Back to School 2021-2022 With COVID-19 January 13, 2022

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This meeting is for School and Health Department Staff

We have limited time to cover all our topics. The slides and recordings will be available on our websites within 1-3 days.

https://www.dhd10.org/coronavirus/school-guidance/

https://www.mmdhd.org/covid-schools/

https://www.cmdhd.org/novelschools

If you have questions, please send them to:

For Roscommon, Osceola, Clare, Gladwin, Arenac, Isabella Counties: info@cmdhd.org

For Missaukee, Crawford, Kalkaska, Wexford, Lake, Mason, Manistee, Oceana, Newaygo, Mecosta Counties: info@dhd10.org

For Montcalm, Gratiot, Clinton Counties: https://www.mmdhd.org/contact/

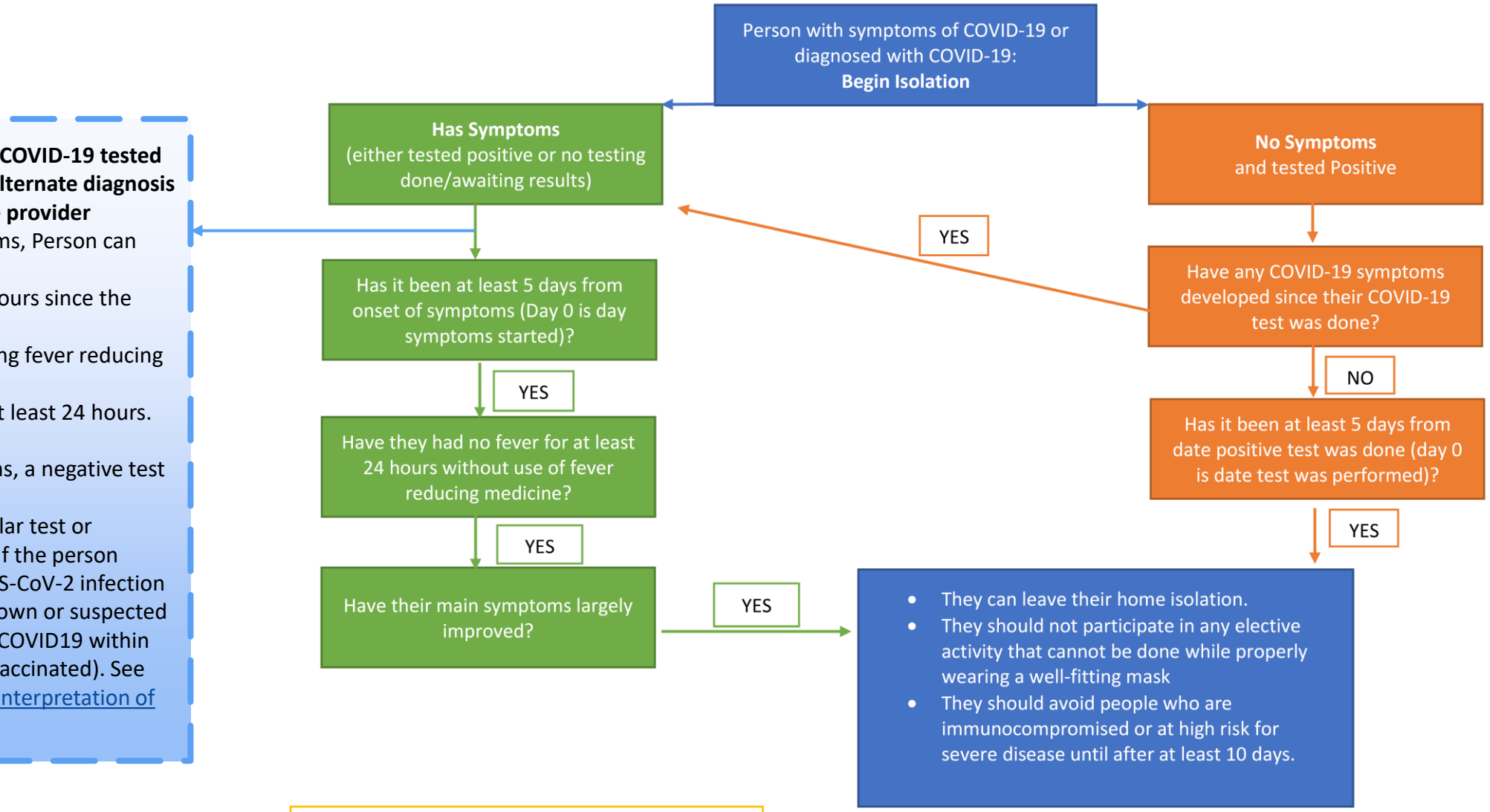
Please make sure the information shared today is passed along to others who may need it, such as school COVID-19 liaisons, school secretaries, school nurses, etc.

Thank you!

New Isolation and Quarantine Guidance

- Ours and MDHSS' sent out Monday
  - MDHHS https://www.michigan.gov/documents/coronavirus/MI_Safer_Schools_Guidance_for_Managing_Students_Exposed_to_COVID-19_734750_7.pdf
  - Ours https://b7415fe4-3f8d-4ed9-b594-7f18ad7f0403.filesusr.com/ugd/6f9944_473a292a58a14838b0fbc2023d29378f.pdf
- Very similar (main difference-our test to stay says to test until and including day 5, MDHHS is day 6)
- Follows CDC guidance https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/K-12-contact-tracing.html

