## Snapshot of Metrics

<table>
<thead>
<tr>
<th>Child Care and K-12 School Settings</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Cases</td>
<td>1,580</td>
<td>3</td>
</tr>
<tr>
<td>Deaths</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Child Care</td>
<td></td>
<td></td>
</tr>
<tr>
<td>K-12 School</td>
<td>2,466</td>
<td>0</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Child Care and K-12 School Clusters</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Child Care</td>
<td>4</td>
</tr>
<tr>
<td>K-12 School</td>
<td>15</td>
</tr>
</tbody>
</table>

With prevention measures in place, increasing evidence suggests low rates of COVID-19 transmission in primary and secondary school settings even with high rates of community transmission.

- There is little evidence that schools have contributed to increase rates of community transmission; countries that have reopened their schools did not see large rises in infection at a population level.
- Overall, studies in the US and internationally have demonstrated limited disease transmission from child-to-child and very limited to no transmission from child-to-adult in the in-person school setting.
- North Carolina’s ABC collaborative found rates of secondary transmission during in-person school instruction significantly less than the surrounding communities and no cases of student-to-staff transmission.
## Current Guidance for Schools: StrongSchools Toolkit

<table>
<thead>
<tr>
<th>Requirements</th>
<th>Plan A</th>
<th>Plan B</th>
</tr>
</thead>
</table>
| **In-Person Instruction Available in Both Plan A and B**  
Provided 5-days/week to the fullest extent possible while still meeting StrongSchoolsNC public health protocols | ✔️ | ✔️ |
| **Physical Distancing Protocols to Minimize Exposure**  
Keeping physical space between and among children and especially among adults | ✔️ | ✔️ |
| **Six Feet Physical Distancing Protocols**  
Maintaining six feet of physical distance between people especially when stationary or congregating for increased layer of protection | ✔️ | ✔️ |
| **Cloth Face Coverings**  
Consistent use of face coverings for all students, staff and visitors | ✗️ | ✔️ |
| **Protecting Vulnerable Populations**  
People with certain conditions are at higher-risk than others to become severely ill if exposed to COVID-19 | ✔️ | ✔️ |
| **Coping and Resilience**  
Schools can play an important role in helping students and staff cope with fear and anxiety caused by the effects of the pandemic | ✔️ | ✔️ |
| **Cleaning and Hygiene**  
Washing hands with soap for 20 seconds or using hand sanitizer reduces the spread of disease | ✔️ | ✔️ |
| **Monitoring for Symptoms**  
Ongoing self-monitoring for symptoms such as fever, cough or shortness of breath can help reduce exposure | ✔️ | ✔️ |
| **Handling Suspected, Presumptive or Confirmed Cases of COVID-19**  
Taking appropriate steps to address suspected, presumptive or confirmed cases of COVID-19 is critical to containing spread of COVID-19 both in and outside of school | ✔️ | ✔️ |
| **Communication and Combating Misinformation**  
Staff, students and families need ongoing, reliable information to promote behaviors that prevent the spread of COVID-19 | ✔️ | ✔️ |
| **Transportation**  
School buses/vehicles must take similar key steps to protect against the spread of COVID-19 including adhering to consistent use of face coverings, addressing physical distancing and following cleaning and hygiene protocols | ✔️ | ✔️ |

---

**Remote Learning Option Available**

Schools must create a process for students and/or their families, teachers, and staff to self-identify as high-risk from COVID-19 and have a plan in place to address requests for alternative learning arrangements or work re-assignments.
TESTING
K-12 Testing for the 2021-2022 School year

NC DHHS received federal funds to support screening testing for public and private K-12 schools during the 2021-22 school year.

What can you use these funds for? There are 3 options:

1. Priority vendor support through state contracted testing vendor
2. Independent testing program, providing free tests to schools
3. Funding for public schools (LEAs and charters) to hire temporary school health staff
Call to Action: 4 things to do now to prepare for 2021-22 SY

1. Become familiar with testing types and options in order to make informed decisions on testing programs: https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/operation-strategy.html

2. When opt-in form is released, stakeholders should be ready to reach out to school/district leadership with related resources and input on testing program decisions and options.

3. Learn about team nursing and the role of the RN School Nurse Team Leader if hiring school health staff to support a testing program. Training is available here: https://sites.google.com/view/nchealthyschools-training/home

4. Stay informed by attending available Office Hours and reading email briefings during summer breaks.
VACCINATION
NCDHHS has provided/can provide matchmaking with LEAs/Schools and LHDs without a partner.

School-based vaccine events across the state in both private (e.g., Providence Day – 230 vaccinations in one day) and public schools (e.g., Rutherford 150 vaccinations in one evening clinic and Guilford County Schools has partnered with FEMA vaccination site, Cone Health and the Guilford County Division of Public Health to bring COVID-19 vaccines into communities across Guilford County).
Additional New Initiatives to Promote Vaccinations

• Summer Cash 4 College:
  − 12-18 year old are entered into a drawing to win $125,000 for post-secondary education. These funds can be used at any institution.

• Upcoming Back to School Guidance
  − Toolkit for school administrators on models to promote vaccinations and accompanying communication materials. Examples of incentive ideas and aligning vaccinations with other activity such as sports physicals.
  − Updated toolkit of public health guidance.