

# NC DHHS K-12 COVID-19 Response Updates

**DPI/NC DHHS Monthly Meeting**  
November 2, 2021



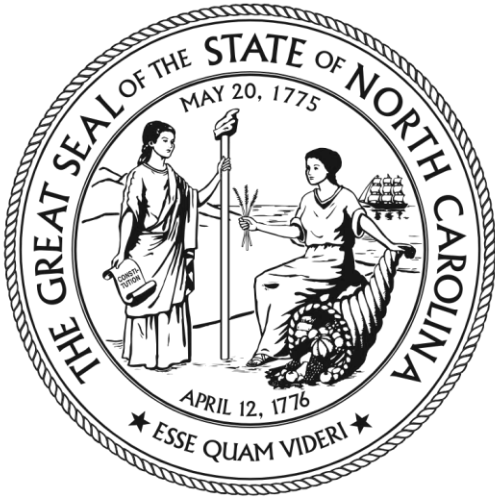
NC DEPARTMENT OF  
**HEALTH AND  
HUMAN SERVICES**



# Agenda

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- **Statewide COVID-19 Updates and Data Trends**
- **Vaccination Update**
- **K-12 Covid Testing Updates**
- **StrongSchoolsNC Toolkit Updates**



NC DEPARTMENT OF  
**HEALTH AND HUMAN SERVICES**

# Statewide COVID-19 Updates & Data Trends

Dr. Betsey Tilson

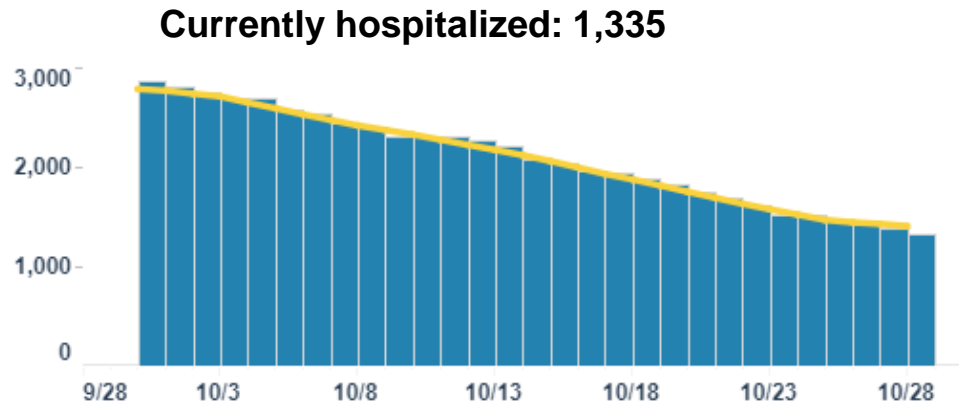
State Health Director & Chief Medical Officer  
NCDHHS

**NC DHHS- DPI Monthly Webinar**

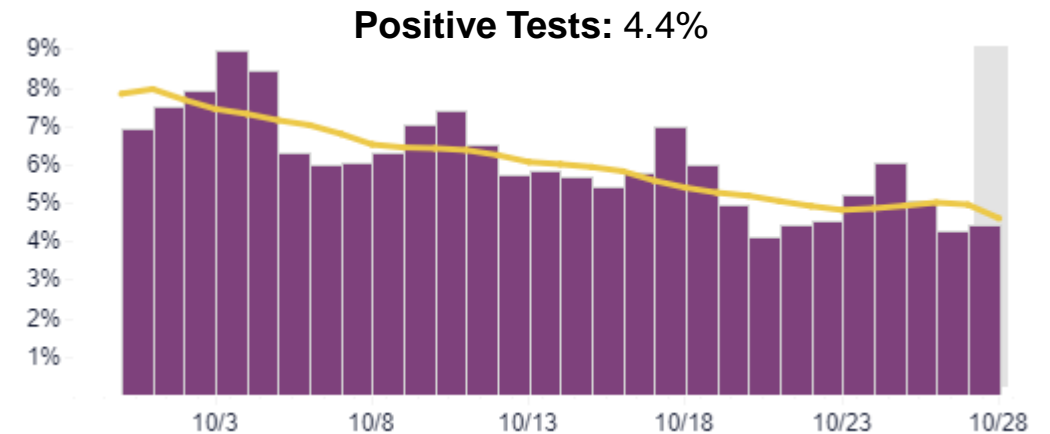
November 2, 2021

# Four Key Metrics- Decreasing

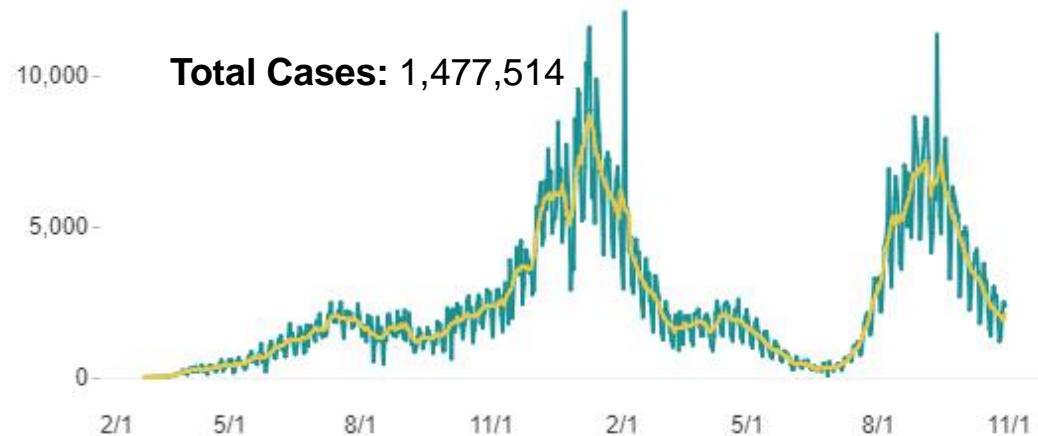
## Daily Number of People Currently Hospitalized



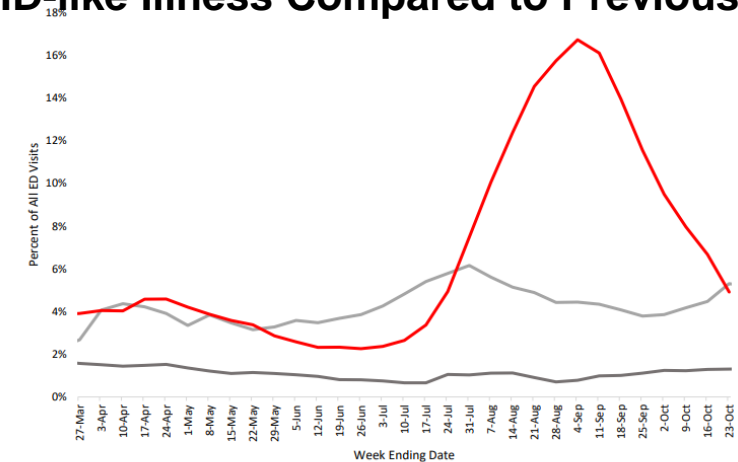
## Positive Tests as a Percent of Total Tests



## Daily Cases by Date Reported



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



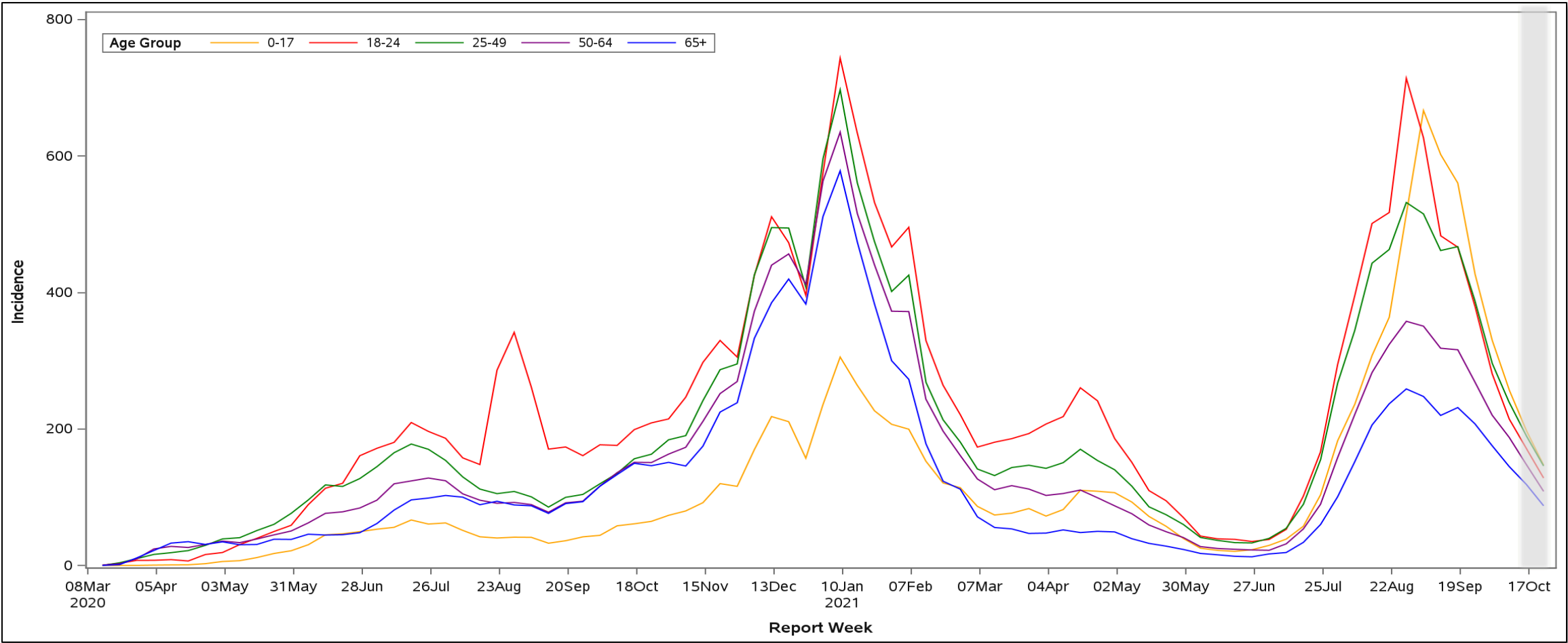
Source: NC DETECT  
Generated: 10/28/2021

