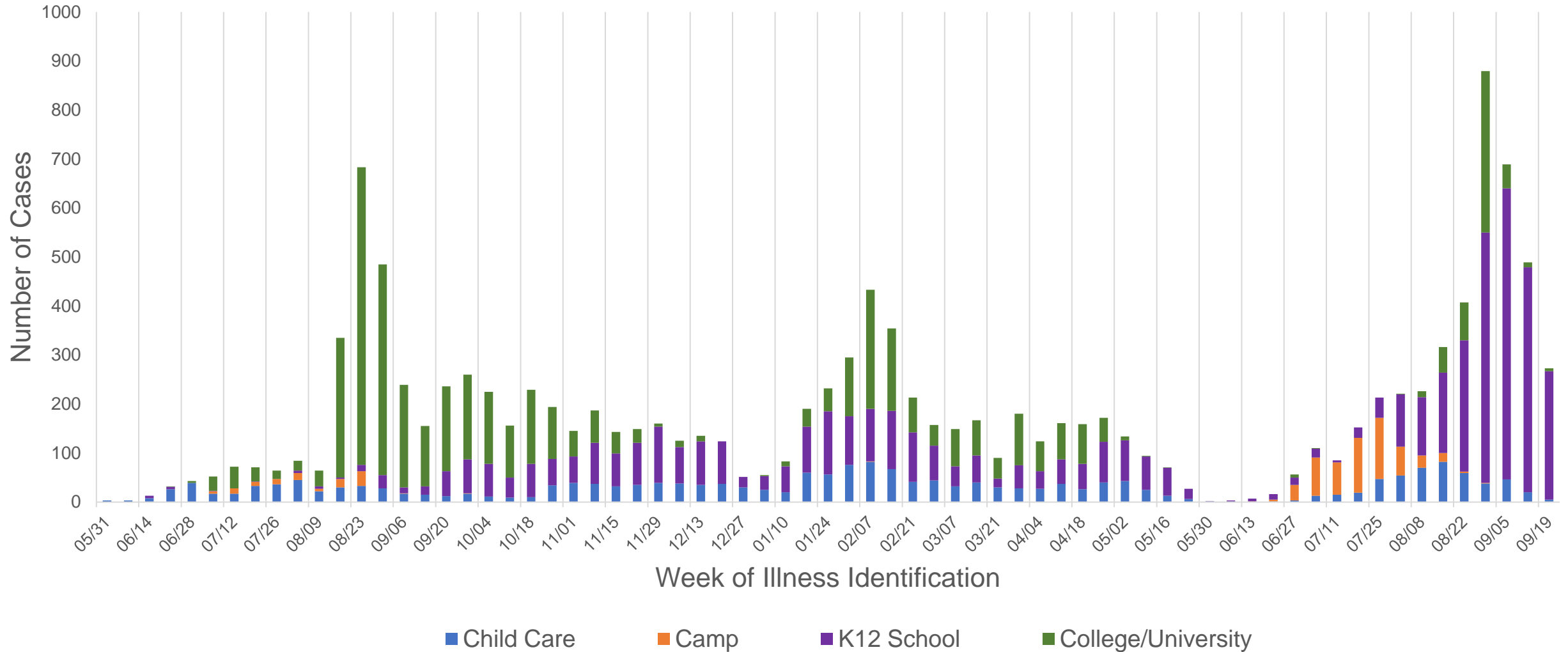
Highest rates in middle and high school-aged children.



# K-12 Reported Clusters – as of 9/27/21

- 258 currently active clusters (246 at public schools, 12 at private schools)

