



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**



#StayStrongNC

StrongSchoolsNC

K-12 Schools Superintendents Meeting

July 6, 2021



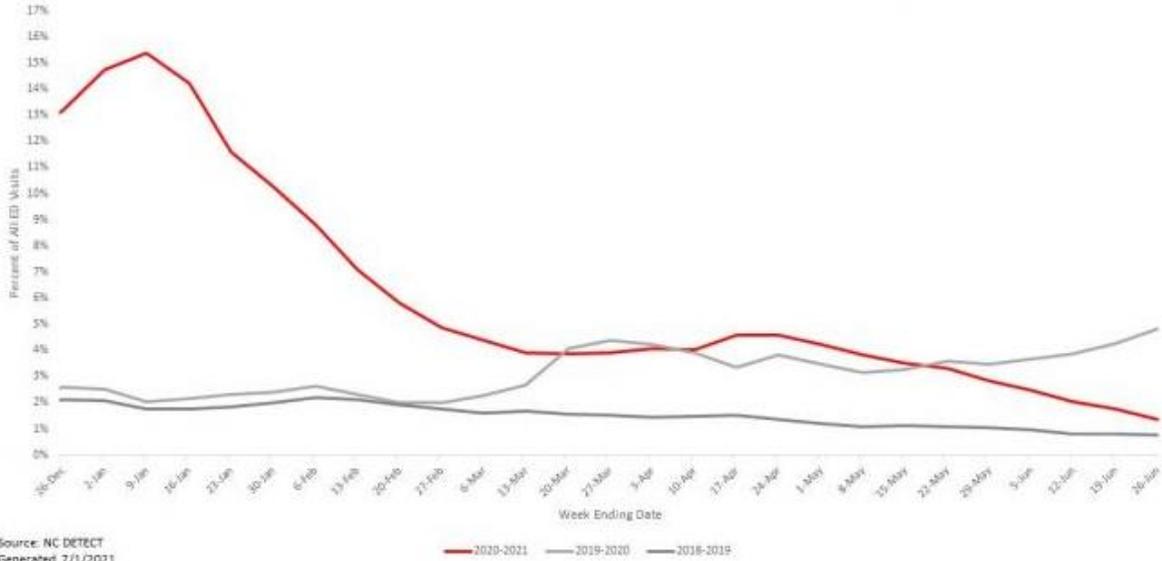


COVID Trends and updates

Elizabeth Tilson, MD, MPH

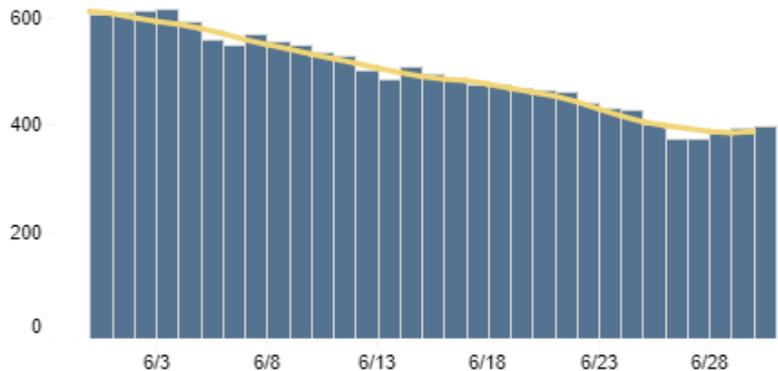
Four Key Metrics

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



Source: NC DETECT
Generated 7/1/2021

Currently Hospitalized COVID-19 Patients | Statewide



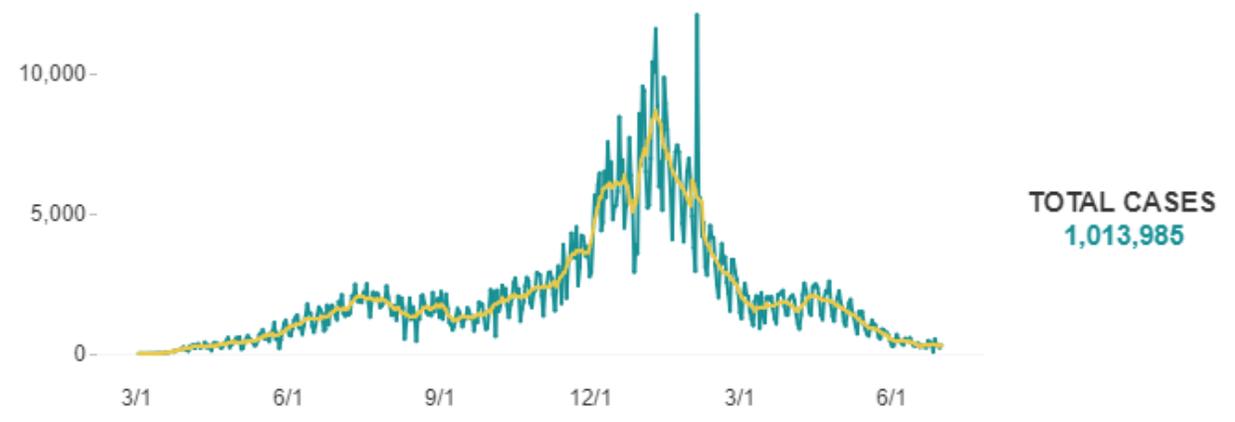
396
Currently Hospitalized

97%
Hospitals Reporting



Daily Cases by Date Reported

Is North Carolina seeing a downward trajectory over 14 days, or sustained leveling in new cases?



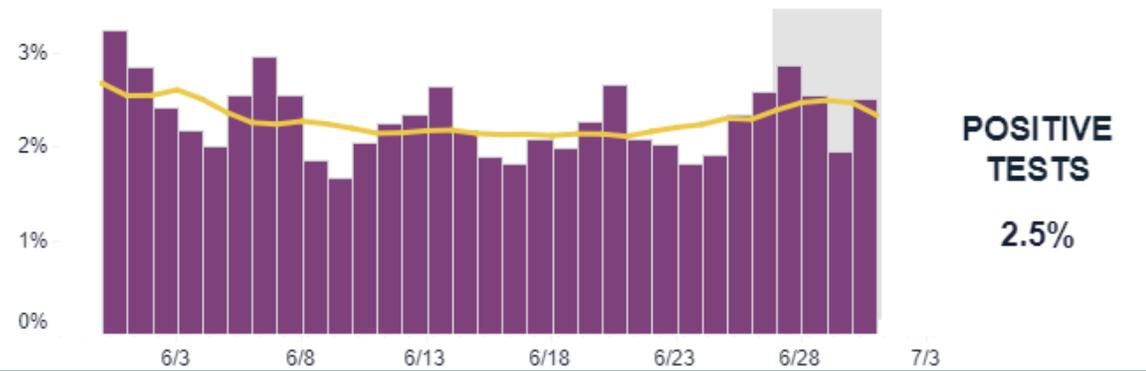
TOTAL CASES
1,013,985

Positive Tests as a Percent of Total Tests

Is North Carolina seeing a 14-day downward trajectory or sustained leveling of positive tests as a percentage of total tests?

As we ramp up testing, there will be more positive tests. Looking at what percent of total tests are positive helps us understand whether *positive* Molecular (PCR) tests are increasing in comparison to the total number of PCR tests conducted.

Laboratory results received electronically for previous dates may cause slight variation in day-to-day reporting.



POSITIVE TESTS
2.5%

VACCINATION STATUS BY AGE

Data: December 14, 2020 – July 1, 2021 at 7.00 a.m.
 Vaccinations Data will be updated Monday - Friday