— 2019-2020 — 2020-2021 — 2021-2022

# Case Rates Continue to Decline Across All Age Groups

Case rates across age groups have begun to converge;  
rates among the 0–17 and 25–49-year-old age groups remain the highest.

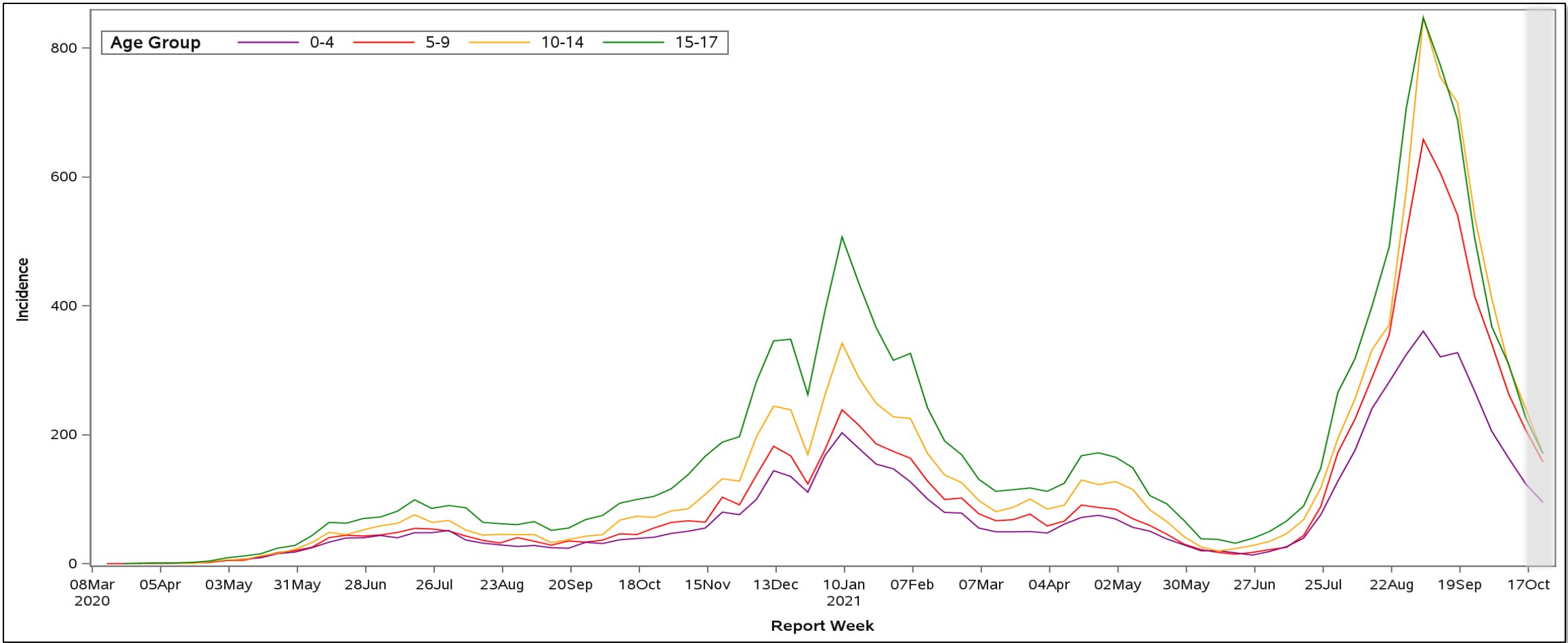
COVID Cases per 100K Population by Age Group



# Case Rates Continue to Decline Among Children

Case rates remain higher among school-aged group (as compared to 0–4-year-olds).

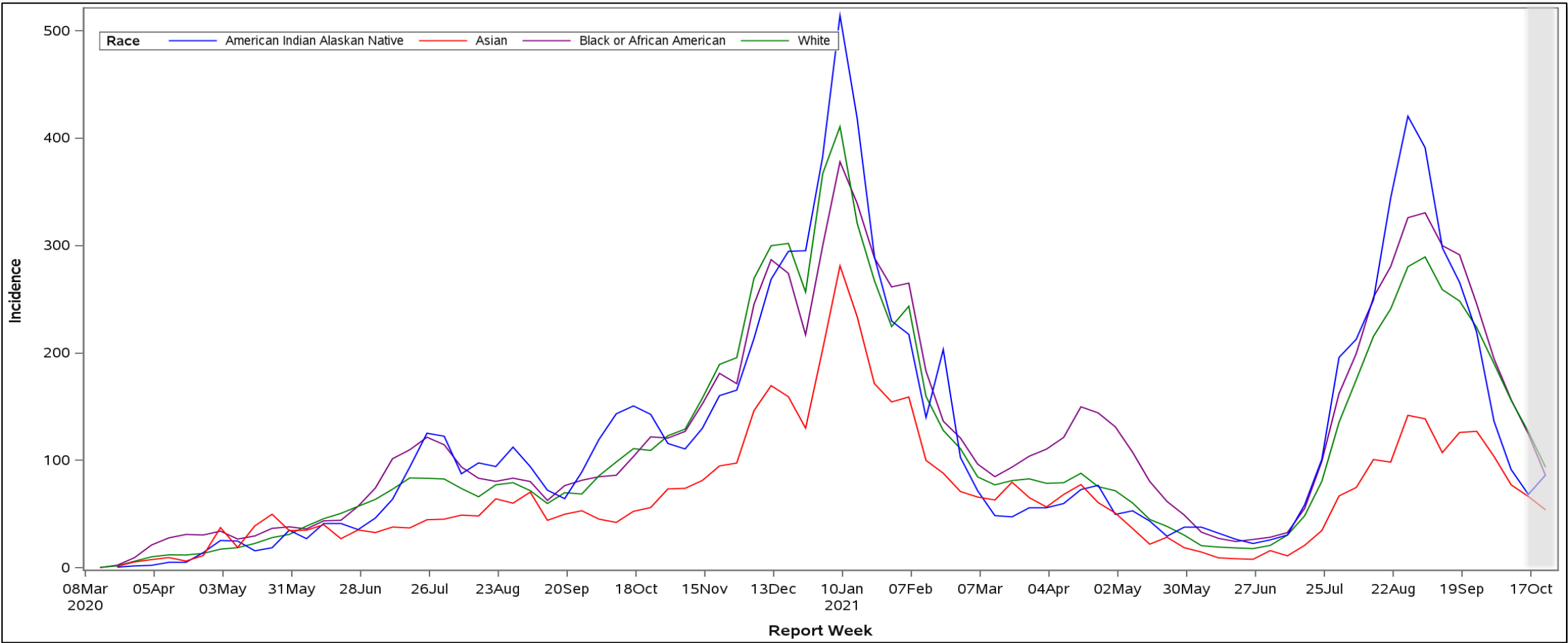
COVID Cases per 100K Population, by Child Age Group



# Racial disparities narrowing

Case rates converge between Black/African American and White populations.