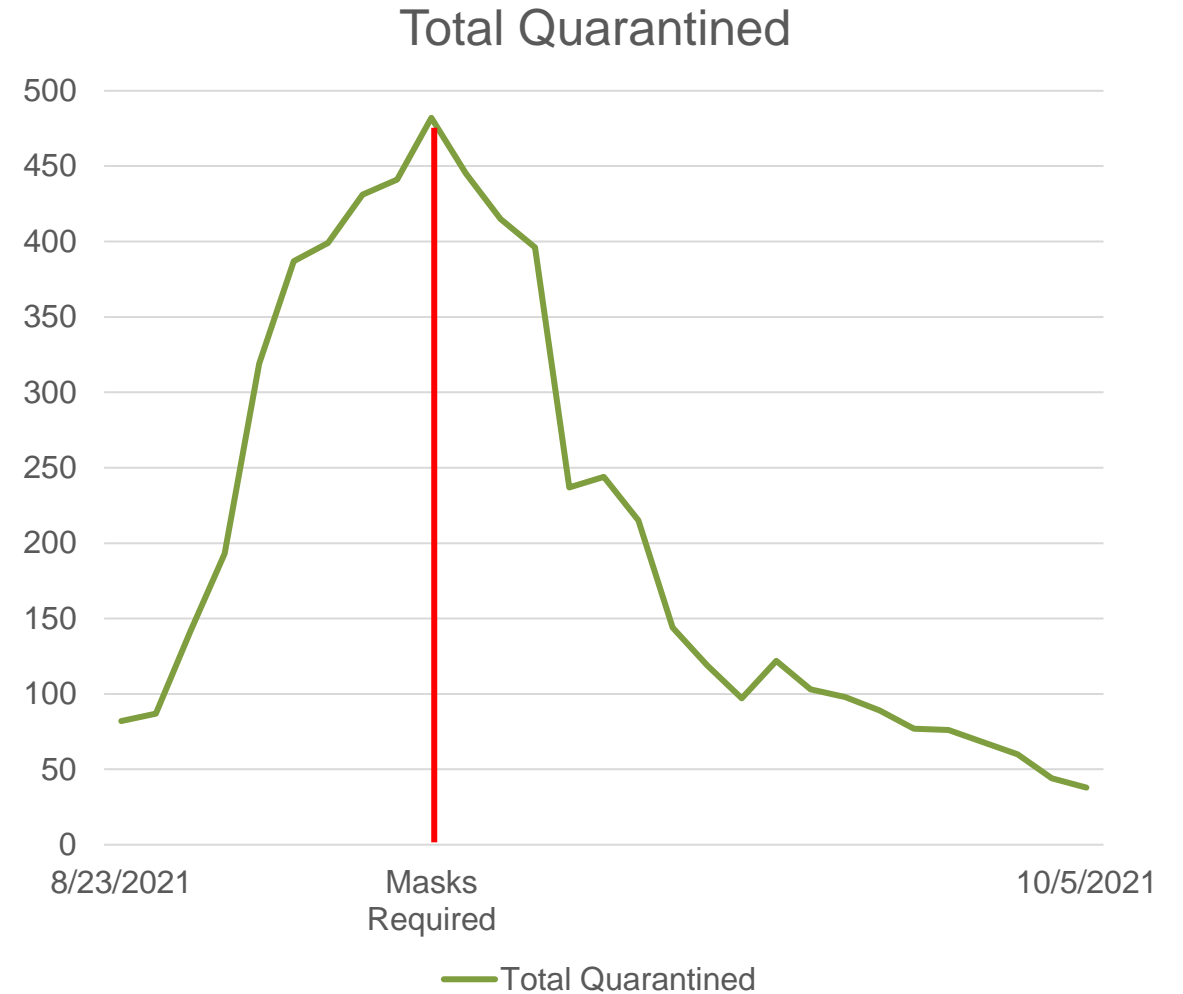
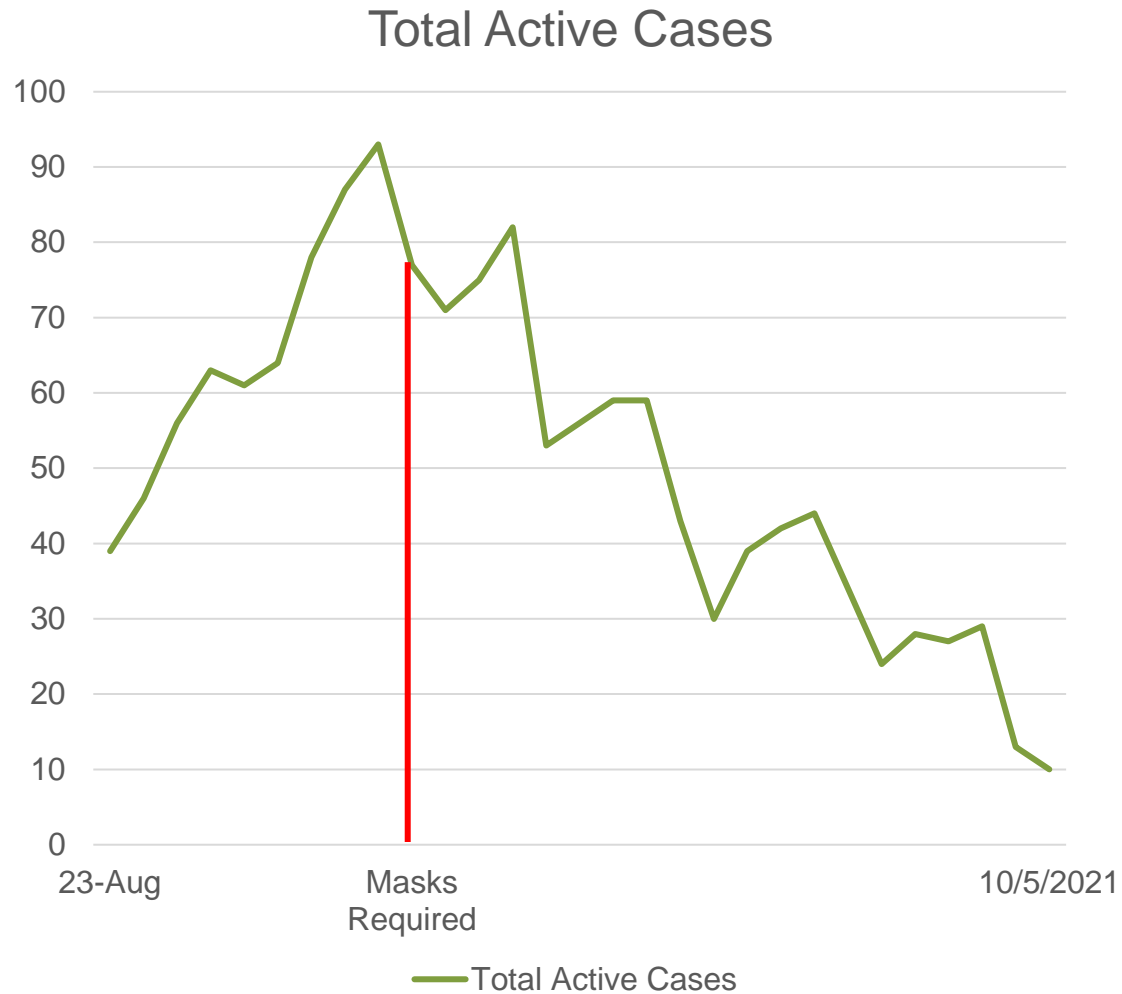
<https://covid19.ncdhhs.gov/dashboard/outbreaks-and-clusters/>