Overview of COVID-19 Isolation for K-12 Schools



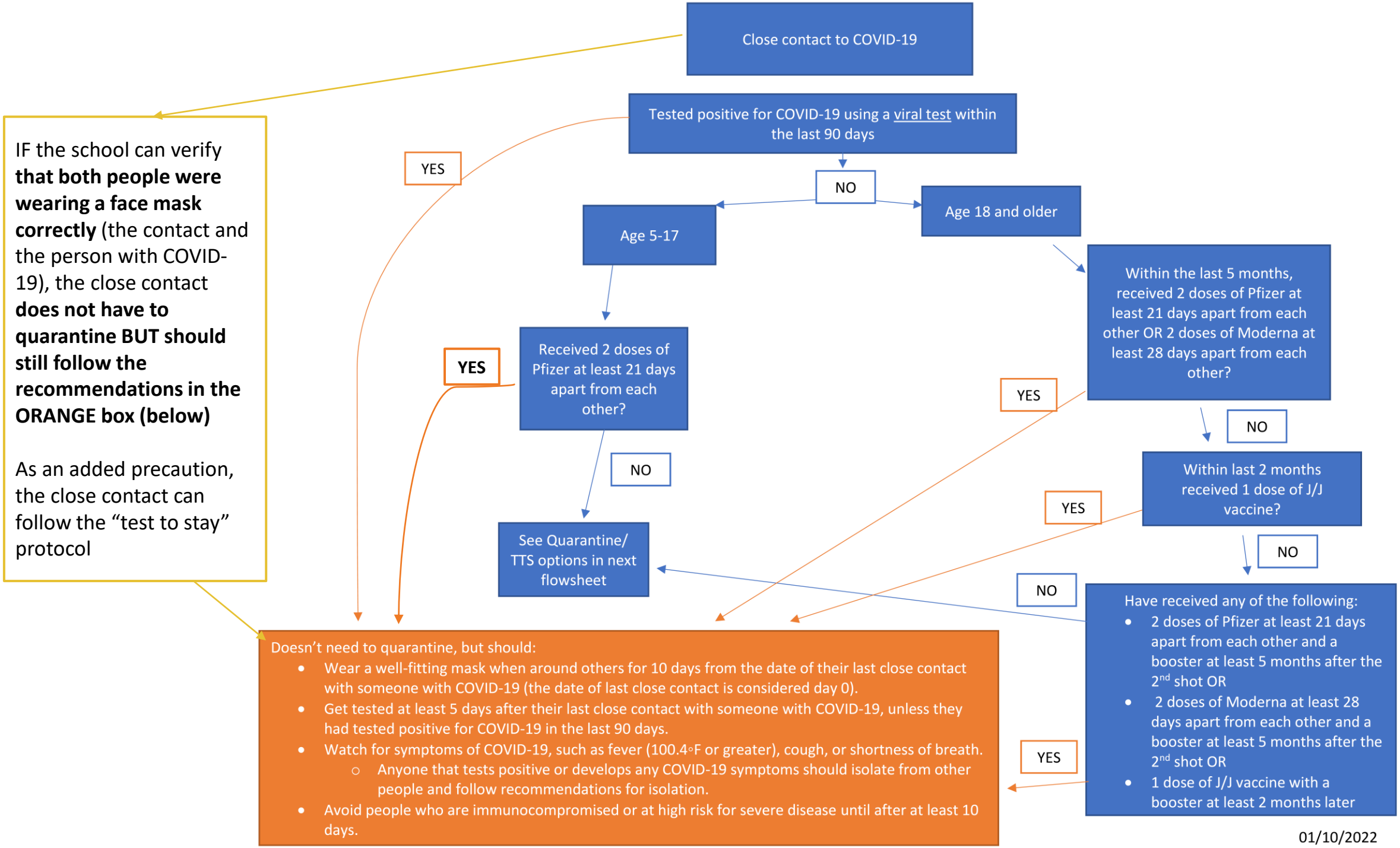
Person has symptoms of COVID-19 tested negative* or received an alternate diagnosis from a healthcare provider that explains their symptoms, Person can return to school when:

- It has been at least 24 hours since the person
- had a fever (without using fever reducing
- medicine); AND
- They have felt well for at least 24 hours.

*In a person with symptoms, a negative test is defined as either
(1) a negative PCR/molecular test or
(2) a negative antigen test if the person has a low likelihood of SARS-CoV-2 infection (e.g., the person has no known or suspected exposure to a person with COVID19 within the last 14 days or is fully vaccinated). See CDC antigen algorithm for interpretation of antigen tests

Note these recommendations do not apply to, and the traditional 10 day (or longer) isolation should be followed for:

- Children < 2 years of age, or other individuals who are unable to wear a mask.
- People who have severe illness
- People who are immunocompromised


Close contact to COVID-19
IF the school can verify **that both people were wearing a face mask correctly** (the contact and the person with COVID-19), the close contact **does not have to quarantine BUT should still follow the recommendations in the ORANGE box (below)**
As an added precaution, the close contact can follow the "test to stay" protocol
Tested positive for COVID-19 using a viral test within the last 90 days
YES
NO
Age 5-17
Age 18 and older
Received 2 doses of Pfizer at least 21 days apart from each other?
YES
NO
See Quarantine/ TTS options in next flowsheet
Within the last 5 months, received 2 doses of Pfizer at least 21 days apart from each other OR 2 doses of Moderna at least 28 days apart from each other?
YES
NO
Within last 2 months received 1 dose of J/J vaccine?
YES
NO
Have received any of the following:
• 2 doses of Pfizer at least 21 days apart from each other and a booster at least 5 months after the 2nd shot OR
• 2 doses of Moderna at least 28 days apart from each other and a booster at least 5 months after the 2nd shot OR
• 1 dose of J/J vaccine with a booster at least 2 months later
YES
NO
Doesn't need to quarantine, but should:
• Wear a well-fitting mask when around others for 10 days from the date of their last close contact with someone with COVID-19 (the date of last close contact is considered day 0).
• Get tested at least 5 days after their last close contact with someone with COVID-19, unless they had tested positive for COVID-19 in the last 90 days.
• Watch for symptoms of COVID-19, such as fever (100.4◦F or greater), cough, or shortness of breath.
◦ Anyone that tests positive or develops any COVID-19 symptoms should isolate from other people and follow recommendations for isolation.
• Avoid people who are immunocompromised or at high risk for severe disease until after at least 10 days.