0-12 years – 0%

Not currently eligible for vaccination

First of 2 Doses Administered

4,424,982

Second of 2 Doses Administered

4,139,070

Single Shot Doses Administered

335,113

Total Doses Administered

8,899,165

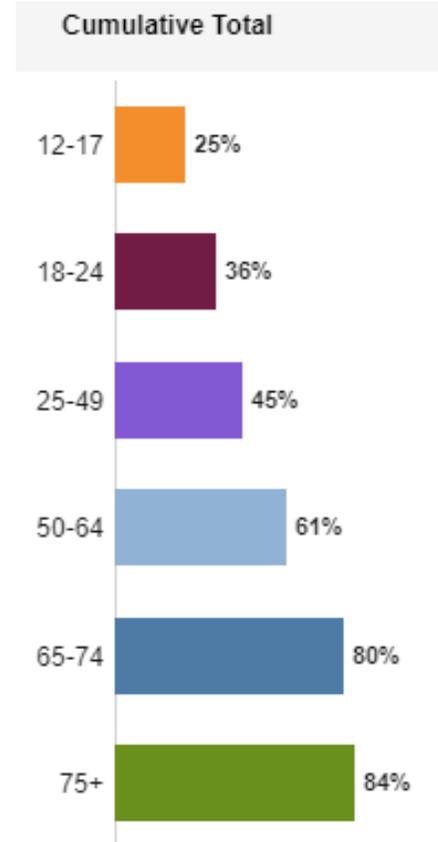
Percent of Population Vaccinated with at Least One Dose