# Mask Mandate Comparison: *August 26 –September 26, 2021*

- **3 counties without mask mandates in schools**
  - There was an average of **17.2** clusters per 100 schools in those three counties.
- **89 counties with consistent mask mandates**
  - 35 counties did not report a school cluster.
  - 54 counties reported at least one school cluster.
    - Of those, there was an average of **6.9** clusters per 100 schools
- **Eight counties that reported clusters and changed school mask mandates in the time period were excluded.**

# Case Study – One NC County Adopting Mask Requirement

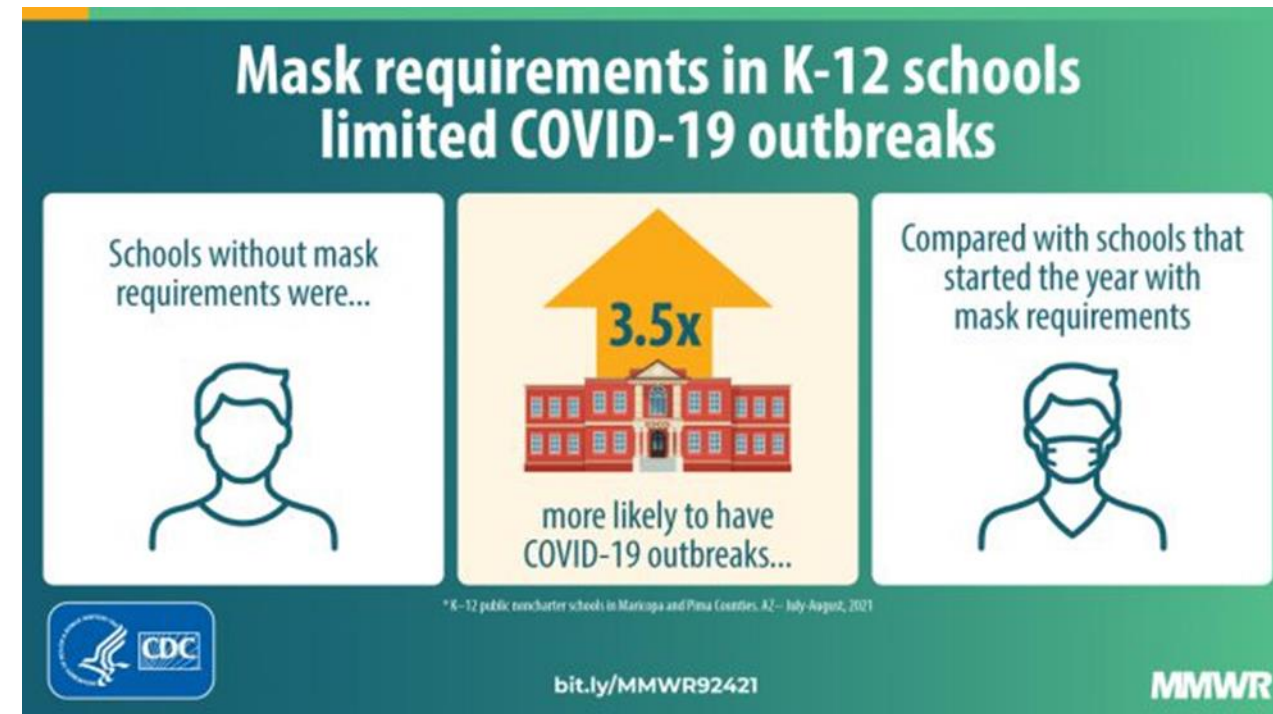


# Association Between K–12 School Mask Policies and School-Associated COVID-19 Outbreaks — Maricopa and Pima Counties, Arizona, July–August 2021

Early Release / September 24, 2021 / 70

Megan Jehn, PhD<sup>1,\*</sup>; J. Mac McCullough, PhD<sup>2,\*</sup>; Ariella P. Dale, PhD<sup>3,4</sup>; Matthew Gue<sup>1</sup>; Brian Eller<sup>5</sup>; Theresa Cullen, MD<sup>5</sup>; Sarah E. Scott, MD<sup>4</sup>

**Summary:** In the two largest Arizona counties, with variable K–12 school masking policies at the onset of the 2021–22 academic year, the odds of a school-associated COVID-19 outbreak were 3.5 times higher in schools with no mask requirement than in those with a mask requirement implemented at the time school started.



