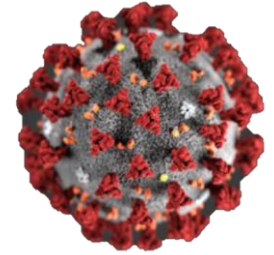


New Hampshire Coronavirus Disease 2019 Weekly Call for School Partners



Agenda:

- Opening Remarks – Dr. Ben Chan, Dr. Elizabeth Talbot, Dr. Beth Daly
- Q&A – 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, be careful about what you share (no 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)

New Guidance and Updates

- School Instructional Model Decision Matrix:
<https://www.dhhs.nh.gov/dphs/cdcs/covid19/documents/school-instruction-guidance.pdf>
- New School Data Dashboard:
<https://www.nh.gov/covid19/dashboard/overview.htm>
- Antigen Testing Update:
<https://www.dhhs.nh.gov/dphs/cdcs/alerts/documents/covid-19-update21.pdf>
- Questions & Answers

Instructional Model Decision Matrix

Considerations for Transitioning Between Different Instructional Models

- Guidance suggests an instructional model based on the COVID-19 level of:
 1. Community transmission within the county in which the school/SAU primarily resides (or within cities of Manchester and Nashua)
 2. Impact on individual school facilities
- This guidance is iterative and will potentially change over time based on our experience and feedback
- Ultimately decisions on school instructional models is up to the local SAUs and school boards
- Public health will continue to investigate and provide recommendations based on cases in schools and level of transmission

Defining Level of Community Transmission

- The overall transmission level should be assigned based the highest level identified by any one of the criteria below.

| Criteria | Level of Community Transmission | | |
|--|---------------------------------|----------|-------------|
| | Minimal | Moderate | Substantial |
| PCR test positivity as a 7 day average | < 5% | 5 – 10% | >10% |
| Number of new infections per 100,000 population over prior 14 days | <50 | 50-100 | >100 |
| Number of new hospitalizations per 100,000 population over prior 14 days | <10 | 10-20 | >20 |

Defining Level of School Impact

- The overall level of school impact should be assigned based the highest level identified by any one of the following criteria.

| Criteria | Level of School Impact | | |
|---|---|----------------------------|--|
| | Low | Medium | High |
| Transmission within the school facility | Zero or sporadic cases with no evidence of transmission within the school setting | One cluster* in the school | Two or more unrelated clusters* in the school with onset (based on source case symptom onset dates) within 14 days of each other |
| Student absenteeism due to illness | <15% | 15-30% | >30% |
| Staff capacity to conduct classes and school operations | Normal | Strained | Critical |

* A cluster is defined as 3 or more individuals confirmed with COVID-19 who are part of a related group of individuals (e.g., classroom) who had the potential to transmit infection to each other through close contact.

Instructional Model Decision Matrix

| | | Level of Community Transmission | | |
|------------------------|--------|---------------------------------|-----------|-------------|
| | | Minimal | Moderate | Substantial |
| Level of School Impact | Low | In-Person | In-Person | Hybrid |
| | Medium | In-Person | Hybrid | Remote |
| | High | Hybrid | Remote | Remote |

Reporting School Absenteeism

- The tool for reporting your school's absenteeism data is at the following website:

<https://business.nh.gov/Influenza/InfluenzaReporting.aspx>

Reporting School Absenteeism

New Hampshire Department of Health and Human Services COVID-19 and Influenza-like Illness Reporting System for New Hampshire Schools

2020 - 2021 School Year

This is a voluntary reporting program. If you volunteer to provide this data please ensure that reporting from your school is consistent so that the data reported will be useful in evaluating trends in respiratory illness in the community over time.

Participating schools agree to log into the system each day and provide the requested daily counts. We understand that not all schools will have access to all of the requested information. If information is not available for one of the requested counts please check "Not Available"

In the event of increased respiratory illness, case definition inclusion might consist of any or all of the following symptoms: myalgia (aches), headache, chills, fatigue, sore throat, sneezing, dry or productive cough, rhinorrhea (runny nose), and nausea accompanied by vomiting and diarrhea. Influenza-like-illness (ILI), in particular, may present with fever (temperature above 101°F [38.3°C] orally, above 102°F [38.9°C] rectally, or 100°F [37.8°C] or higher taken axillary.)