01/10/2022

Overview of COVID-19 Quarantine for K-12 Schools

Close contact to COVID-19 is identified as needing quarantine or TTS

Option 1

Quarantine for at least 5 days after their last close contact (Note: day 0 is the last day of exposure):

- Wear a well-fitting mask when around others for 10 days from the date of their last close contact with someone with COVID-19 (the date of last close contact is considered day 0).
- Get tested at least 5 days after their last close contact with someone with COVID-19, unless they had tested positive for COVID-19 in the last 90 days.
- Watch for symptoms of COVID-19, such as fever (100.4◦F or greater), cough, or shortness of breath.
  - Anyone that tests positive or develops any COVID-19 symptoms should isolate from other people and follow recommendations for isolation.
- Avoid people who are immunocompromised or at high risk for severe disease until after at least 10 days.

Option 2

Household close contacts are NOT eligible for TTS. They must follow OPTION 1. Day 0 is the last day they are exposed to contagious household member

Test to Stay (TTS)

- Test negative by rapid antigen testing prior to attending class or any school function on the FIRST day they became aware of the exposure and then at least every other day until and including day 5 after exposure.
  - Testing only needs to be done prior to attending school or school activities, in other words, it does not have to be done on weekends or holidays unless the student will be attending a school activity
- Testing can be done in school by trained staff, at an offsite testing facility, or at home using a home test. Only rely on home test if you feel the results being reported to you are trustworthy.
- If any test is positive, the student must then isolate as explained above.
  - NO CONFIRMATION WITH PCR IS NEEDED of a positive rapid antigen test in this situation as they were exposed to someone with COVID-19 therefore have a higher likelihood of infection. See https://www.cdc.gov/coronavirus/2019-ncov/lab/resources/Antigen_Testing_Algorithm_CommunitySettings.pdf

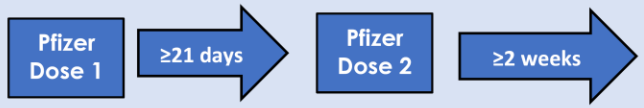
Note these recommendations do not apply to:

- Children < 2 years of age, or other individuals who are unable to wear a mask.

"Up To Date" on COVID-19 Vaccination in Order to Not Need to Quarantine*

Age 5-17

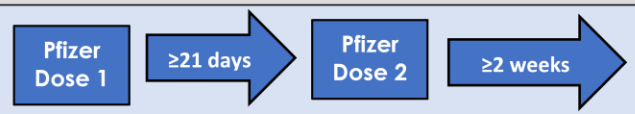
Two Doses of Pfizer



Ages 18 and older

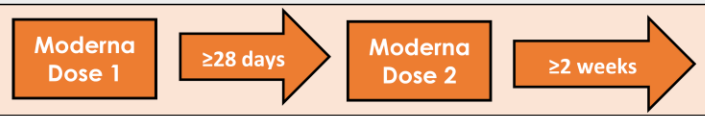
Within last 5 months had:

Two Doses of Pfizer



OR

Two Doses of Moderna

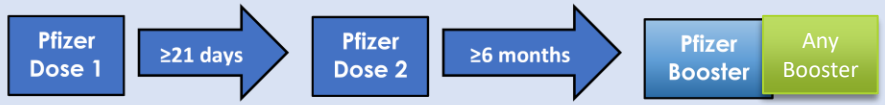


Within last 2 months had:

One Dose of J/J

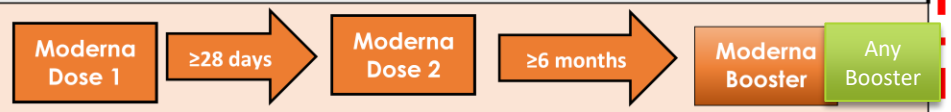
AT ANYTIME Have had one of the following:

Three Doses of Pfizer



OR

Three Doses of Moderna



OR

Two Doses of J/J

*Note: A 3rd dose of Pfizer or Moderna is required in the primary series for some people who are moderately or severely immunocompromised

NOTE: These are the current recommendations for school exposures.

For the general public, everyone 12 and older should have a Pfizer booster after 5 months. See https://www.cdc.gov/coronavirus/2019-ncov/vaccines/stay-up-to-date.html for general public and https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/k-12-contact-tracing/about-quarantine.html for schools

Note: The CDC considers those 18 and older up to date when they have received a recommended booster shot "when eligible". Both Pfizer and Modera are now approved and recommended 5 months after the primary series.

For Household Exposures

- Test to Stay **does not apply** to household close contacts, only to those exposed in the school setting
- The infectious period is still 2 days prior to 10 days after the start of symptoms or test date if they never had symptoms (just most contagious from 2 days before to 3 days after)
- For household contacts, their 5 quarantine starts after the last day they are exposed to their infected household member while they are contagious
- So: if the infected household member is not able to completely isolate away from the family members on days 1-5 and is not able to either isolate or wear a mask at all times while around family members on days 6-10, then day 1 of the quarantine for household members would start on day 11 of the infected person's isolation

Clarification of Communication

- We will defer to schools to advise close contacts when they can return to school (or test if doing test to stay)
- If parents or staff call us for guidance re: when they can return, we will tell them the basic recommendations but add "your school may give you slightly different dates or guidance and you should follow those"

Messaging from MDHHS 1/13: Shifting Priorities

Public health response will be shifting away from the practice of universal contact tracing and individual-level case investigations, and instead focus on high priority community and congregate settings. State and Local public health capacity will focus on targeted identification, response, and mitigation of COVID-19 clusters and outbreaks, especially for vulnerable populations and those associated with settings where persons congregate like long term care facilities, group homes, jails/prisons, schools, shelters, and dormitories.

MDHHS is formally retiring support to LHDs for universal individual level case investigation and contact tracing effective next week. MDHHS will continue to support LHD efforts around outbreak detection and response.