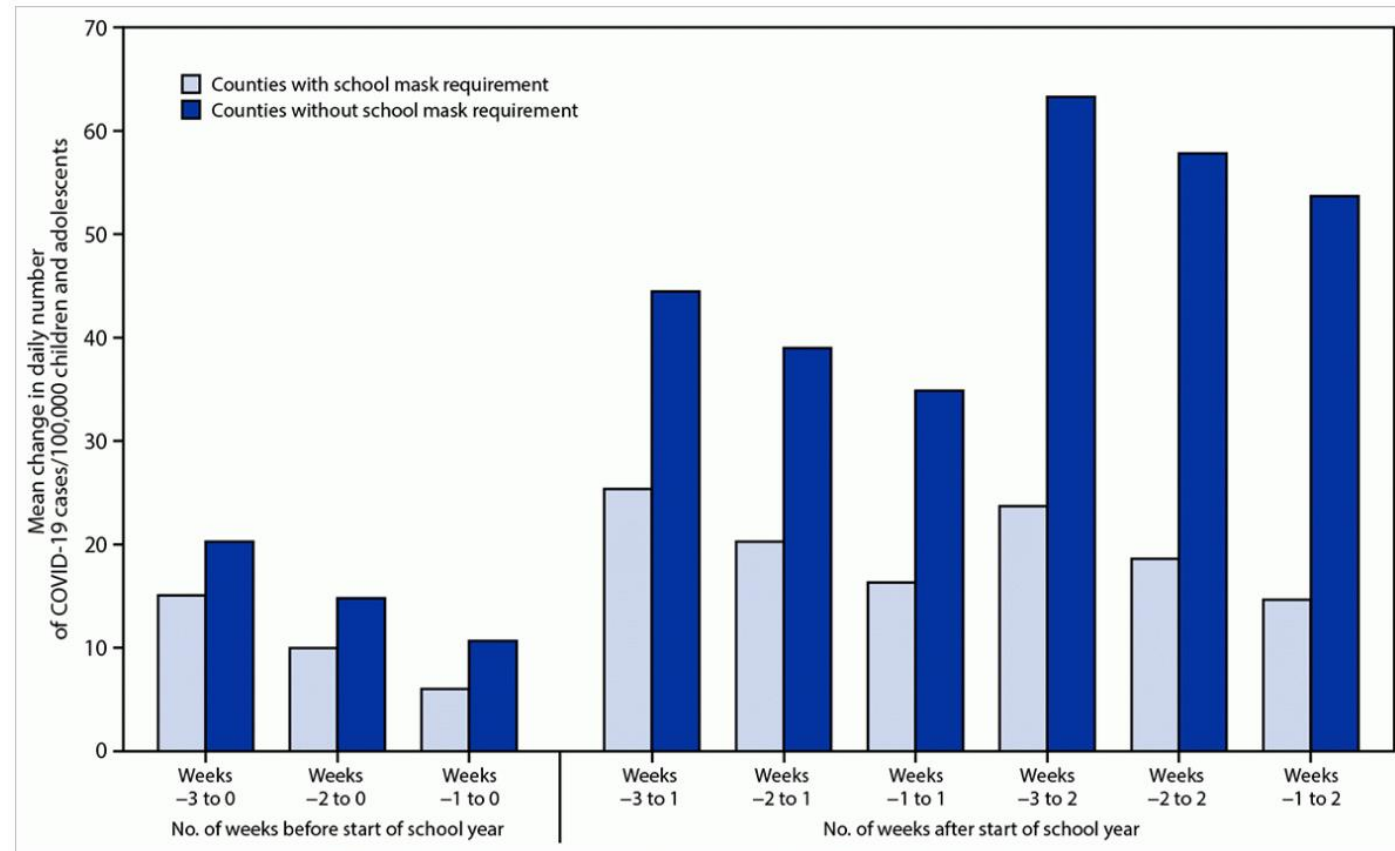
[https://www.cdc.gov/mmwr/volumes/70/wr/mm7039e1.htm?s\\_cid=mm7039e1\\_w](https://www.cdc.gov/mmwr/volumes/70/wr/mm7039e1.htm?s_cid=mm7039e1_w)

# Pediatric COVID-19 Cases in Counties With and Without School Mask Requirements — United States, July 1–September 4, 2021