Total Population



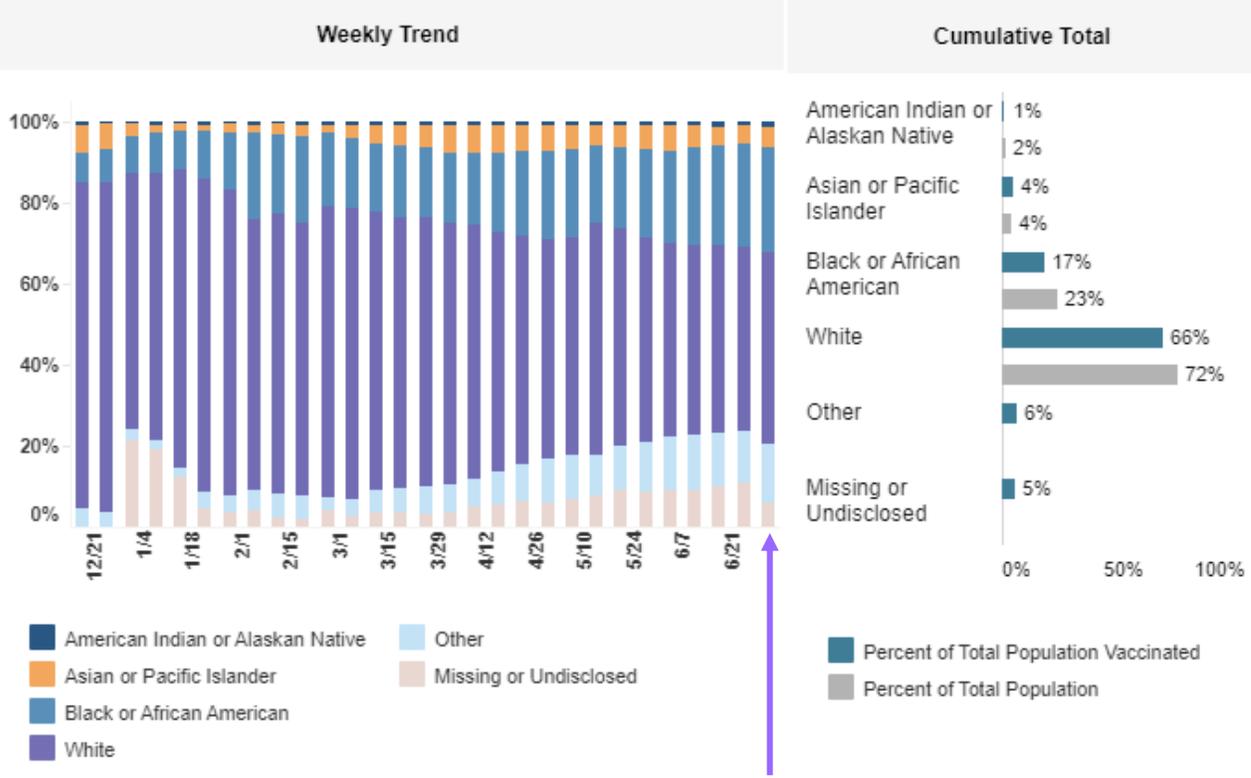
Percent of Population Fully Vaccinated

Total Population



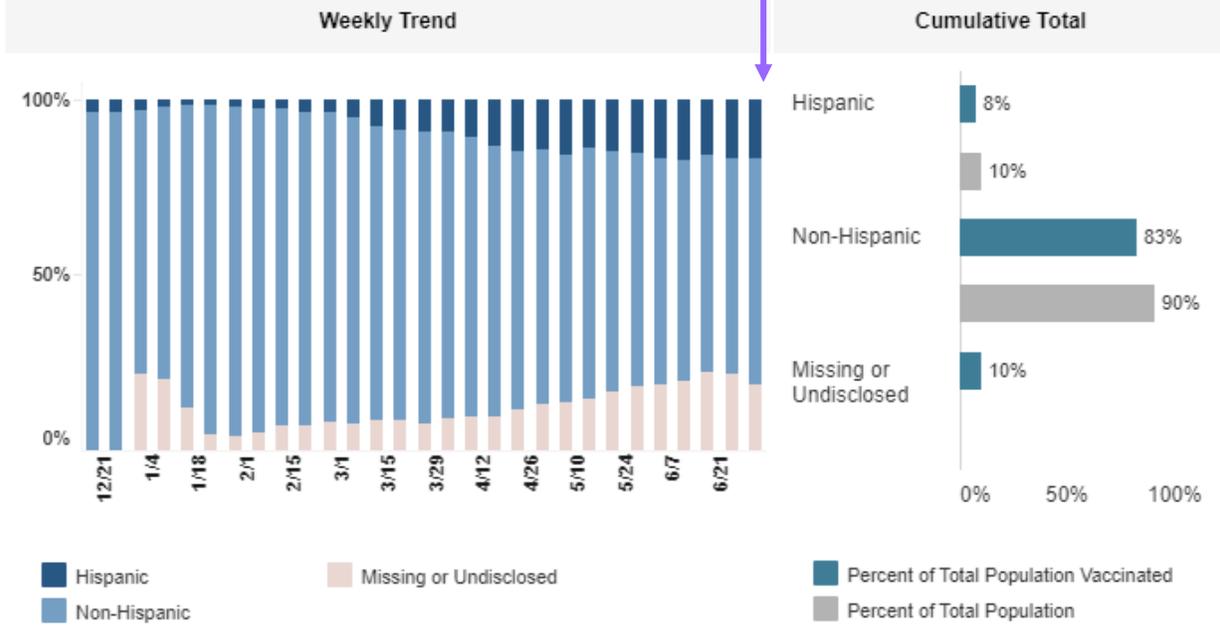
EQUITABLE DISTRIBUTION BY RACE AND ETHNICITY MORE TO DO, BUT MAKING PROGRESS

Percent of People Vaccinated with at Least One Dose by Race - North Carolina