MDHHS will dedicate additional efforts toward a public awareness and education campaign related to increasing familiarity with isolation and quarantine, definition of a close contact, how and when to notify close contacts, what to do if notified of an exposure, when and how to seek testing, conducting at-home testing and interpreting results, and when to seek medical care/therapeutics.

Messaging from MDHHS: Shifting Priorities, continued

With the current surge of COVID-19 cases across the State, increasing presence of the Omicron variant, and measures to move away from individual level case investigation and contact tracing at this time, messaging to families of school aged children and school administrators regarding their responsibilities related to isolation and quarantine will be necessary.

For Parents and Guardians:

- Have the student stay home when ill
- If the student tests positive for COVID-19, isolate at home following CDC guidelines
- Report the student's positive test to the school
- If the student is exposed to COVID-19 outside of the school setting quarantine at home following CDC guidelines
- If the student is exposed to COVID-19 in the school setting follow local school/public health guidance on students exposed in the school setting

For School Administrators

- Screen students for signs and symptoms of illness and ask parents/guardians to keep ill students at home until well
- If the school becomes aware of a COVID-19 case, identify students/staff that may have been a close contact of the case in the school setting
- Notify staff and the parents/guardians of students that have been exposed to COVID-19 in a classroom setting
- Follow MDHHS guidelines related to isolation and quarantine of persons exposed to COVID-19 in the school setting

Useful Updated Resources

- ABC Science Collaborative evaluation of North Carolina "test-to-stay" guidelines https://abcsciencecollaborative.org/wp-content/uploads/2021/12/Test-to-stay-NCDHHS-Report-v2-signed.pdf
- StrongSchoolsNC Public Health Toolkit updated school guidelines **(great detailed explanation of Management of COVID cases and contacts starting on page 15)** https://covid19.ncdhhs.gov/media/164/open
- Children's Hospital of Philadelphia PolicyLab Guidance for In-person Education in K-12 Educational Settings Update https://policylab.chop.edu/sites/default/files/pdf/publications/PolicyLab-Guidance-In-person-Education-K-12%20Educational-Settings-January-2022.pdf

StrongSchoolsNC Public Health Toolkit updated school guidelines (great detailed explanation of Management of COVID cases and contacts starting on page 15)

https://covid19.ncdhhs.gov/media/164/open

☐ Exclusion from school for positive COVID cases and close contacts is **required** following the specific criteria and exemptions listed in the table below.

Exclusion Category	Scenario	Criteria to return to school
Diagnosis	Person has tested **positive** with an **antigen test** but **does not have symptoms** of COVID-19 and is not known to be a close contact to someone diagnosed with COVID-19.	If the person has a repeat PCR/molecular test performed in a laboratory within 24 – 48 hours of their positive antigen test, and that PCR/molecular test is negative: the positive antigen test can be considered a false positive and the person can immediately return to school; OR If the person does not have a repeat PCR/molecular test, or has one within 24 – 48 hours and it is also positive, the person can return to school **5** days after the specimen collection date of the first positive test, as long as they did not develop symptoms. The person must continue to mask for an additional 5 days to minimize risk of infecting others. The person is not required to have documentation of a negative test in order to return to school.
Diagnosis	Person has tested **positive** with a **PCR/molecular test** but the person does **not** have symptoms.	Person can return to school **5** days after the specimen collection date of their positive test as long as they did not develop symptoms. The person must continue to mask for an additional 5 days to minimize risk of infecting others.
Symptoms	Person **has symptoms** of COVID-19 and has tested **positive** with an **antigen test or PCR/molecular test**	Person can return to school when • It has been at least **5** days after the first day of symptoms; AND • It has been at least 24 hours since the person had a fever (without using fever reducing medicine); AND • Other symptoms of COVID-19 are improving. The person is not required to have documentation of a negative test in order to return to school. The person must continue to wear a mask for 10 days after the first day of symptoms to minimize the risk of infecting others
Symptoms	Person has symptoms of COVID-19 but has **not** been tested for COVID-19 nor has visited a health care provider. Therefore, the person who has symptoms is presumed positive for COVID-19 due to the presence of a clinically compatible illness in the absence of testing.	Person can return to school when • It has been at least **5** days after the first day of symptoms; AND • It has been at least 24 hours since the person had a fever (without using fever reducing medicine); AND • Other symptoms of COVID-19 are improving. The person is not required to have documentation of a negative test in order to return to school. The person must continue to wear a mask for 10 days after the first day of symptoms to minimize the risk of infecting others
Symptoms	Person has symptoms of COVID-19 but has received a negative test for COVID-19* or has visited a health care provider and received **an alternate diagnosis** that would explain the symptoms of COVID-19 *In a person with symptoms, a negative test is defined as either (1) a negative PCR/molecular test or (2) a negative antigen test if the person has a low likelihood of SARS-CoV-2 infection (e.g., the person has no known or suspected exposure to a person with COVID-19 within the last 14 days or is fully vaccinated). See CDC antigen algorithm for interpretation of antigen tests	Person can return to school when: • It has been at least 24 hours since the person had a fever (without using fever reducing medicine); AND • They have felt well for at least 24 hours. Note: The health care provider is not required to detail the specifics of the alternate diagnosis.
Exposure	Person in a mask optional setting for whom an exception to exclusion does not apply and has been in close contact with someone with COVID-19	Person must be excluded from school for 5 days after exposure. Person may return to school after exclusion if asymptomatic but must continue to wear a mask for an additional 5 days, for a total of 10 days after exposure. The 5 days of exclusion begins on the day after the last known close contact with the COVID-19 positive individual. They should test on day 5, if possible. If symptoms occur, person should immediately isolate until a test either confirms COVID-19, or a negative result rules it out.
Exposure (Exemption-vaccinated)	Person has been in close contact with someone with COVID-19 and is in one of the following groups: • They are 18 years of age and have received their primary series AND booster, if eligible. • They are between the ages of 5-17 and have completed a primary series of COVID-19 vaccines. Boosters are not required to meet this exception for this age group.	Person does not need to be excluded from school if they have had no symptoms after being a close contact to someone with COVID-19 The person must continue to wear a mask for 10 days after the exposure to minimize the risk of infecting others and should get tested on day 5, if possible.
Exposure (Exemption Masked exposure)	Person has been in close contact with someone with COVID-19, in which both individuals were wearing a mask the entire time	Person does not need to be excluded from school if masks were being worn appropriately and consistently by both the person with COVID-19 and the potential exposed person. This applies to exposures in classrooms, other in-school settings, extracurricular activities, including athletic activities and school transportation.
Exposure (Exemption Infection in past 90 days)	Person has been in close contact with someone with COVID-19 and had confirmed COVID-19 within the last 90 days (tested positive using a viral test)	Person does not need to be excluded from school if they have had no symptoms after being a close contact to someone with COVID-19. The person must continue to wear a mask for 10 days after the exposure to minimize the risk of infecting others and should get tested on day 5, if possible.
Exposure (Exemption Test to Stay in Mask Required Setting)	Person in a mask required setting and has been in close contact with someone with COVID-19 in which one or both individuals were not wearing a mask the entire time	Individuals in a **mask-required school setting** do NOT need to be excluded from school after a close contact, including unmasked exposures (e.g., during lunch or extracurricular activities), if they have no symptoms. Individuals with unmasked exposures in a mask required school setting should get tested on the day of notification of exposure and as close to day 5 after exposure as possible and must wear a mask in school settings. This exemption applies to in-school exposures as described above as well as non-household, out-of-school exposures. While the individual does not need to be excluded from the school setting, quarantine measures may still apply in non-school settings. If testing supply is limited, priority should be given to testing of students participating in athletics because of the higher risk of transmission in that setting.