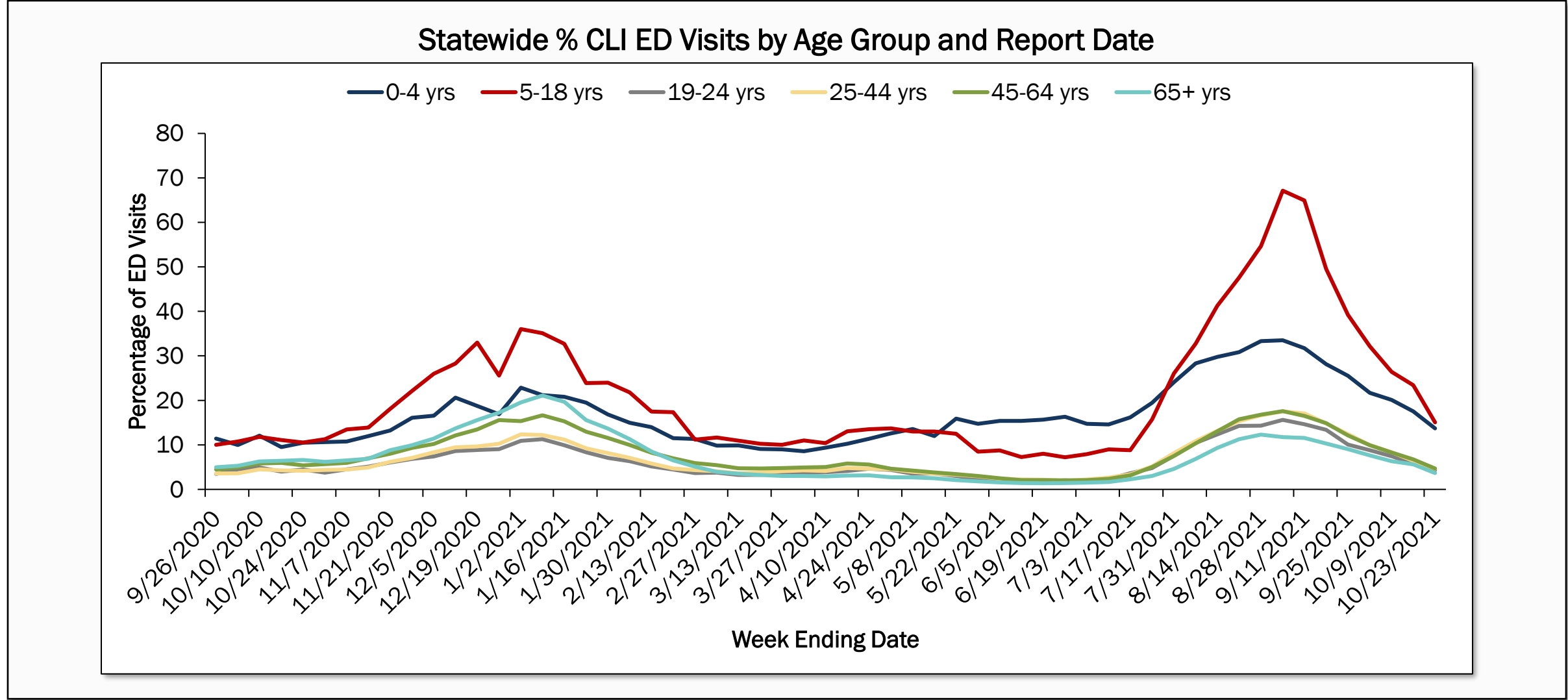
COVID Cases per 100K Population by Race





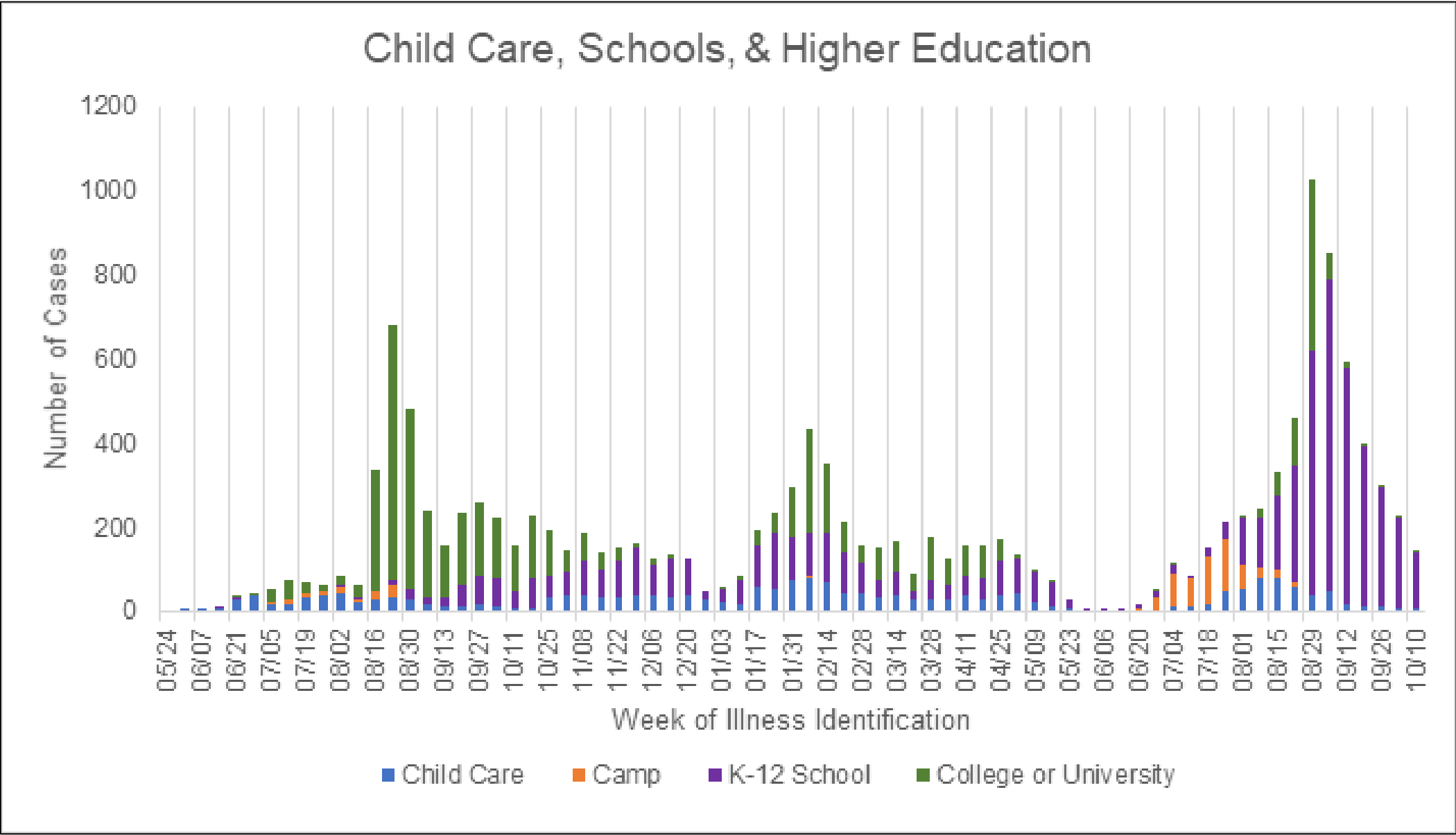
# CLI ED Visits Decline Across All Age Groups

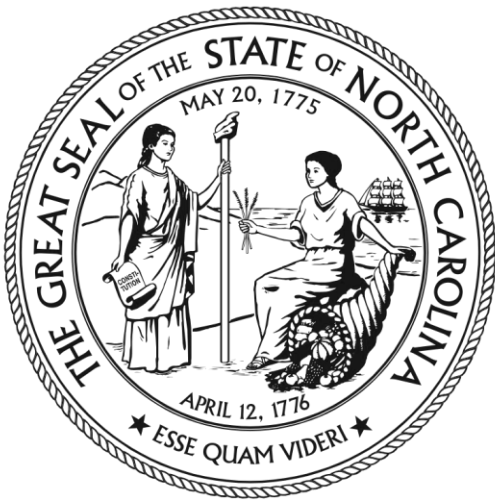
CLI ED visits are highest among children (0–18-year-olds).