1% American Indian
5% Asian/PI
26% Black/AA
48% White

Percent of People Vaccinated with at Least One Dose by Ethnicity - North Carolina



17% LatinX

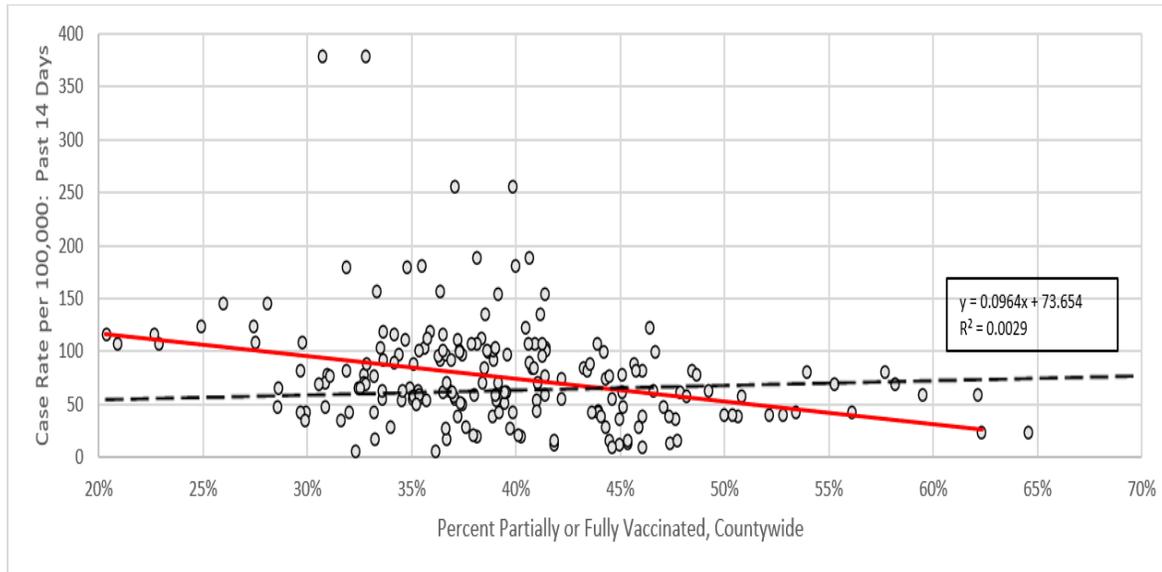
VACCINE EFFECTIVENESS: DATA FROM NORTH CAROLINA