*For individuals exposed, day of exposure is considered day zero (0). For cases, day of symptom onset is day zero (0) or for individuals without symptoms, day of specimen collection is considered day zero (0).

Testing Updates

EMAIL FROM MDHHS:

Due to a supply shortage of Binax Pro, schools that have been prioritized as high-risk will begin receiving Flowflex beginning 1/13/2022, a similar antigen test. To ensure everyone is updated on the new antigen test, information for Flowflex has been provided below for all local health departments to have and refer to if you receive any questions from your local school districts. We will keep you informed as our goal is to only utilize Flow flex for a short period of time but is dependent on our supply constraints.

FlowFlex can be administered and reported in the same way you do with Abbott BinaxNow antigen test. As with the other tests provided by MDHHS, reporting test results is required for FlowFlex and reporting must be complete using the same online Antigen Reporting Form .

Below you will find resources on FlowFlex:
https://www.aconlabs.com/brands/flowflex/covid-19-antigen-home-test/
https://www.youtube.com/watch?v=9ShFIzJtaT8

For any questions or concerns please email MDHHS-COVIDTestingSupport@michigan.gov

School Antigen Testing

- 1/12/22 White House Release: FACT SHEET:

Biden-Harris Administration Increases COVID-19 Testing in Schools to Keep Students Safe and Schools Open https://www.whitehouse.gov/briefing-room/statements-releases/2022/01/12/fact-sheet-biden-harris-administration-increases-covid-19-testing-in-schools-to-keep-students-safe-and-schools-open/

- School Testing for COVID-19 https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/school-testing.html
- MI Safe Schools Testing Program https://www.michigan.gov/schoolcovidtesting
- School Antigen COVID Test Ordering form https://forms.office.com/Pages/ResponsePage.aspx?id=h3D71Xc3rUKWaoku9HIl0ZGHyz3HKppAusICATcUVNlUMEZHUkJKTExHQlo5VVpKNlpIRVZJTTg0SyQlQCN0PWcu&wdLOR=cBB496C74-933E-4E39-8B2A-37EBC570E455

See the most up to date data at https://www.mistartmap.info/

MI COVID Response Data and Modeling Update-January 11th

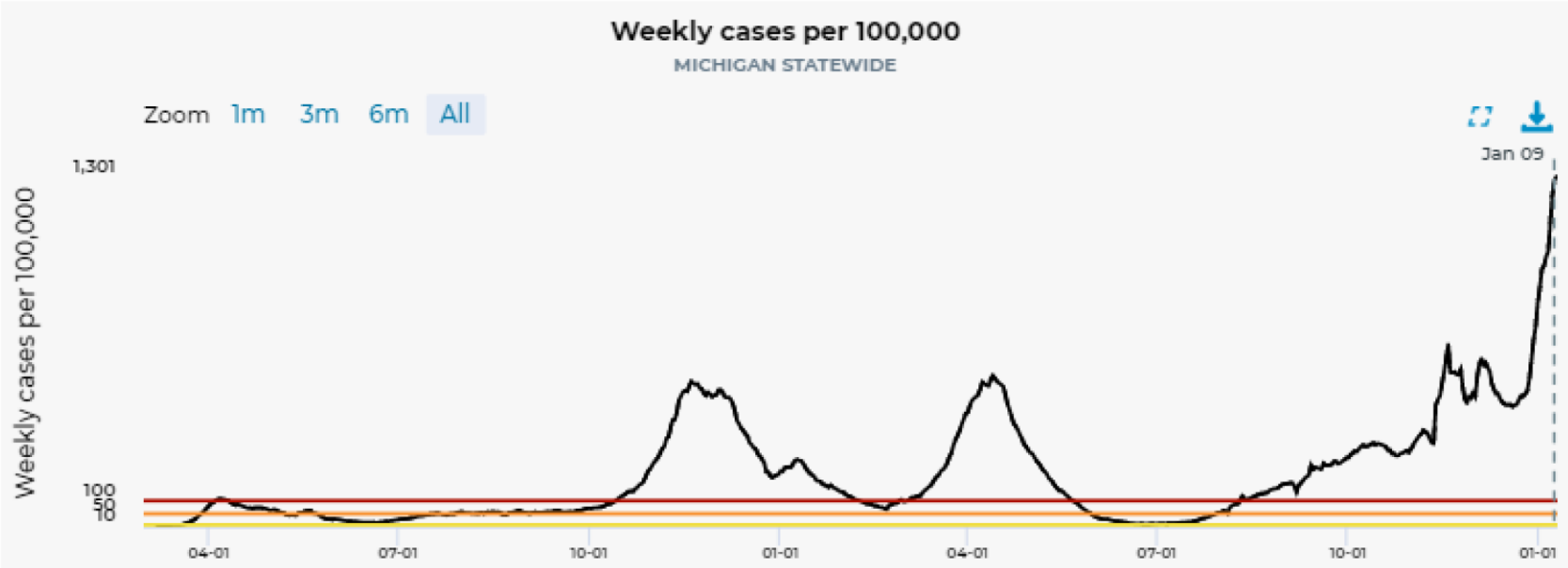
https://www.michigan.gov/coronavirus/0,9753,7-406-98163_98173_105123---,00.html