# Decreasing Cases in Educational Clusters





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## **Vaccination Update**

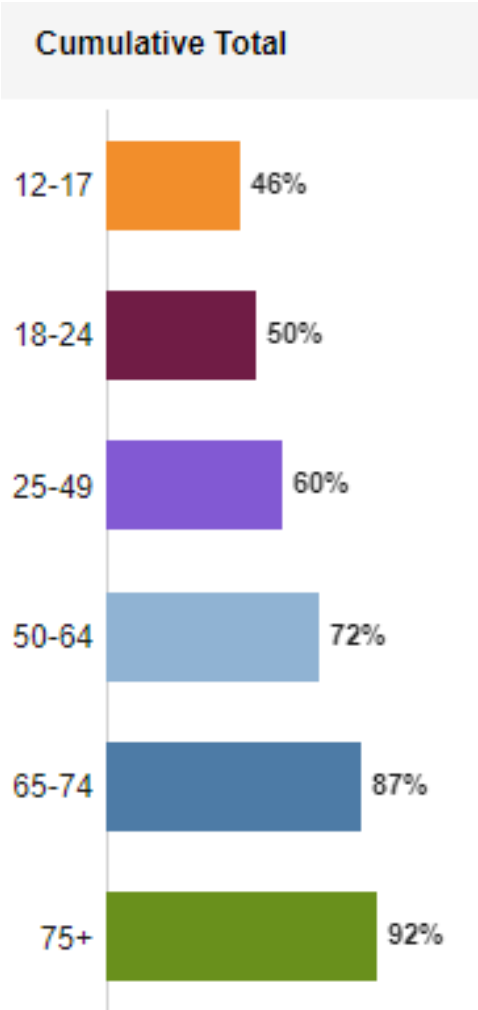
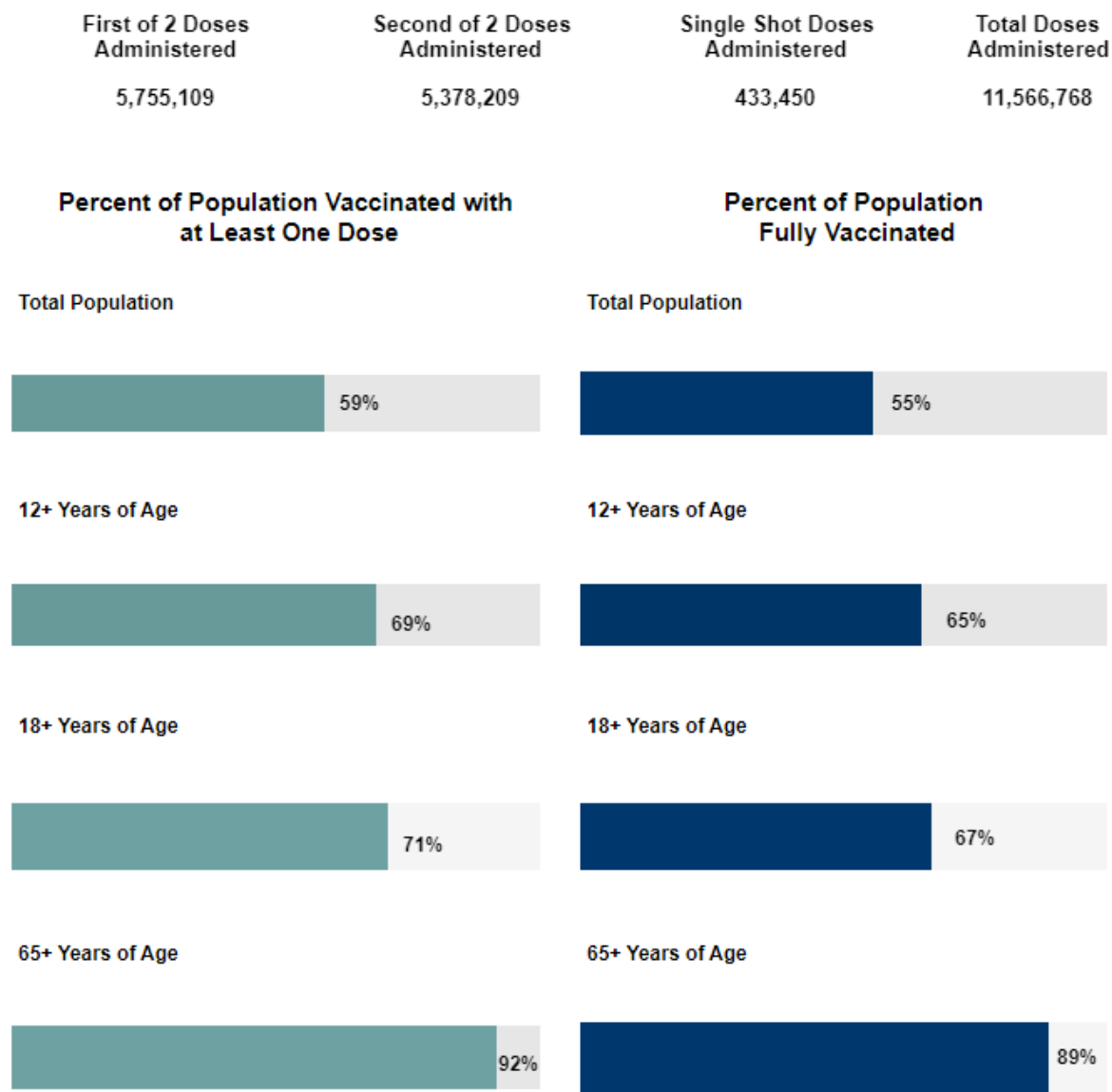
Dr. Betsey Tilson

State Health Director & Chief Medical Officer  
NCDHHS

**NC DHHS- DPI Monthly Webinar**

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# VACCINATION STATUS BY AGE IN NORTH CAROLINA



# VACCINE AUTHORIZATION STATUS



BOOSTERS



BOOSTERS\*



BOOSTERS



5-11

Which vaccine manufacturers have submitted their packets for review?



When will FDA meet to discuss the packets submitted?



9/17/21



10/14/21



10/15/21



10/26/21

FDA Emergency Use Authorization



9/22/21



10/21/21



10/21/21



10/29/21

ACIP/CDC Recommendation



9/24/21



10/21/21



10/21/21



11/2-11/3/21

# Boosters

## Can you get a **COVID-19 BOOSTER SHOT?**

### **If you received a Moderna or Pfizer vaccine:**

You are eligible for a booster if you received your second dose more than 6 months ago and if at least ONE of the following is true:

- You are 65 or older,
- You live or work in a nursing home or long-term care facility,
- You are 18 or older with underlying medical conditions; or,
- You are 18 or older and work in high-risk settings.

### **If you received a Johnson & Johnson vaccine:**

If you are 18 or older and vaccinated more than 2 months ago, you should get a booster.

### **You can receive any brand of COVID-19 vaccine for your booster shot.**

Speak with a doctor, nurse or your local pharmacy if you have any questions about what booster is right for you.

Go to [MySpot.nc.gov](https://www.myspot.nc.gov) to get information and find a location or call 1-888-675-4567.



YOU HAVE A  
**SPOT.** | TAKE YOUR  
**SHOT.**



**People can self-attest that they are in one of these groups.**

**Proof is not needed.**

# Parental confidence rising

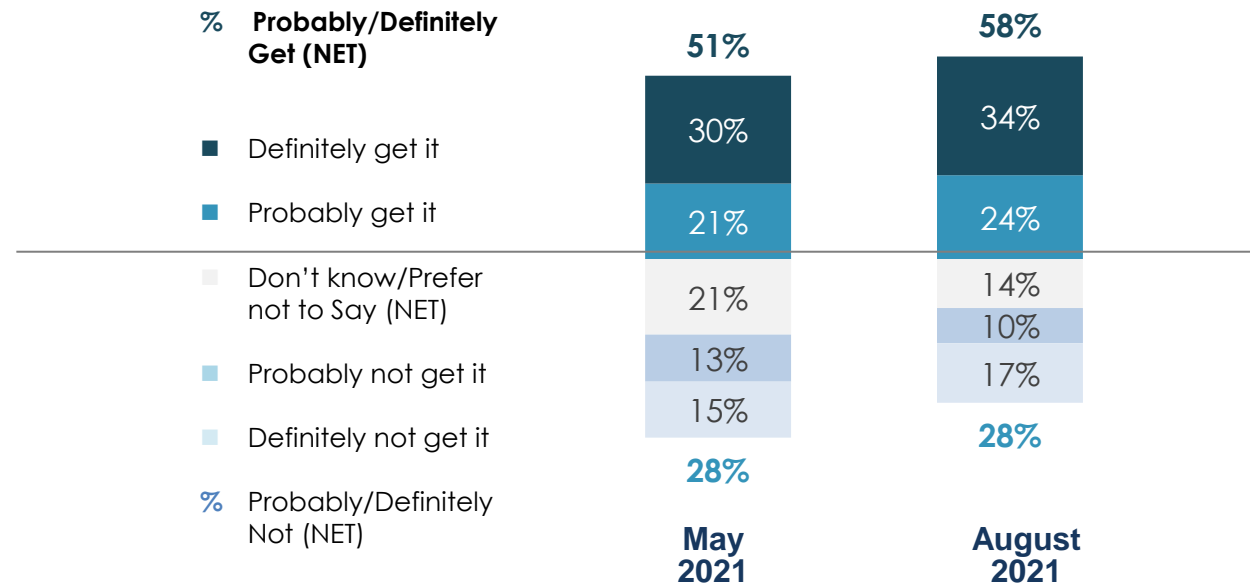
## Fifty-eight percent of parents of young children say they will definitely or probably get their child vaccinated