• Almost all viral transmission is now in unvaccinated people

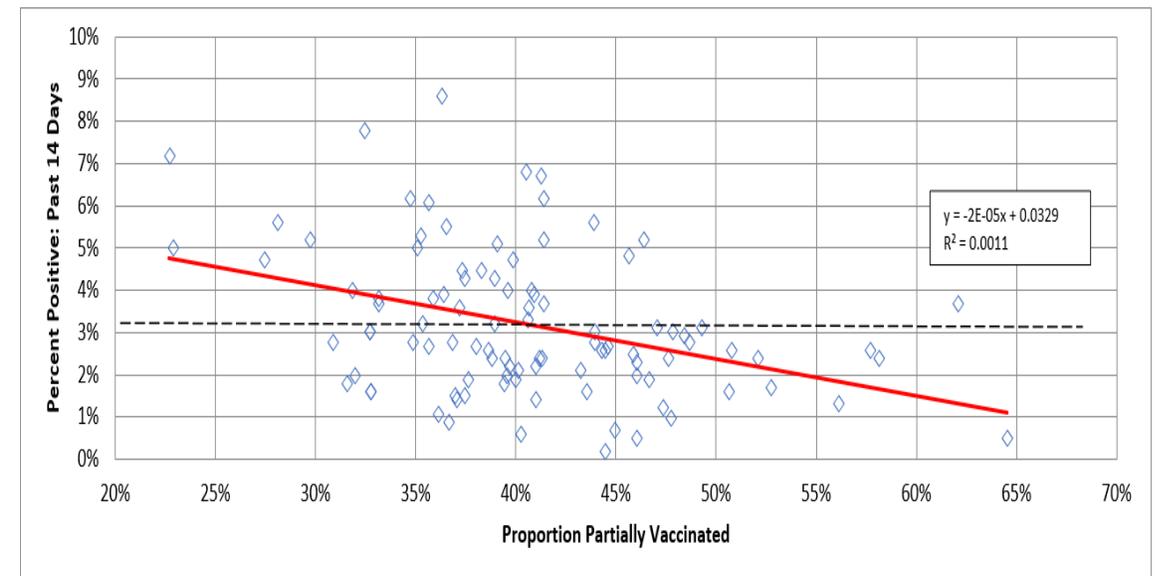
- From May 6–June 28, people who were not fully vaccinated accounted for † :
 - 99.2% of cases*
 - 98.7% of hospitalizations*
 - 98.9% of COVID deaths**