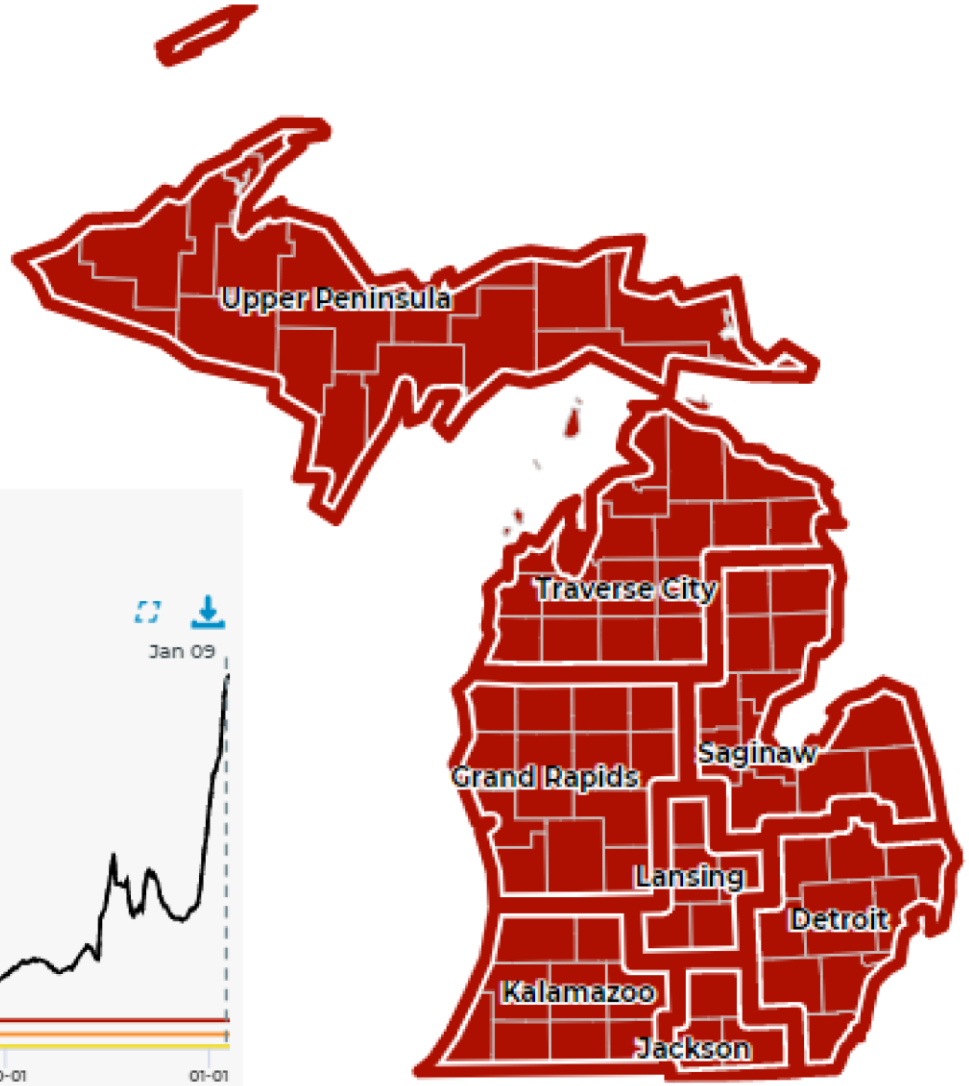
Michigan Summary

- Exponential growth and the highest case numbers of entire pandemic: 20–29-year-olds currently have the highest case rate of any age group
- Deaths rates have decreased over the last week for all age groups
- COVID+ census in hospitals has set another pandemic record; Pediatric COVID+ census down slightly from last week's record high
- More hospitals in Michigan are reporting critical staff shortages than ever reported during the pandemic

Michigan continuing to experience high daily case count during the pandemic

Dashboard | CDC | MI Start Map for most recent data by reporting date



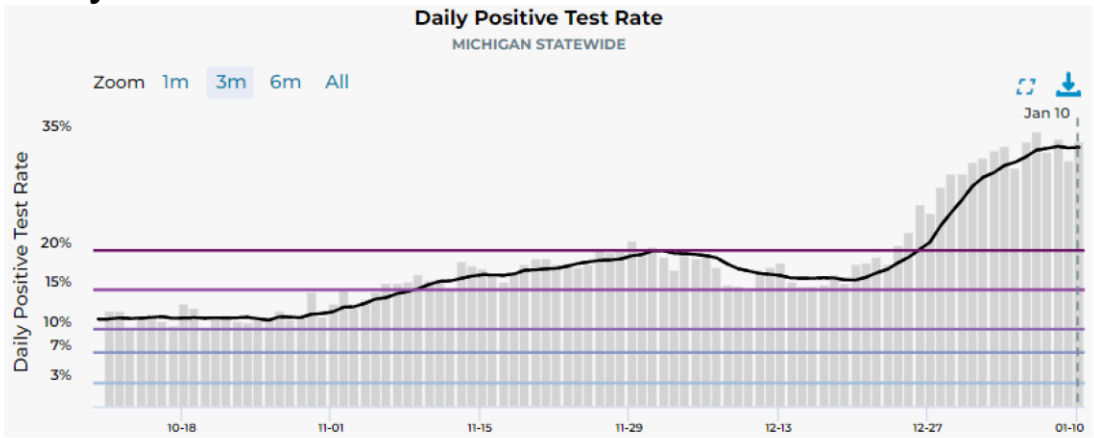


- All counties at High Transmission level
- Referrals sharply rose over New Year holiday weekend