Early Release / September 24, 2021 / 70

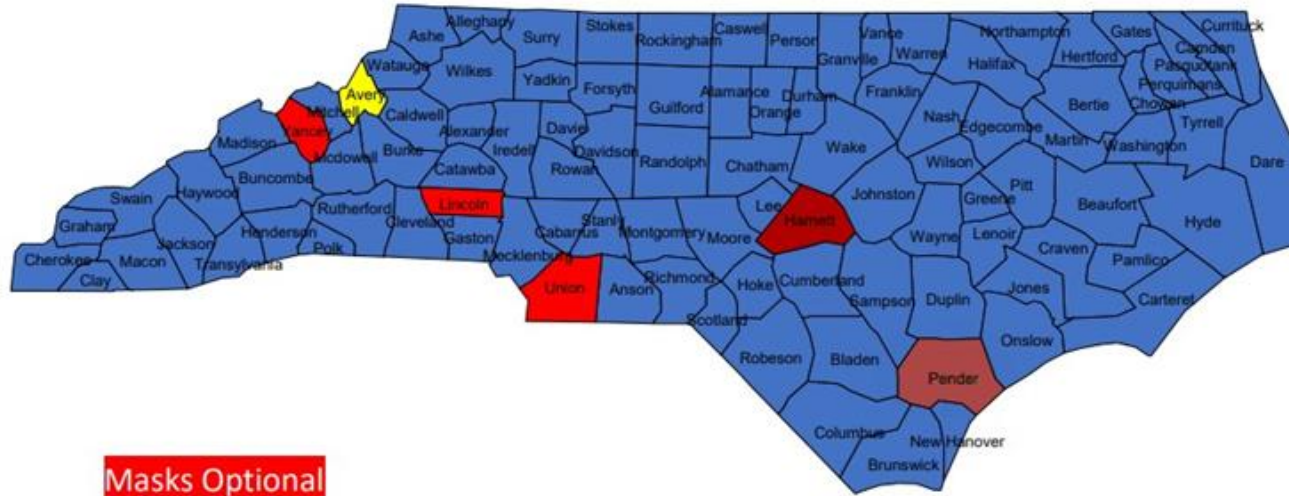
Samantha E. Budzyn, MPH<sup>1,2</sup>; Mark J. Panaggio, PhD<sup>3</sup>; Sharyn E. Parks, PhD<sup>1</sup>; Marc Papazian<sup>4</sup>; Jake Magid; M Eng<sup>4</sup>; Lisa C. Barrios, DrPH<sup>1</sup>

**Counties without school mask requirements experienced larger increases in pediatric COVID-19 case rates after the start of school compared with counties that had school mask requirements**



\* Among 520 counties, 198 (38%) had a school mask requirement and 322 (62%) did not have a school mask requirement.

# NORTH CAROLINA LEA FACE MASK POLICIES (as of 10/05/2021)



**Masks Optional**

**Masks Optional (Pending)**

**Masks Required**

**Masks Required (Pending)**

	Number of Districts	Percentage of Districts	Number of Students	Percentage of Students
Districts requiring universal face coverings	106	92.17%	1,251,965	93.36%
Districts making face coverings optional	5	4.35%	80,945	6.04%
Districts requiring face coverings (partial)	4	3.48%	8,062	0.60%
Waiting on decision from districts	0	0.00%	0	0.00%
<b>Totals</b>	<b>115</b>	<b>100.00%</b>	<b>1,340,972</b>	<b>100.00%</b>

# VACCINATION STATUS BY AGE

0-11 years – 0%  
Not currently eligible for vaccination

Percent of Population Vaccinated with at Least One Dose

Percent of Population Fully Vaccinated

Total Population



Total Population



12+ Years of Age



12+ Years of Age



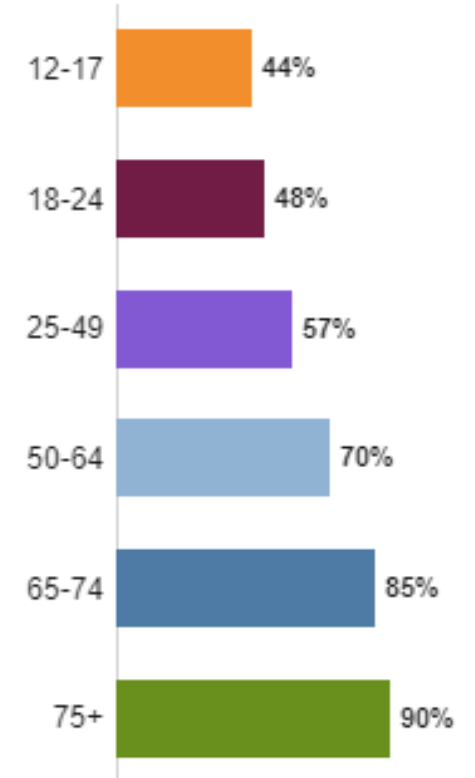
18+ Years of Age






18+ Years of Age



Cumulative Total



# STATUS OF COVID-19 VACCINE AUTHORIZATION IN US: 9/30/2021

	Adults 18 +	Pediatrics				Additional <i>(Immunocompromised)</i>	Booster
		16-17	12-15	5-11	6 months - 5 years		
	Approval (August)	Approval (August)	EUA (May)	<b>Under Review FDA Advisory Committee meeting Oct 26th</b>	Submit (Nov/Dec?)	EUA (August)	EUA (September)
	EUA (Dec) Approval Under Review (June)	Under Review (June)	Under Review (June)	Submit (Oct?)	Submit- (Dec/Jan?)	EUA (August)	<b>Under Review FDA advisory meeting Oct 14</b>  50 ug
	EUA (Feb)	Trials	Trials	Trials	Trials	N/A	<u>Under Review</u> <b>FDA advisory meeting Oct 15</b>