• 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 ‡



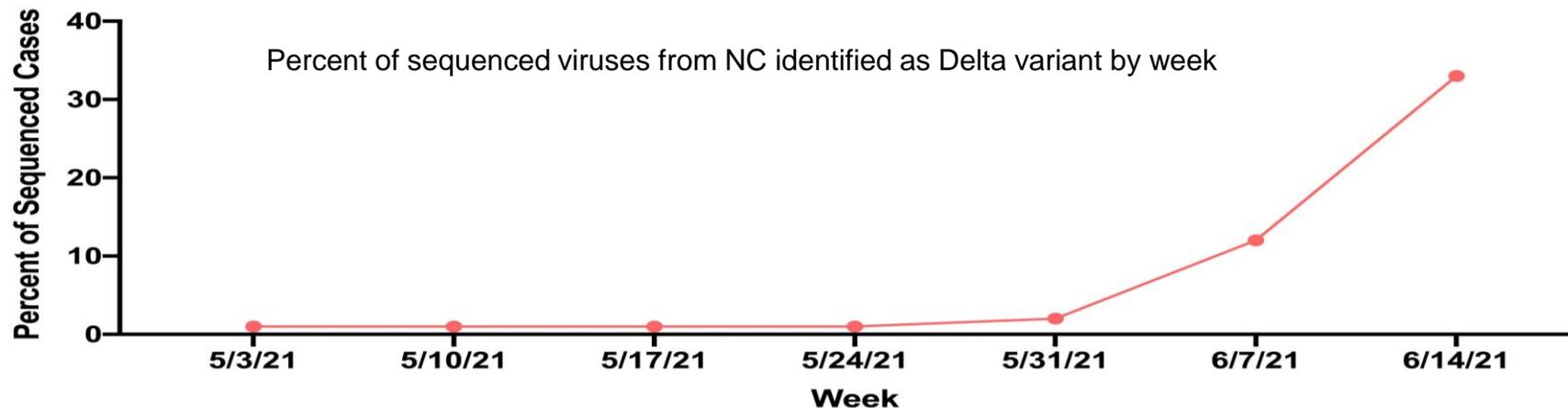
† Preliminary analysis based on vaccine data pulled from the COVID Vaccine Management System on 6/24 and case data pulled from database of reported COVID-19 cases on 6/28; Does not include vaccines given by the Department of Defense, Veteran's Administration, or Indian Health Service; Hospitalization 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

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

Transmission	<i>Increased</i>	Estimated 66% more transmissible than Alpha variant (which is more transmissible than previous variants)
Severity	<i>Possibly increased</i>	Early evidence suggests increased hospitalizations compared to Alpha variant (could change)
Vaccines	<i>Reduced</i>	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.



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



The data show that about

1 in 3,000

students who were in school buildings became infected with COVID-19 during school



WHO FUNDED THIS RESEARCH?

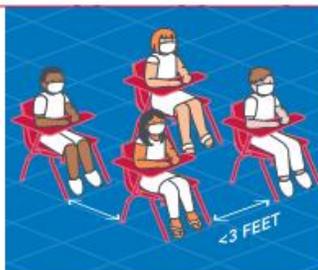
The state of North Carolina funded the ABC Science Collaborative to collect this data from schools after legislation mandated that all districts open for in-person education.

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.



K-12 Screening Testing

Ann Nichols MSN, RN, NCSN

CDC Recommends COVID-19 testing in K-12 Schools

We all want kids to learn in person and school staff to have a safe work environment. Screening is another tool to allow students and staff to safely and confidently continue in-person education

NC pilot schools indicated that **testing at school** helped their **staff and students to come back to school more quickly and confidently**



Evidence from national studies found that weekly testing of all students, teachers and staff can **reduce in-school infections by an estimated 50%**



Testing at school **increases access for students, families and staff** who may not be able to find a testing center or afford a test in their community



Source: [The Rockefeller Foundation](#)

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

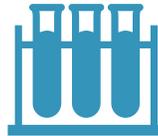


Program Support 2%

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 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
<ul style="list-style-type: none">• 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	<ul style="list-style-type: none">• 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• 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*