- | | | |
|---|--|--|
| 1. Report Date | <input type="text" value="09/02/2020"/> | (mm/dd/yyyy) |
| 2. Select School | <input type="text" value="-- Select School --"/> | |
| 3. Total number of students scheduled to be at school in-person | <input type="text"/> | <input type="checkbox"/> Number scheduled to be at school not available |
| 4. Total number of students absent with ILI | <input type="text"/> | <input type="checkbox"/> Number absent with ILI not available |
| 5. Total number of additional students absent with COVID or suspected COVID (do not include those with ILI) | <input type="text"/> | <input type="checkbox"/> Number absent suspect COVID not available |
| 6. Total absent due to quarantine/exposure (not ill) | <input type="text"/> | <input type="checkbox"/> Number absent quarantine/exposure not available |
| 7. Total absent for unknown reason | <input type="text"/> | <input type="checkbox"/> Number absent unknown reason not available |

Reporting School Absenteeism

- The tool for reporting your school's absenteeism data is at the following website:
<https://business.nh.gov/Influenza/InfluenzaReporting.aspx>
- A couple additional questions are going to be asked:
 - Subjective assessment of staffing capacity (normal, strained, critical)
 - Current school instructional model (in-person, hybrid, remote)
- If you have any questions or concerns, please contact Kenneth Dufault at 603-271-5165 or Kenneth.Dufault@dhhs.nh.gov

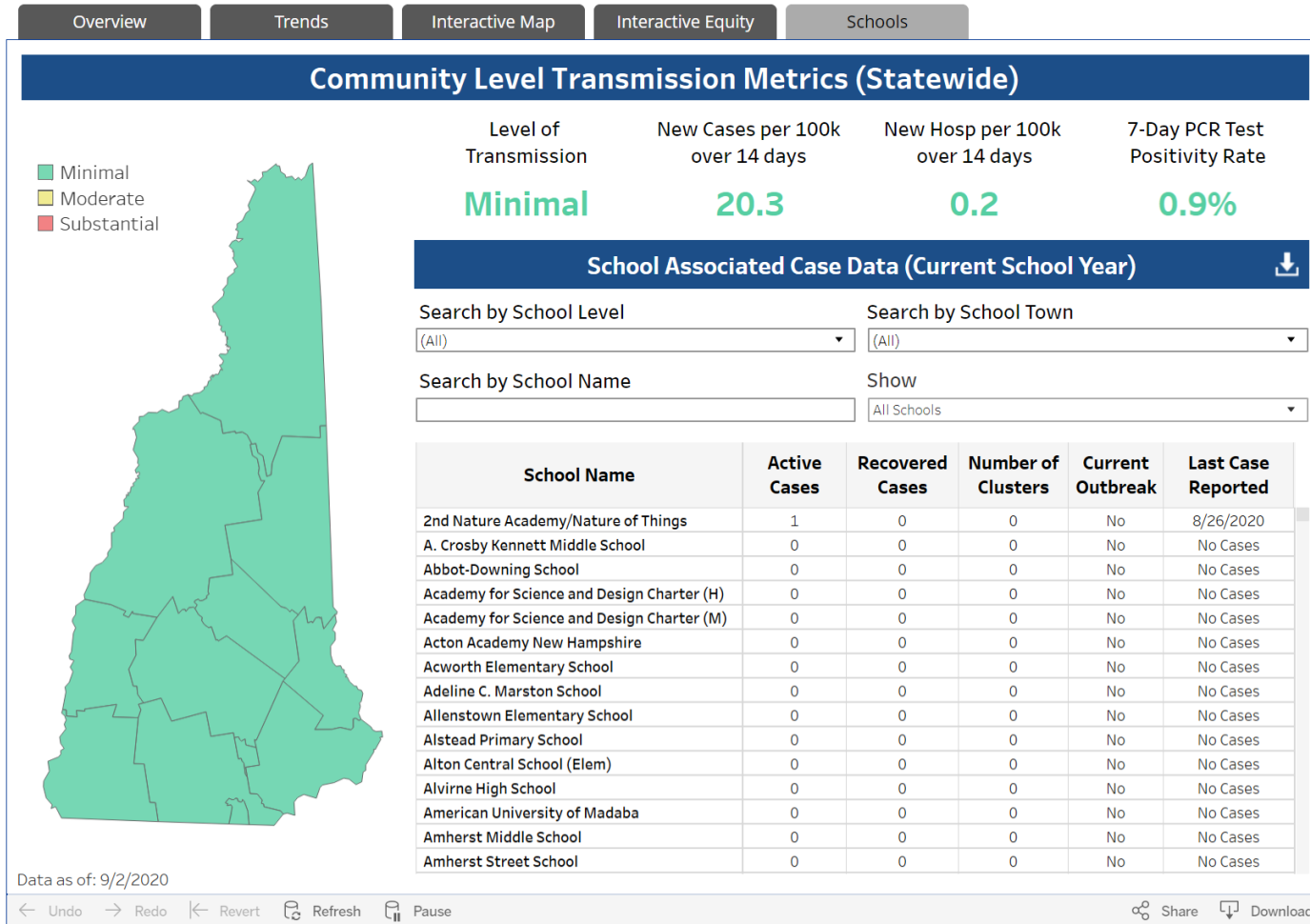
Intended Uses of the Decision Matrix

- This is not intended to direct schools how to re-open
- Schools will need to make decisions throughout the school year based on what is happening in their communities and local schools
- This is intended to serve as a guide for schools to highlight what metrics we suggest schools/SAUs monitor
- SAUs, superintendents, school planning committees have been asking for metrics

School Data Dashboard

School Data Dashboard to Track Metrics

<https://www.nh.gov/covid19/>



Question: When do students/staff get listed on this dashboard?