# Boosters – Only Pfizer Currently

You can get a booster if it has been at least 6 months since your second **Pfizer** shot, and one of the following is true:

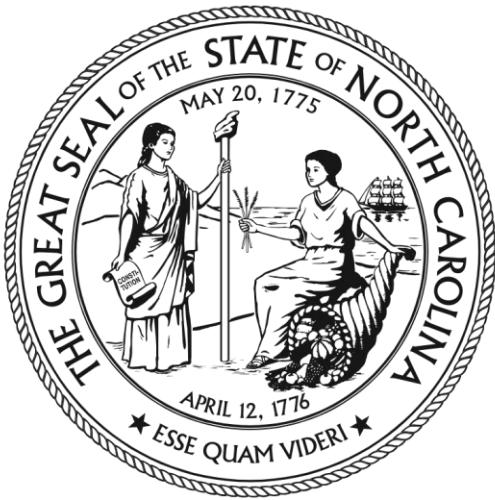
- You are 65 or older.
- You are 18 and older and:
  - You live or work in a nursing home or other long-term care residential facility.
  - You have a [medical condition](#) that puts you at high risk for severe illness,
    - **For example**, obesity, asthma, heart disease, high blood pressure, and diabetes..
  - You work in a high-risk profession, meaning you come into contact with a lot of people, and you don't know their vaccination status
    - **For example**, health care workers, first responders, **teachers, school personnel, child-care workers**, food processing workers, retail and restaurant workers, and public transportation workers.
  - You live or work in a place where many people live together
    - **For example**, homeless shelters, correctional facilities, migrant farm housing, dormitories or other group living settings in colleges or universities.
- People can self-attest that they are in one of these groups. Proof is not needed.

<https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html>

<https://www.cdc.gov/coronavirus/2019-ncov/vaccines/booster-shot.html>

# **EXTENSION OF SCHOOL IMMUNIZATION AND HEALTH ASSESSMENT REQUIREMENTS**

- **To ensure that children are not excluded from school because of increased demands on health care providers amid the ongoing COVID-19 pandemic**
- **Executive Order and a State Health Director Memo suspends, but does not waive documentation deadlines for proof-of-immunization and health assessment requirements for school and child-care facilities.**
- **This year, the 30-day "grace period" for all students will begin on November 1, 2021 and families will need to provide documentation of immunization and health assessment by 30 days after.**
- **Families are required to provide the school or child care facility proof of an upcoming appointment (which could include a written statement from a parent or guardian) by October 8, 2021**
- **The Executive Order and State Health Director Memo will apply to students enrolled in public, private, or religious educational institutions, including child care facilities and K-12 schools and include home-schooled, in-person or remote learning**



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# StrongSchoolsNC K-12 Toolkit Updates

October 7, 2021

# StrongSchools Toolkit Updates

- **Updated** “What Do We Know About COVID-19 and School Settings” to reflect the latest research and science on the Delta variant
- **Extended** quarantine exemption to include adults in K-12 settings after exposure, if both persons were consistently masked; recent scientific and public health information shows low rates of transmission with universal masking

• **Individuals** who are not fully vaccinated after a close contact in a classroom or other school setting if masks were being worn appropriately and consistently by both the person with COVID-19 and the potentially exposed person do NOT need to quarantine. This is based on updated studies that have shown low risk of COVID-19 transmission in classroom settings when face masks were being used appropriately by both the person with COVID-19 and the potentially exposed person, as well as multiple layers of prevention measures in place to prevent transmission in school settings. This applies to exposures in classrooms, other in-school settings, and school transportation but does not apply to exposures during extracurricular, including athletic activities.