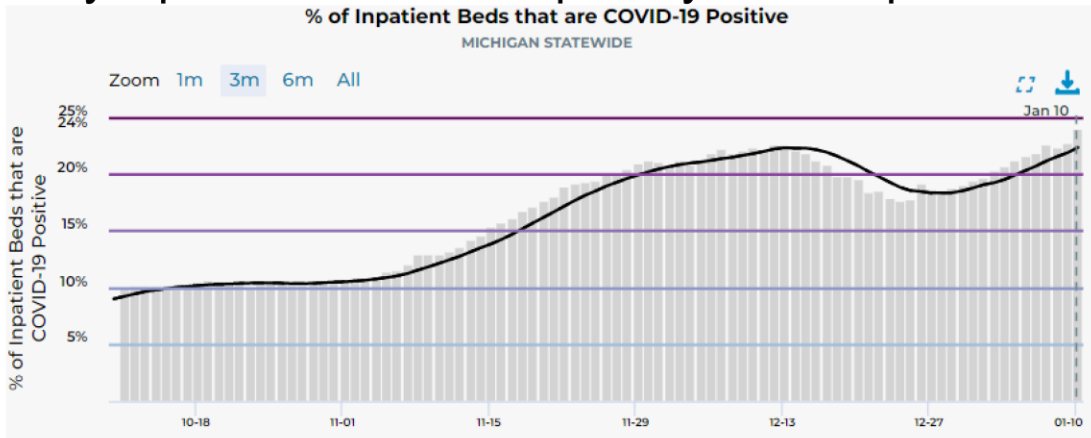
Time Trends – Positivity, Case Rates, Hospitalizations, Deaths

- Most COVID-19 indicators are at all-time highs, and burden remains high in MI

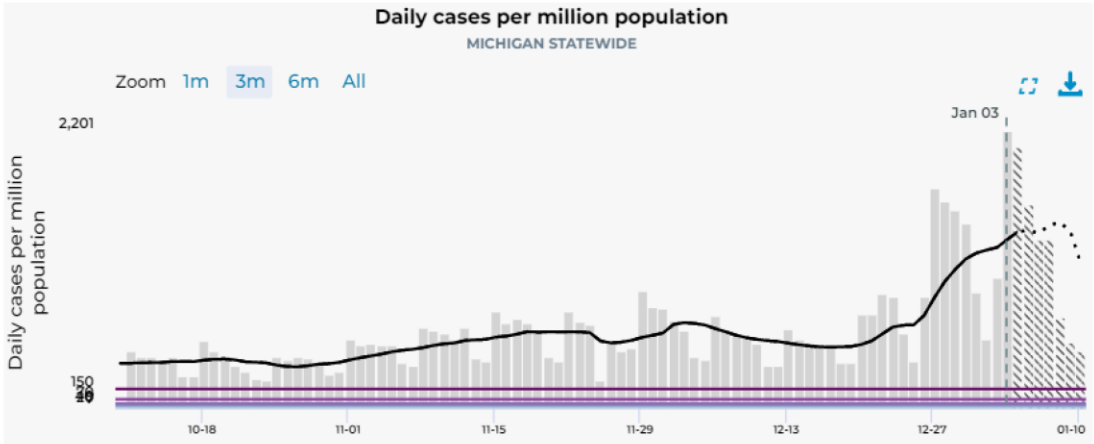
Daily Positive Test Rate



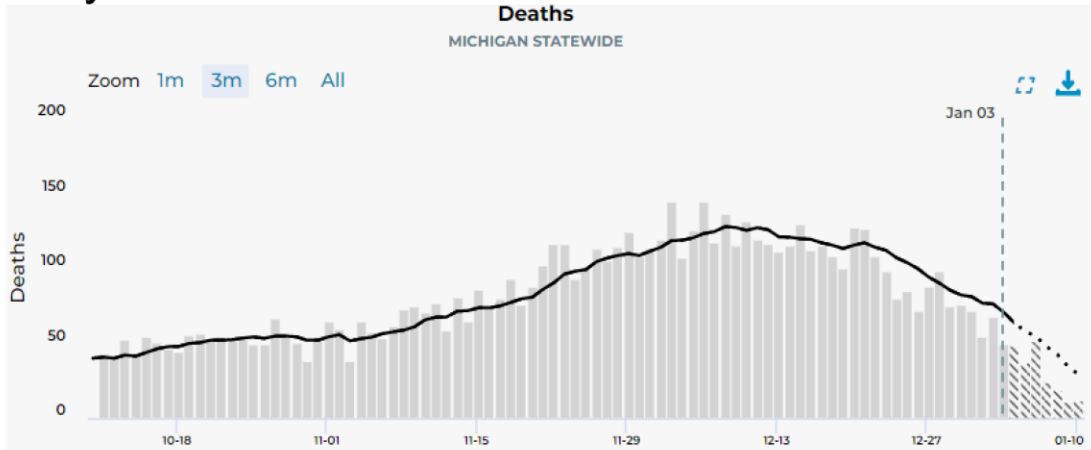
Daily Inpatient Beds Occupied by COVID patients