Parents who are vaccinated or have an appointment themselves are more likely to say they will **definitely have their child vaccinated**:

- **Child age 2-11**: definitely will have them get vaccinated *when eligible* (51% parent is vaccinated vs. 8% parent is NOT vaccinated)

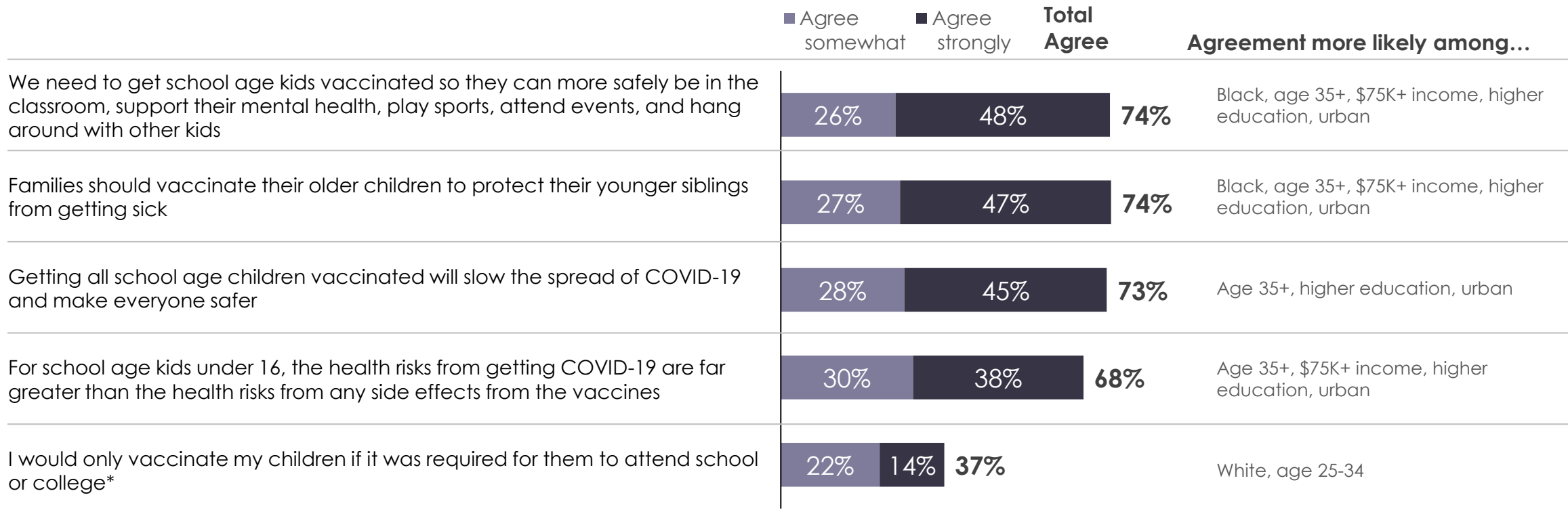
### Intent to Vaccinate for Child Age 2-11 When Eligible

Among parents whose oldest child is under 12  
(answering about the oldest child if more than one in range)



# Three-quarters of North Carolinians agree that getting school age kids vaccinated will get kids safely back to their normal activities, to protect their younger siblings, and make everyone safer by slowing the spread of COVID-19.

## Perceptions About Vaccinating Kids





# Pediatric Allocation and Access Overview

## Fast



- Mass Vaccination Sites
- Prioritizing providers who have history of higher pediatric vaccination rate

## Fair



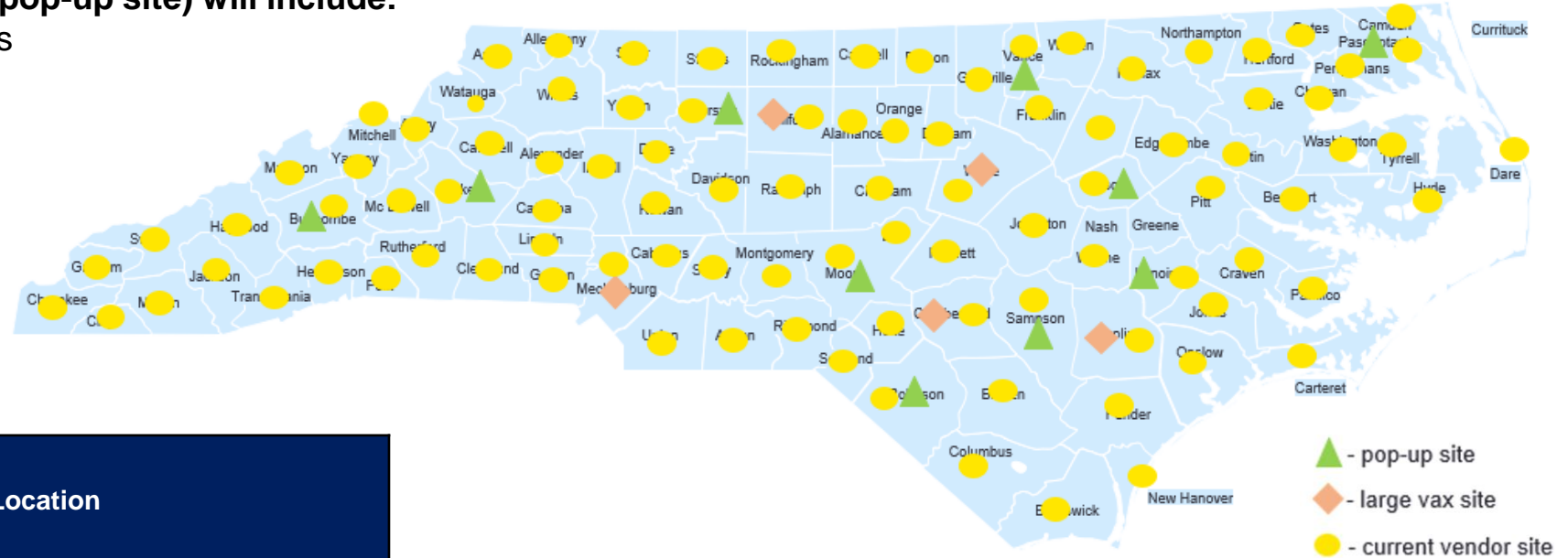
- Every county and every LHD has some vaccine
- Maxing out Family Community pop-up sites that have committed to and are located to serve high SVI populations
- Prioritizing providers who have history of equitable distribution (e.g., FQHCs)
- Matchmaking between providers and special populations

- There will be plenty of supply.
- In the first week alone, NC will have over 450k doses at more than 750 locations statewide. Enough for **over 50%** the 5-11 year old population
- 23% of state supplied doses will be available at child-healthcare providers.
- There will also be doses at pharmacies, community family pop-up events, and high throughput sites.
- Going to [myspot.nc.gov](https://myspot.nc.gov) is the best place to find your child's spot to take their shot.
- Some locations will be by-appointment and many will be available for walk-in.

# FAMILY COVID-19 VACCINATION CENTERS – LOCATIONS AND EXPECTATIONS

## All family COVID-19 vaccination sites (pop-up site) will include:

- Formulations for 5-11, and 12+/-boosters
- Weekend/evening hours
- Interpretation services
- Healthier Together/CBOs
- Partnership with local transit
- Community health workers
- Coordinated communications outreach
- Physical access support



Counties	Site Location
Buncombe	Arthur R. Edington Career and Education Ctr
Burke	St. Charles Borromeo Catholic Church
Forsyth	Saint Peter's Church and World Outreach
Lenoir	Grainger Stadium
Moore	Morganton Road Sports Complex
Pasquotank	Elizabeth City State University
Robeson	Lumbee Tribal Council, Boys and Girls Club
Sampson	Sampson Community College
Vance	Gang Free Inc.
Wilson	Total Impact Outreach Ministry

## Additional Equity Promoting Strategies

- **Pediatric Special Populations:** Focused on preparing for stakeholder education and match-making
- **Mobile Support:** Leveraging pediatric vaccination opportunities via mobile unit (Vecinos) in the far west.

*kids* HAVE A  
SPOT  
TO TAKE THEIR  
SHOT.


# KIDS 5 -11

On Thursday, October 21<sup>st</sup>, we launched a new page on the NCDHHS site dedicated to providing vaccine updates and information for kids 5-11. The page also gives visitors the option to sign-up to receive regular updates around events, new guidance and news around 5 -11 vaccine authorization. **It will be updated 11/4.**

[Home](#) [About COVID-19](#) [Vaccines](#) [Dashboard](#) [Information For](#) [Guidance](#) [Slow The Spread](#)

## COVID-19 Vaccines for Children Ages 5-11

[Version en Español](#)



Kids may soon have a spot to take their shot.

Children are vulnerable to the COVID-19 virus, just like everyone else, and some infected children are experiencing long-term side effects of COVID-19.