- DHHS approved protocol for an ABC Science Collaborative research study
  - Test and Stay alternative to quarantine after unmasked exposure in districts with mask mandates
  - ABC identifying districts – approximately 9; submitting data to ABC, mix of size, geography, agree to participate with logistics

# New Materials in StrongSchoolsNC Toolkit

New resources on control measures, legal authorities and requirements for schools



NC DEPARTMENT OF  
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## COVID-19 in Schools: Legal Authority and Requirements<sup>1</sup> (October 5, 2021)

### Introduction

Schools are an important part of the infrastructure of communities. They provide safe and supportive learning environments for students that support social and emotional development, provide access to critical services, and improve life outcomes. Protection against exposure to COVID-19 is essential to ensure that schools can continue to provide these functions that support children's healthy development and learning, and that the risk to students, staff and visitors is as low as possible in school settings. Schools are required to work with state and local public health officials to prevent the spread of COVID-19. This document sets out these legal requirements.

### Legal Requirements

#### Principal's Duty to Report:

The law requires that school principals report to the local health department anyone within a school who they have reason to suspect has a reportable communicable disease. COVID-19 is a reportable communicable disease.<sup>2</sup> For schools, this means that if a student or staff member tests positive for COVID-19, or is suspected to be positive for COVID-19, the principal of the school must notify the local health director or designee. ([NCGS 130A-136](#))

#### Health Department to Investigate; School to Provide Records:

Once notified of a reportable communicable disease, the local health director or designee is charged under law with investigating cases of communicable diseases. ([NCGS 130A-144\(a\)](#); [10A NCAC 0103\(a\)](#)). This investigation is commonly referred to as "case investigation." As part of the case investigation, the local health director (or State Health Director) or their designee may request medical or other records determined to pertain to the diagnosis, treatment, or prevention of COVID-19 or the investigation of a known or suspected outbreak of COVID-19 ([NCGS 130A-144\(b\)](#)). Schools have the critical information



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## Control Measures in Schools: Isolation, Quarantine and Exclusion (September 20, 2021)

### What are Control Measures?

Control measures are proven, long-standing, and well-established public health practices to prevent the spread of serious communicable diseases, such as measles, pandemic influenza, Ebola, varicella, Severe Acute Respiratory Syndrome (SARS), and COVID-19.

In North Carolina, all persons are required by law to follow specific communicable disease control measures. In the administrative rules implementing this law, the Commission for Public Health prescribes the specific control measures for communicable diseases. For COVID-19, the general control measure rule prescribes that the recommendations and guidance from the Centers for Disease Control (CDC) are the required control measures that must be followed. The StrongSchoolsNC Toolkit, which is published by the North Carolina Department of Health and Human Services and adopted by the North Carolina State Board of Education, identifies isolation, quarantine, and exclusion as control measures for schools, students, teachers, and staff that are consistent with the CDC published control measures. Due to recent actions of some school boards and questions received by the Department, this publication is being issued to provide a closer look at the implementation of the control measures of isolation, quarantine, and exclusion in North Carolina.

### Isolation, Quarantine, and Exclusion

#### Terms:

**Isolation** is a control measure used to separate people who have been infected with a communicable disease from others who are not infected. To prevent the spread of disease to others, the separation lasts until the person who is infected is no longer contagious. This control measure breaks the chain of transmission from someone known to be infected to someone not infected.

**Quarantine** is a control measure used to separate someone who has been exposed to a communicable disease, during the time period in which they may become sick or infectious to others after the exposure (incubation period), to prevent the spread of that disease. For COVID-19, the incubation period is up to 14 days. Quarantine breaks the chain of transmission because the exposed person is at risk of becoming infected and then spreading the infection to others. Schools are required to exclude students, teachers, and staff who meet the criteria to quarantine.

**NOTE:** Staff, teachers, and students who are fully vaccinated and do not have symptoms do not need to quarantine or be excluded from school based on exposure. Students who were exposed by another

Control Measures in Schools: Isolation, Quarantine and Exclusion – September 20, 2021

1

[COVID-19 in Schools: Legal Authority and Requirements](#)

[COVID-19 Control Measures in Schools](#)