Antigen Testing Update

Antigen Testing Update

Table: Comparison of Antigen Diagnostic Tests for SARS-CoV-2 Which Have [Received Food and Drug Administration \(FDA\) Emergency Use Authorization \(EUA\)](#)

| Test Name | Manufacturer | Specimen Types | Maximum Time Frame to Test After Symptom Onset | Positive Agreement (compared to RT-PCR) | Negative Agreement (compared to RT-PCR) | Manufacturer Instructions |
|---|--------------------------------------|------------------|--|---|---|--------------------------------|
| BinaxNOW COVID-19 Ag Card* | Abbott Diagnostics Scarborough, Inc. | Nasal Swab | 7 days | 97.1% | 98.5% | Package Insert |
| LumiraDx SARS-CoV-2 Ag Test | LumiraDx UK Ltd. | Nasal Swab | 12 days | 97.6% | 96.6% | Package Insert |
| BD Veritor System for Rapid Detection of SARS-CoV-2 | Becton, Dickinson (BD) and Company | Nasal Swab | 5 days | 84% | 100% | Package Insert |
| Sofia SARS Antigen FIA | Quidel Corporation | NP or Nasal Swab | 5 days | 96.7% | 100% | Package Insert |

NP: nasopharyngeal; RT-PCR: reverse transcription polymerase chain reaction

* Note: BinaxNOW does not require a separate instrument for testing

NH will purchase 25 rapid test machines

Accurate test results take just 15 minutes, officials say

61
Shares



Updated: 6:59 PM EDT Aug 27, 2020



Abbott BinaxNOW Antigen Card

- Federal government has bought up supplies of the Abbott BinaxNOW cards through the end of the year and will ship them to states for distribution
- We plan to look at possibly distributing to schools

BinaxNOW: With a swab and a card, reliable coronavirus test results in 15 minutes.



CLIA Certificate

- Schools/SAUs need a CLIA certificate to use test:
 - CMS CLIA Application for Certification Form # 116:
<https://www.cms.gov/Medicare/CMS-Forms/CMS-Forms/downloads/cms116.pdf>
 - School districts can have one certificate to cover multiple schools
- Questions?
 - Contact Aaron Doyle (Health Facilities Administration):
Aaron.Doyle@dhhs.nh.gov

Questions and Answers

Sheryl Nielsen, M.Ed.
COVID-19 Education Liaison

Sheryl.Nielsen@dhhs.nh.gov

603-271-6996

Questions: Isolation, Quarantine, & Close Contact

- Go to: www.NH.gov
 - See Re-open guidance (“Universal Guidelines”)
 - See NH DPHS school-specific guidance
- Isolation: For infected people (or people displaying symptoms of COVID-19 before testing)
- Quarantine: For exposed people (at risk of coming down with COVID-19)

Definition of Isolation

- Isolation: Individuals who have tested positive for COVID-19 or who have new unexplained symptoms of COVID-19 (but are not tested) must isolate by staying home and away from other people (even other members of their households) in order to avoid spreading the virus. A person can end their isolation when they have met CDC's criteria for discontinuation of isolation OR an approved COVID-19 test is negative, at least 24 hours have passed since their last fever (off any fever reducing medications), and symptoms have improved.

Definition of Quarantine

- Quarantine: An person who has a risk factor for exposure to COVID-19 (e.g., close contact to someone with COVID-19, travel, etc.) is required to remain at home and away from public locations for at least 14 days after their last day of potential risk factor or exposure regardless of the presence or absence of symptoms, and regardless of whether or not the person has tested negative.

Definition of Close Contact

- Close Contact: People who have been within 6 feet for 10 minutes or longer of a person with COVID-19. The 10 minutes of contact can be at one time or cumulative over the course of the day. Close contact does not include brief contact with a person in passing. In the event a person is identified with COVID-19 in the workplace, the New Hampshire Department of Health and Human Services (DHHS), Division of Public Health Services (DPHS) will help to determine who has been in close contact through public health contact tracing.

Additional Questions & Answers

Sheryl Nielsen, M.Ed.
COVID-19 Education Liaison

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