New Hampshire 
Coronavirus Disease 2019 
Weekly Call for Education and 
Childcare Partners 

January 27, 2021

Ben Chan
Elizabeth Talbot
Beth Daly
Lindsay Pierce

Q&A Session: To ask a question use the Q&A feature in Zoom
• Hover over bottom of Zoom screen to find “Q&A”
• This is a public call, do NOT share confidential/sensitive information
• Ask general questions, individual consultation should be directed to the Bureau of Infectious Disease Control at 603-271-4496 (ask for a public health staff members)
Advanced Notice:
Wednesday February 3rd Education and Childcare Partner Call Cancelled
Last Week’s Survey Questions

Zoom Poll:

1. On average, how often have you personally attended these weekly calls for education and childcare partners?

2. How frequently do you think these calls should be conducted moving forward to adequately address your questions and concerns, and provide updates?

3. How helpful do you find these calls?
1. On average, how often have you personally attended these weekly calls for education and childcare partners? (Multiple choice)

- Every week: (172/188) 91%
- every 2-3 weeks: (14/188) 7%
- once a month: (1/188) 1%
- less than once a month: (1/188) 1%
Survey Question #2

2. How frequently do you think these calls should be conducted moving forward to adequately address your questions and concerns, and provide updates? (Multiple choice)

- Once a week: (101/188) 54%
- Once every 2 weeks: (88/188) 47%
- Once a month: (6/188) 3%
- Stop having scheduled calls: (0/188) 0%
Survey Question #3

3. How helpful do you find these calls? (Multiple choice)

- Almost always helpful: (173/188) 92%
- Sometimes helpful: (16/188) 9%
- Not very helpful: (1/188) 1%
- Almost never helpful: (0/188) 0%
Access to COVID-19 Testing

• If your students/staff are having difficulty accessing COVID-19 testing, please post in the Chat and indicate testing issues with the following:
  1. Your name
  2. A way to contact you (e-mail)
  3. School District (town/city)

• Please do NOT send to me (or others) as a private message, those responses will not be collected

• If you need to send to someone privately, please email: Sheryl.A.Nielsen@dhhs.nh.gov
Considerations for Transitioning Between School Instructional Models Based on Level of Community COVID-19 Transmission and Impact on Local Schools

Updated: January 26, 2021

- Deleted one of the Community Transmission metrics
- Adjusted the Decision Matrix (colored 3x3 table in the guidance) to align with what we have been recommending
- Updated the COVID-19 case and cluster numbers for non-residential K-12 schools
- Highlighted the new/recent studies showing low-risk of transmission in K-12 school settings
### Updating: Considerations for Transitioning Between School Instructional Model Guidance

#### Level of Community Transmission

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Minimal</th>
<th>Moderate</th>
<th>Substantial</th>
</tr>
</thead>
<tbody>
<tr>
<td>COVID-19 PCR test positivity as a 7 day average</td>
<td>&lt; 5%</td>
<td>5 – 10%</td>
<td>&gt;10%</td>
</tr>
<tr>
<td>Number of new infections per 100,000 population over prior 14 days</td>
<td>&lt;50</td>
<td>50-100</td>
<td>&gt;100</td>
</tr>
<tr>
<td>Number of new hospitalizations per 100,000 people over the prior 14 days</td>
<td>&lt;18</td>
<td>10-20</td>
<td>&gt;20</td>
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Considerations for Transitioning Between School Instructional Model Guidance

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<td></td>
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<td></td>
<td>Moderate: 50-100</td>
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“New hospitalizations” (# and rate of new hospitalizations) is not consistently reported and doesn’t accurately reflect community burden of COVID-19.
## Instructional Model Decision Matrix: Previous Version

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# Instructional Model Decision Matrix: Current Version

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Incidence and Secondary Transmission of SARS-CoV-2 Infections in Schools

• North Carolina K-12 public schools: 11 school districts participated in “ABC Science Collaborative”

• Interventions: hybrid model, 6-foot distancing, high compliance with mask wearing, hand washing, daily symptom monitoring and temperature checks

• 773 community-acquired SARS-CoV-2 infections, but only 32 secondary infections (infections acquired within schools)

• No instances of child-to-adult transmission reported
Minimal transmission of SARS-CoV-2 from paediatric COVID-19 cases in primary schools, Norway, August to November 2020

- Primary schools in Norway: physical distancing of 1 meter, cohorting, face mask use was NOT recommended.
- Systematically tested all contacts within school twice during their quarantine period (self-collected saliva test).
- 13 index cases with 292 contacts included in study:
  - 234 child contacts: 2 infections picked up on the first test (2 “primary cases”), and 0 infections picked up on the second test (0 “secondary cases”).
  - 58 adult contacts: 1 infection picked up on the first test (1 “primary case”), and 0 infections picked up on the second test (0 “secondary cases”).
COVID-19 Trends Among Persons Aged 0–24 Years — United States, March 1–December 12, 2020

• National trends in COVID-19 for persons aged 0-24 years old, including trends after fall school re-opening.

• National trends in incidence of COVID-19 did not suggest that infections in K-12 school aged children preceded increases in community transmission.

• 62% of grade K-12 school districts offered either full or partial (i.e., hybrid) in-person learning and reports to CDC of outbreaks in K-12 schools have been limited.

• COVID-19 incidence in counties with in-person learning was similar to incidence in counties with remote learning.
• Seventeen K-12 schools in rural WI conducting in-person learning
• High levels of surrounding community transmission:
  • Weekly community incidence: 34 – 1,189 cases per 100,000 persons
  • Community test positivity ranged from 7% – 40%
• Student masking compliance was >92%
• COVID-19 incidence in schools conducting in-person learning was 37% lower than in the surrounding community
• 191 infections identified in students and staff
  • Only 7 (3.7%) were from in-school transmission
Amateur and Youth Sports


• Guidance allows for a lot of flexibility in how to conduct school sports

• Indoor and close-contact sports remain high-risk
Ten Florida high schools participated in two wrestling tournaments that a COVID-19 positive participant attended.

54 attendees (41.5%) were tested.
- 38 additional cases identified out of 126 attendees (attack rate of 30%)
- 70% of tests (38/54) were positive

446 close contacts identified, including 384 in-school contacts
- 95 close contacts were tested and 41 (43%) were positive

An estimated 1,700 in-person school days were lost as a consequence of isolation and quarantine.
FIGURE. SARS-CoV-2 tests with positive results among attendees of high school wrestling tournaments and their contacts, by specimen collection date — Florida, December 2020–January 2021

- Wrestling tournaments
- 17 additional athletic teams quarantined in county A
- Quarantine of school A wrestling team
- Cancellation of all high school athletics in county A
- Last day of school in county A
Study Conclusions

• Outbreaks among athletes participating in high contact sports can impact in-person learning for all students and increase risk for secondary in-school and community transmission.

• “High-contact school athletic activities for which mask wearing and physical distancing are not possible should be postponed during periods with substantial or high levels of SARS-CoV-2 community transmission.”
Viewpoint

January 26, 2021

Data and Policy to Guide Opening Schools Safely to Limit the Spread of SARS-CoV-2 Infection

Margaret A. Honein, PhD¹; Lisa C. Barrios, DrPH¹; John T. Brooks, MD¹

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https://jamanetwork.com/journals/jama/fullarticle/2775875
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