With the most recent surge, pediatric cases of COVID-19 rose by about 240 percent in the U.S., showing the need to protect children with a safe and effective vaccine. Getting school-age kids vaccinated will help them to be safe in the classroom, play sports, attend events, be with friends and support their mental health.

Independent Advisory Committees to the U.S. Food and Drug Administration (FDA) and the Centers for Disease Control (CDC) will meet to review the Pfizer BioNTech COVID-19 vaccine for children ages 5-11. As with all other routine vaccinations for children, the Pfizer COVID-19 vaccine is undergoing a thorough testing and review process to ensure it is safe and effective for children.

Clinical trial participants in the 5-11 age group were given two doses 21 days apart and received a smaller dose than what is now used for people ages 12 and older. **It is important to know that the dose for 5-11-year-olds is different and children in this age group should NOT receive the 12+ dose.**

### Vaccines

- [COVID-19 Vaccine Information](#)
- [En Español](#)
- [Find a Vaccine Provider](#)
- [COVID-19 Vaccine Boosters](#)
- [Your Vaccine Record](#)
- [Frequently Asked Questions](#)
- [Info For Health Care Providers](#)
- [Communications Toolkit](#)

Here's what's next for COVID-19 vaccines for kids 5-11:

- Oct. 26, 2021 - The FDA is reviewing the safety and effectiveness data on vaccines for children ages 5-11. Using scientific evidence, they will make a recommendation about Pfizer's application for an Emergency Use Authorization.
- Nov. 3, 2021 - The Advisory Committee on Immunization Practices (ACIP) will do another independent and thorough review of the safety and effectiveness data. They will then make a recommendation to the CDC on the use of COVID-19 vaccines in younger children. The FDA must issue an Emergency Use Authorization and the ACIP must issue guidance before any vaccines are given in the state.
- Nov. 5, 2021 - This is the earliest date the state of North Carolina would begin to administer the COVID-19 vaccines with the appropriate dosage for children.

DHHS will not make any recommendations on child vaccination until this process is completed.

Stay in the know and receive additional information on the COVID-19 vaccine for kids.

Your Email Address

☐ I'm also interested in flyers and posters to share with my community.

Sign Up

Your information is not shared or sold. [Privacy Policy](#)

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# PEDIATRIC VACCINATION PLANNING SURVEY

As part of the state's planning efforts, we are surveying school leaders to evaluate their interest and capacity to educate and support parents and students who might want a vaccine.

## Next Steps:

1. Take the survey and consider what it will take to support vaccine program in your particular school or area (e.g., providing vaccine information, communicating pop-up/max vaccine locations in your community, partnering with a vaccine provider, hosting pop-up vaccine days/evenings/weekends in schools, etc.)
2. NC DHHS will provide you with a complete list of pediatric vaccine providers who will have access to pediatric vaccine.
3. NC DHHS will be analyzing survey results to identify matchmaking and additional opportunities as well as pediatric vaccination gaps across the state to further inform planning.

**Responses Due Friday (11/5)**



## NC DHHS School K-12 Survey for Promoting Pediatric Vaccines

Thank you for your work on behalf of the children and families of North Carolina!

Pending review of safety and efficacy data and action by the FDA and CDC, vaccination for children 5-11 years may start shortly after November 3rd.

To prepare, we are seeking insights from our education partners and local education leaders to plan ahead. In order to better understand schools' interest in supporting vaccinations - including possibly hosting vaccination events for their students and/or staff, providing information about vaccines to their communities, and sharing what their needs are for vaccination - NC DHHS has created the following survey.

Please complete the survey below by Friday, November 5th at 5PM to best inform our team of our schools' interest in the following K12 COVID-19 vaccination needs. Please ensure that there is only one response to this survey per LEA, charter school or private school.

Note that your answers in this survey are not binding, but rather that they are providing our team with insights for planning purposes.

\* Required

1. Which best describes you? \*

- ☐ LEA
- ☐ Charter School
- ☐ Private School




2. What is your school/school district size? \*

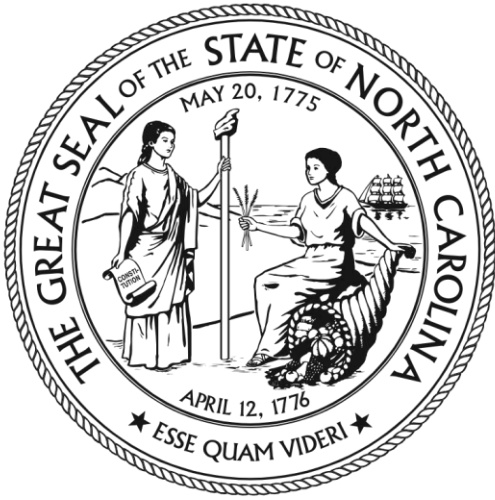
- ☐ 0-1,000 students
- ☐ 1,000-5,000 students
- ☐ 5,000-10,000 students
- ☐ 10,000-50,000 students
- ☐ 50,000+ students

3. What is your school/school district's region? \*

- ☐ Northeast
- ☐ North Central
- ☐ Northwest
- ☐ Sandhills
- ☐ Piedmont Triad
- ☐ Southeast
- ☐ Southwest
- ☐ Western

# STATUS OF COVID-19 VACCINE AUTHORIZATION IN US: 10/28/2021

	Adults 18 +	Pediatrics				Additional <i>(Immunocompromised)</i>	Booster
		16-17	12-15	5-11	6 months - 5 years		
	Approval (August)	Approval (August)	EUA (May)	EUA (October)	Waiting for Submission	EUA (August)	EUA (September)
	EUA (Dec) Approval Under Review (June)	Under FDA Review (June)	Under FDA Review (June)	Waiting for Submission	Waiting for Submission	EUA (August)	EUA (October)  50 ug
	EUA (Feb)	Trials	Trials	Trials	Trials	N/A	EUA (October)



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## **K-12 COVID-19 Testing Updates**

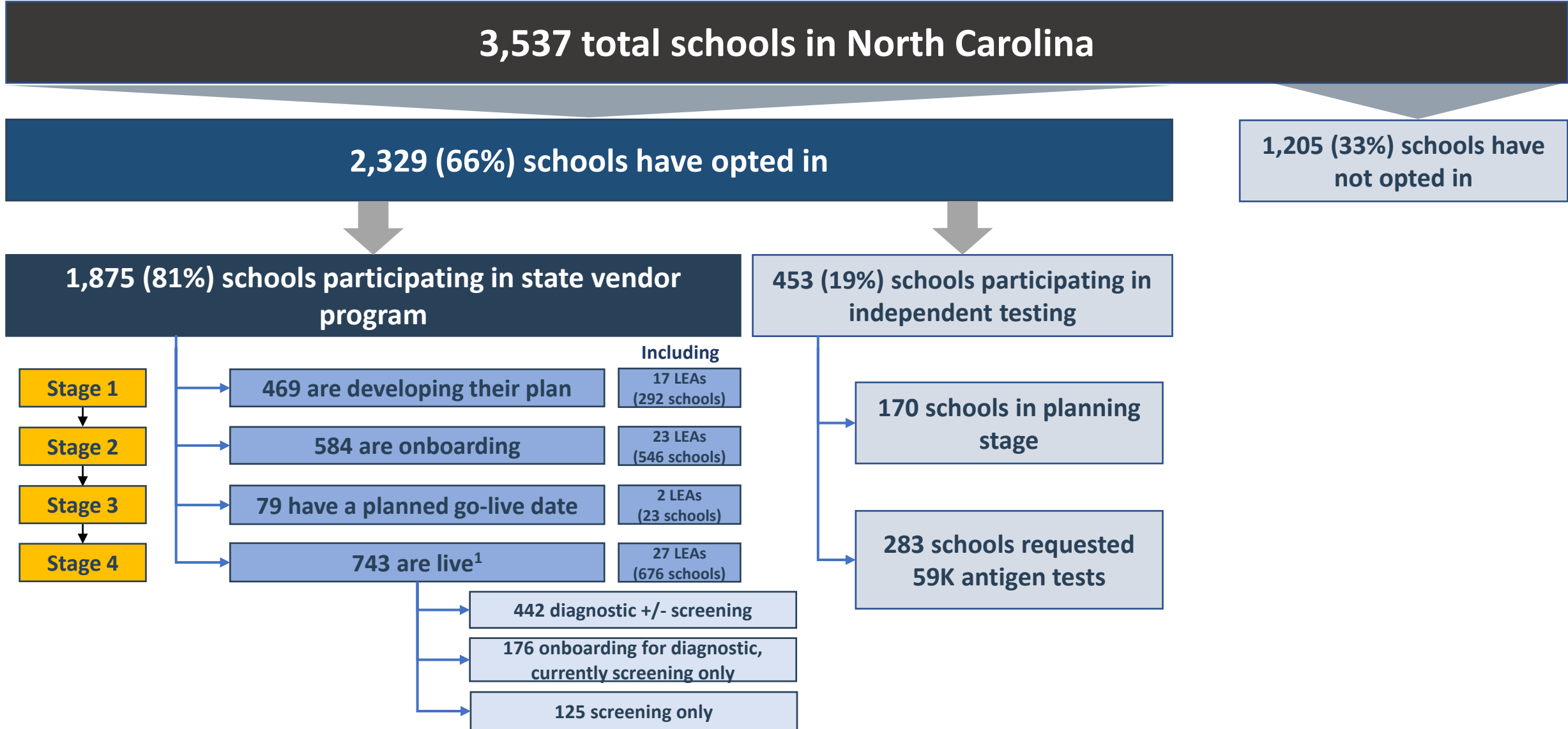
Deborah Porterfield, MD, MPH  
K12 Workstream Lead