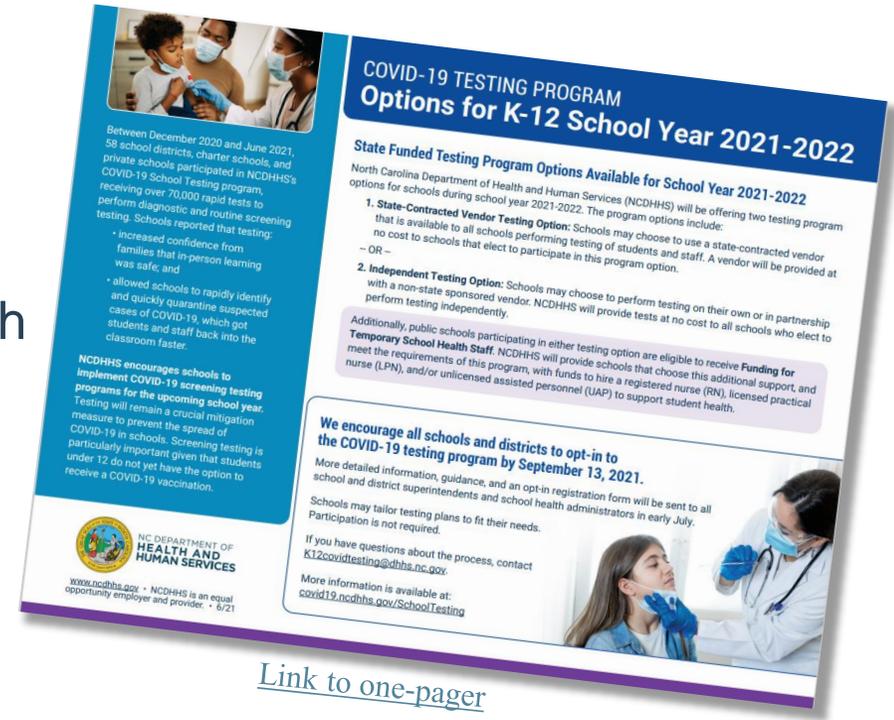
Allowable Uses for Staffing Funding

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](#)



COVID-19 TESTING PROGRAM Options for K-12 School Year 2021-2022

North Carolina Department of Health and Human Services (NCDHHS) will be offering two testing program options for schools during school year 2021-2022. The program options include:

- 1. State-Contracted Vendor Testing Option:** Schools may choose to use a state-contracted vendor that is available to all schools performing testing of students and staff. A vendor will be provided at no cost to schools that elect to participate in this program option.
– OR –
- 2. Independent Testing Option:** Schools may choose to perform testing on their own or in partnership with a non-state sponsored vendor. NCDHHS will provide tests at no cost to all schools who elect to perform testing independently.

Additionally, public schools participating in either testing option are eligible to receive **Funding for Temporary School Health Staff**. NCDHHS will provide schools that choose this additional support, and meet the requirements of this program, with funds to hire a registered nurse (RN), licensed practical nurse (LPN), and/or unlicensed assisted personnel (UAP) to support student health.

We encourage all schools and districts to opt-in to the COVID-19 testing program by September 13, 2021.

More detailed information, guidance, and an opt-in registration form will be sent to all school and district superintendents and school health administrators in early July. Participation is not required.

Schools may tailor testing plans to fit their needs.

If you have questions about the process, contact K12covidtesting@dhhs.nc.gov.

More information is available at: covid19.ncdhhs.gov/SchoolTesting

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES
www.ncdhhs.gov • NCDHHS is an equal opportunity employer and provider. • 6/21

[Link to one-pager](#)



Appendix

Testing Program Options

Option 1: State Contracted Testing Vendor

Eligibility Requirements:

- Open to all public and private schools for the 2021-22 school year
- Opt-in by September 13, 2021 to receive priority vendor support. Additional requests will be addressed as necessary*

NC DHHS	Vendor	School/District
<ul style="list-style-type: none">• Connect school/district with a contracted vendor	<ul style="list-style-type: none">• Perform testing, obtain results of the test and report tests to NC DHHS (at minimum)	<ul style="list-style-type: none">• Define your 2021-22 testing plan• Communicate with vendor• Provide guidance on quarantine through current school/district response plan• Additional logistics as needed

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

Testing Program Options

Option 2: Independent Testing Program

Eligibility Requirements:

- Open to all public and private schools for the 2021-22 school year
- Opt-in* by September 13, 2021 to notify NCDHHS of their intention to conduct an independent testing program. Additional needs will be handled as necessary

NC DHHS	School/District
<ul style="list-style-type: none">• Provide free tests to schools• Host office hours and eCATR PTR training sessions	<ul style="list-style-type: none">• Define 2021-22 testing plan• Obtain consent from students, parents and families• Perform the tests• Obtain results of tests• Report results of tests to NC DHHS• Communicate results of the tests• Provide guidance on quarantine

Schools may also decide against testing at their schools. We encourage schools who do not test their students, staff or families to provide their community with a list of locations that provide access to free COVID-19 testing.

* The opt-in form will be released in early July, along with additional guidance on how to set up an independent testing program