**NC DHHS- DPI Monthly Webinar**

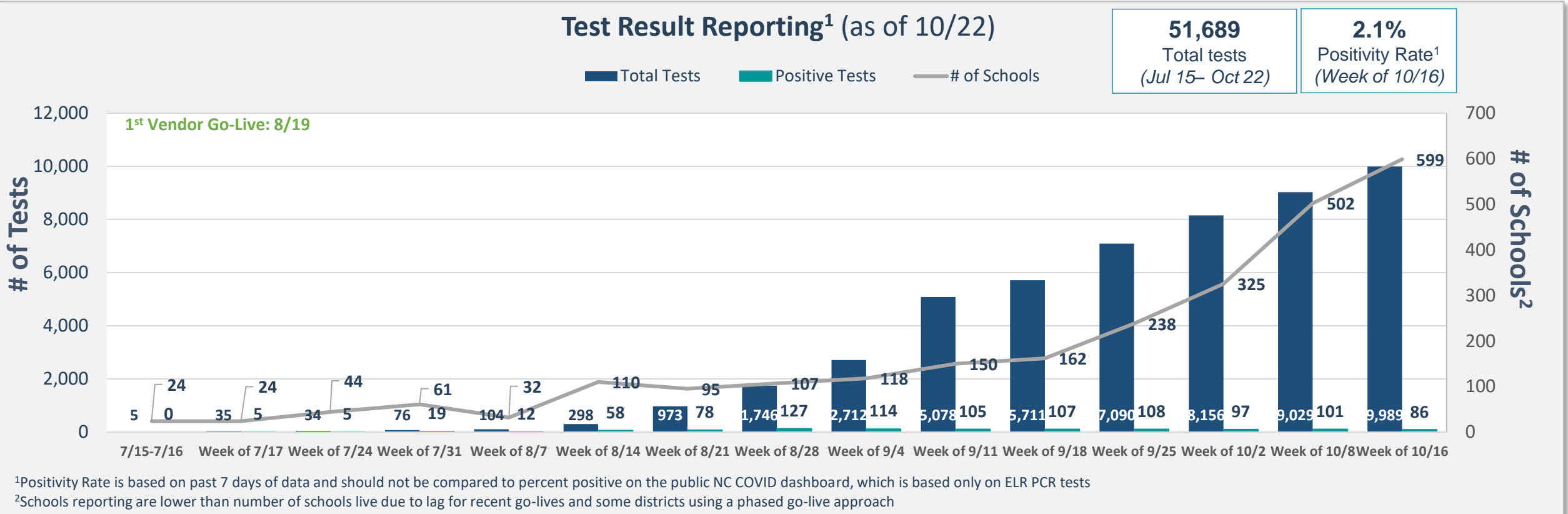
November 2, 2021



# Schools Are Going Live in the Program



# Testing Numbers are Rising Rapidly



## Key Reporting Statistics for Vendor Program

- 21% (161 of 743 schools who have gone live) are performing tests on an as-needed basis (i.e., diagnostic testing), reporting only symptomatic and close-contact cases among students and staff. These schools will report fewer tests than those doing routine screening
- 38% (281 schools of 743 schools who have gone live) are performing both diagnostic and screening testing
- 41% (301 schools of 743 schools who have gone live) are only performing weekly screening testing
  - While 176 plan to implement diagnostic, we continue to follow up with the remaining 125 to encourage them to implement diagnostic testing

## BOTH SCREENING AND DIAGNOSTIC TESTING ARE IMPORTANT

	Screening	Diagnostic
<b>Populations in Scope</b>	<ul style="list-style-type: none"> <li>• Students</li> <li>• Staff</li> <li>• Teachers</li> <li>• Athletics and Special Populations</li> </ul>	<ul style="list-style-type: none"> <li>• Students</li> <li>• Staff</li> <li>• Teachers</li> <li>• Athletics and Special Populations</li> </ul>
<b>Frequency</b>	<p>Students and Teachers: 1x week</p> <p>Athletics and other special pops: 1x week*</p>	As needed with presentation of symptoms or known exposure (i.e. close contact)
<b>Modality</b>	Pooled PCR testing with Abbott BinaxNOW as the reflex test**	<p>Lab-run PCR</p> <p>Abbott BinaxNOW Antigen tests <i>for schools with CLIA waiver and full-time RN oversight</i></p>

*Benefits of Routine screening:* it is a proactive approach to identify asymptomatic cases; it minimizes disruption, and it can be scheduled.

Routine screening, with *supplemental* diagnostic testing, helps **get ahead of transmission** and **be responsive** to daily needs.

**Providing diagnostic tests in-school is a key part of any plan because it helps keep students in school through quick testing results.**

\*Frequency will vary based on current CDC guidance and the level of community spread. As a baseline, NC DHHS recommends the following, though this can be adjusted over time

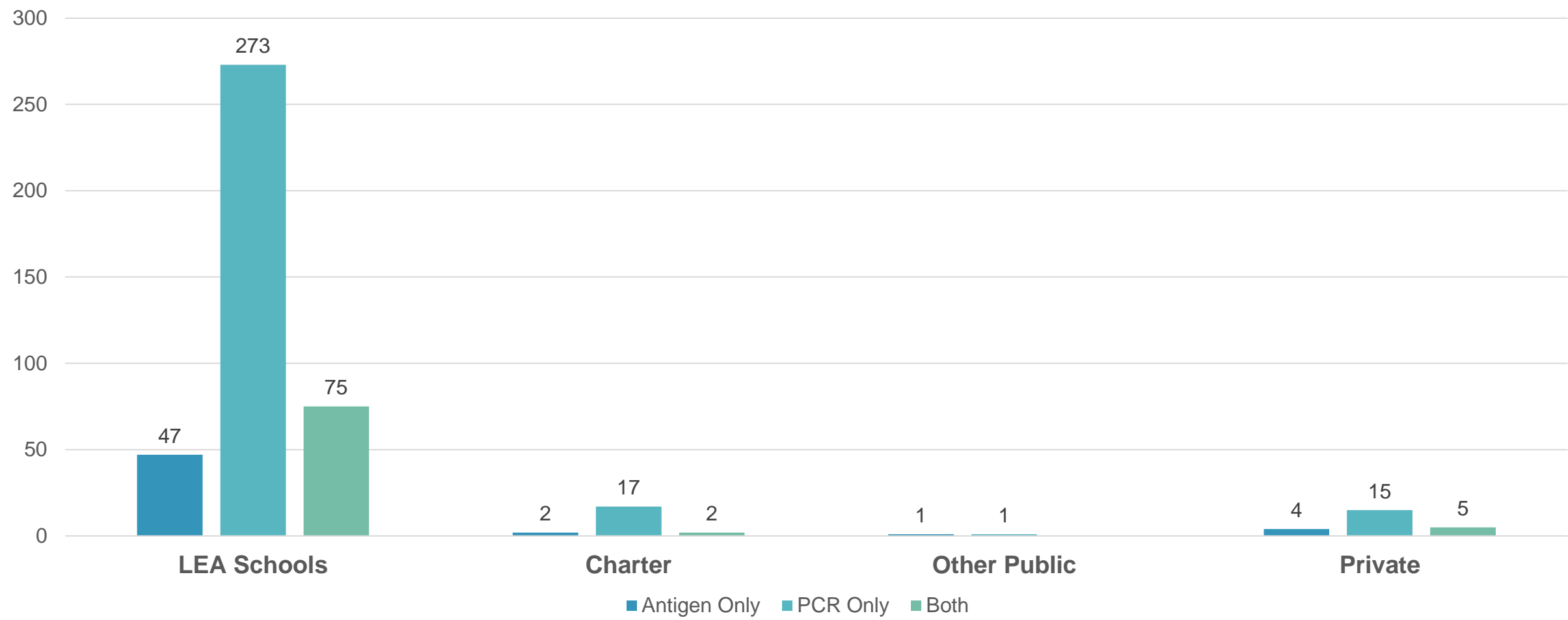
\*\*Modality will be based on size of population being tested per school per day



**Both types of testing are important and require parental/guardian consent.**

# MOST DIAGNOSTIC TESTING IS USING PCR

Among 743 schools who are live performing testing with the vendor, 442 (59%) are performing diagnostic testing. Of the schools doing diagnostic testing, 31% are doing antigen or both antigen and PCR.



# Links to Key Resources

Check back often as files are regularly updated (links stay the same):

<https://covid19.ncdhhs.gov/guidance#schools>

For a summary of all key K12 updates, please see the link below:

<https://covid19.ncdhhs.gov/k-12-public-health-guidance-key-updates/download>

- [Strong Schools NC K-12 Public Health Toolkit](#)
- [NCDHHS Find My Testing Site](#) (for PCR testing)
- [CDC Guidance for Expanded Screening Testing](#)
- [StrongSchoolsNC FAQ](#)
- [Reference Guide for Suspected, Presumptive, or Confirmed Cases of COVID-19 \(K-12\)](#)
- [K12 Communications Toolkit](#)
- [Abbott BinaxNOW training modules](#)
- K12 Office Hours 11/12, 9:30-10:30am

**Questions? Email** [K12COVIDTesting@dhhs.nc.gov](mailto:K12COVIDTesting@dhhs.nc.gov)

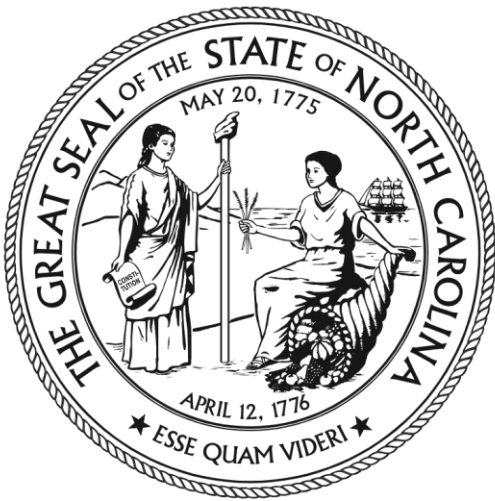
# New Resources from CDC, the White House and Rockefeller Foundation

- CDC webpage on Reopening Schools program
  - Links to Rockefeller resources, CDC guidance
  - Brief descriptions of the program in each state

<https://www.cdc.gov/ncezid/dpei/elc/covid-response/index.html>
- NEW learning network to further support school and district leaders who want to start or strengthen their school-based testing program
  - First session is today, November 2<sup>nd</sup> or tomorrow, November 3<sup>rd</sup>

<https://www.rockefellerfoundation.org/learning-network-for-school-and-district-leaders-on-covid-19-testing/>

Session 1, 11/2-11/3: Starting or growing your testing program and staffing  
Session 2, 11/9-11/10: Designing your testing program in the context of vaccination  
Session 3, 11/16-11/17: Increasing parental buy-in and communications for testing  
Session 4, 11/23-11/24: Contract tracing, data management and reporting  
Session 5, 11/30-12/1: Running a dual program: School-located vaccination and testing  
Session 6, 12/7-12/8: Test to stay and close contact testing  
Session 7, 12/14-12/15: Procurement  
Session 8, 12/21-12/22: Summary on lessons learned and best practices shared during the series



NC DEPARTMENT OF  
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## **StrongSchoolsNC Toolkit**

Karen Wade  
Senior Policy Advisor  
NCDHHS

**NC DHHS- DPI Monthly Webinar**

November 2, 2021



# NEW INFORMATION ON FACE COVERING

## When should schools consider lifting their universal indoor mask requirements?

Given that our student population is largely not yet vaccinated, face coverings remain a critical tool for protecting children and keeping them safely in the classroom. NCDHHS recommends schools continue to implement a universal face covering requirement if they are located in a county with **high** or **substantial** community transmission level. When community transmission levels decline to **moderate** or **low** levels for at least 7 consecutive days, school leaders can consider making face coverings optional for vaccinated individuals. Face coverings should continue to be required for all unvaccinated individuals until community transmission is at **low** levels, when mask could be optional for everyone. NCDHHS will continue to re-evaluate this guidance as all school-aged children become eligible for and get vaccinated. The [StrongSchools Toolkit Frequently Asked Questions](#) has been updated to reflect this guidance



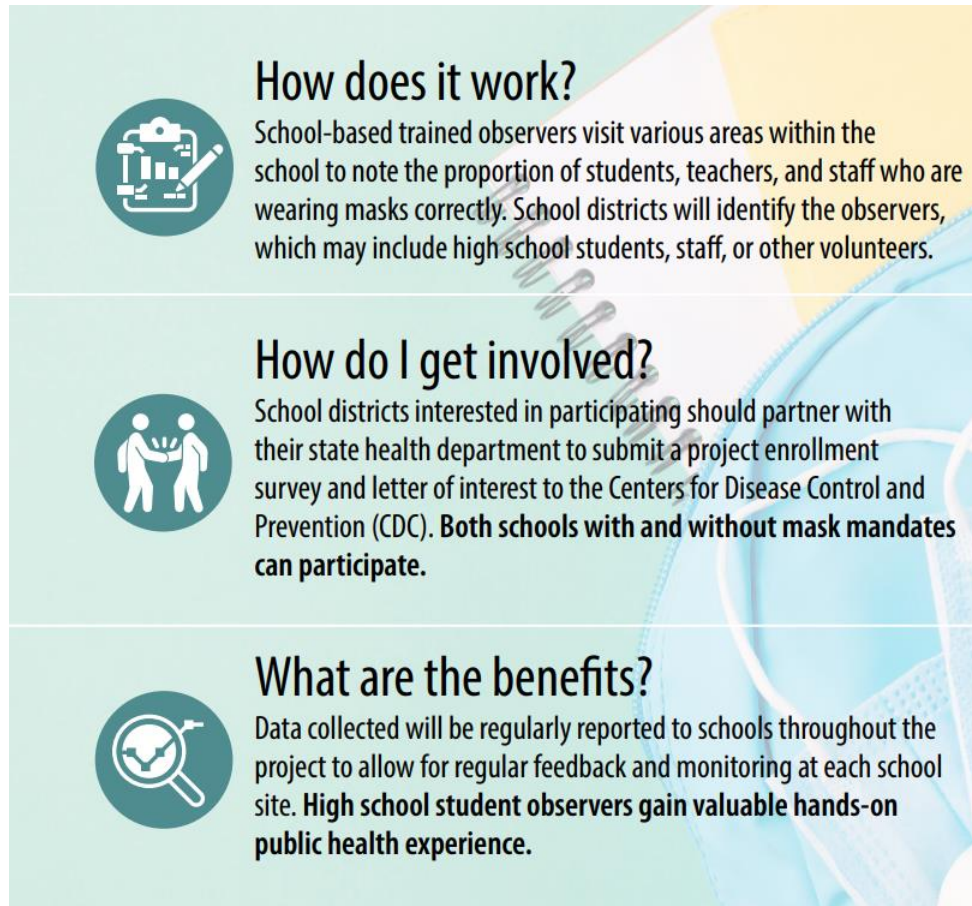
### StrongSchoolsNC Public Health Toolkit (K-12) Frequently Asked Questions

LAST UPDATED OCTOBER 25, 2021

General	2
Cloth Face Coverings and Personal Protective Equipment (PPE)	3
Specials and Extracurricular Activities (e.g., Athletics, Gym, Music, Band, Art)	3
Keeping Schools Clean	4
Reducing Exposure	4
COVID-19 Testing and Positive Cases	6
Contact Information	7

# CDC MASK-12 PROJECT

- CDC mask observation project to measure the proportion of students, teachers, and staff wearing masks, and wearing them correctly, in schools



The infographic is divided into three horizontal sections, each with a circular icon on the left and text on the right. The background features a faint image of a spiral notebook and a blue surgical mask.

- How does it work?**  
Icon: A clipboard with a checklist and a pencil.  
Text: School-based trained observers visit various areas within the school to note the proportion of students, teachers, and staff who are wearing masks correctly. School districts will identify the observers, which may include high school students, staff, or other volunteers.
- How do I get involved?**  
Icon: Two stylized human figures, one with arms raised.  
Text: School districts interested in participating should partner with their state health department to submit a project enrollment survey and letter of interest to the Centers for Disease Control and Prevention (CDC). **Both schools with and without mask mandates can participate.**
- What are the benefits?**  
Icon: A magnifying glass over a globe.  
Text: Data collected will be regularly reported to schools throughout the project to allow for regular feedback and monitoring at each school site. **High school student observers gain valuable hands-on public health experience.**

- No personal identifiable data will be collected for this project.
  - The public will not have access to the data.
  - Findings will be disseminated to the participating district/school and community members and will be published in a CDC report and/or peer reviewed scientific publication.
- Please reach out to [eocevent335@cdc.gov](mailto:eocevent335@cdc.gov) if you are interested in participating