Daily Case Rate



Daily Deaths

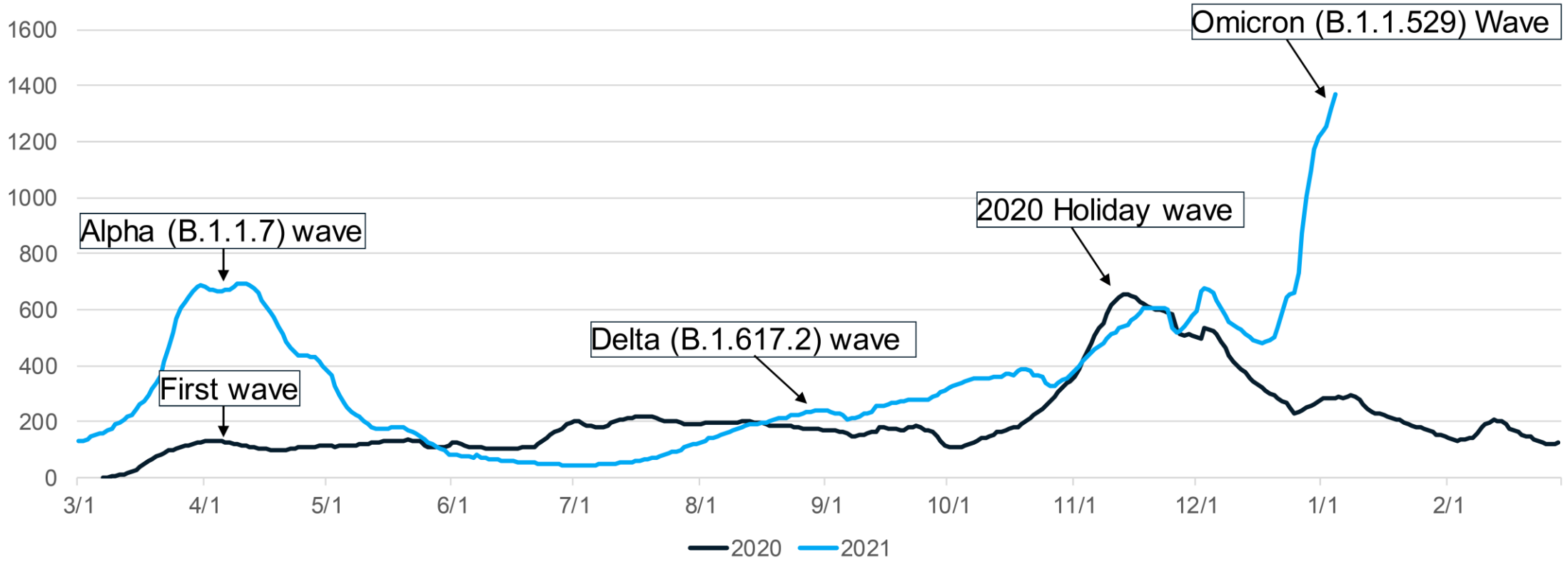


Source: Michigan Disease Surveillance System and https://www.mistartmap.info/mism-indicators

Time Trends – Annual Comparison

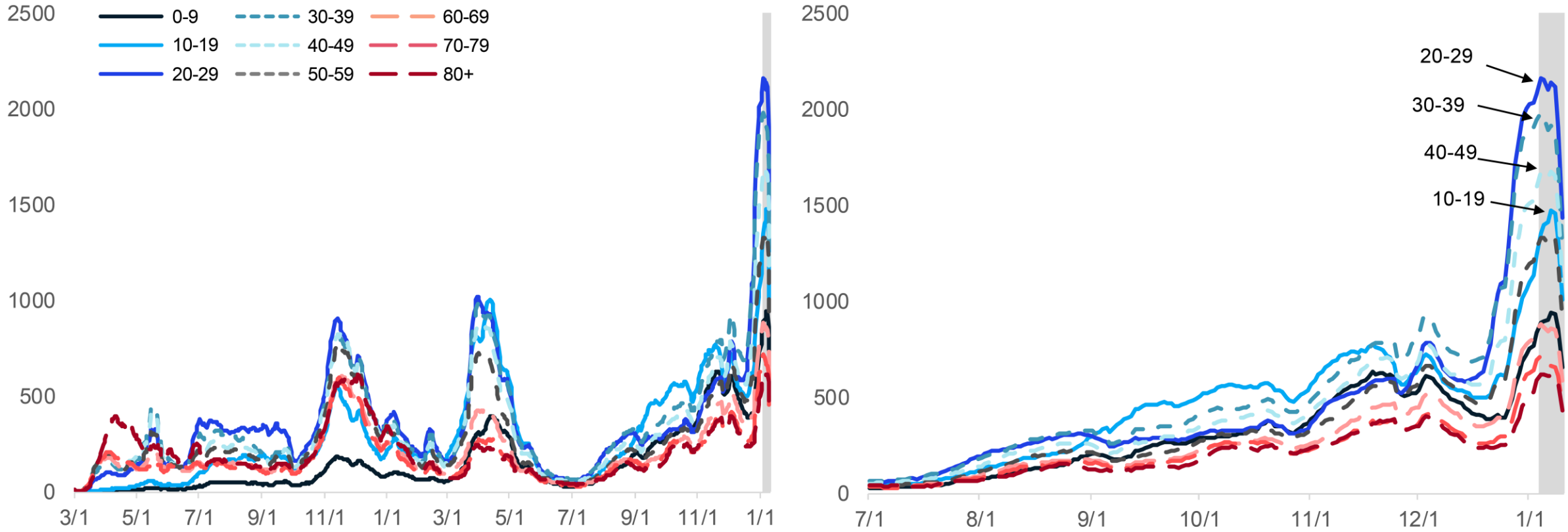
- Case rates (by onset date) are the highest of the pandemic
- Current increases after holidays due to spread of the Delta and Omicron variants

7- day rolling average of Rates 2020 vs 2021



Case Rate Trends by Age Group

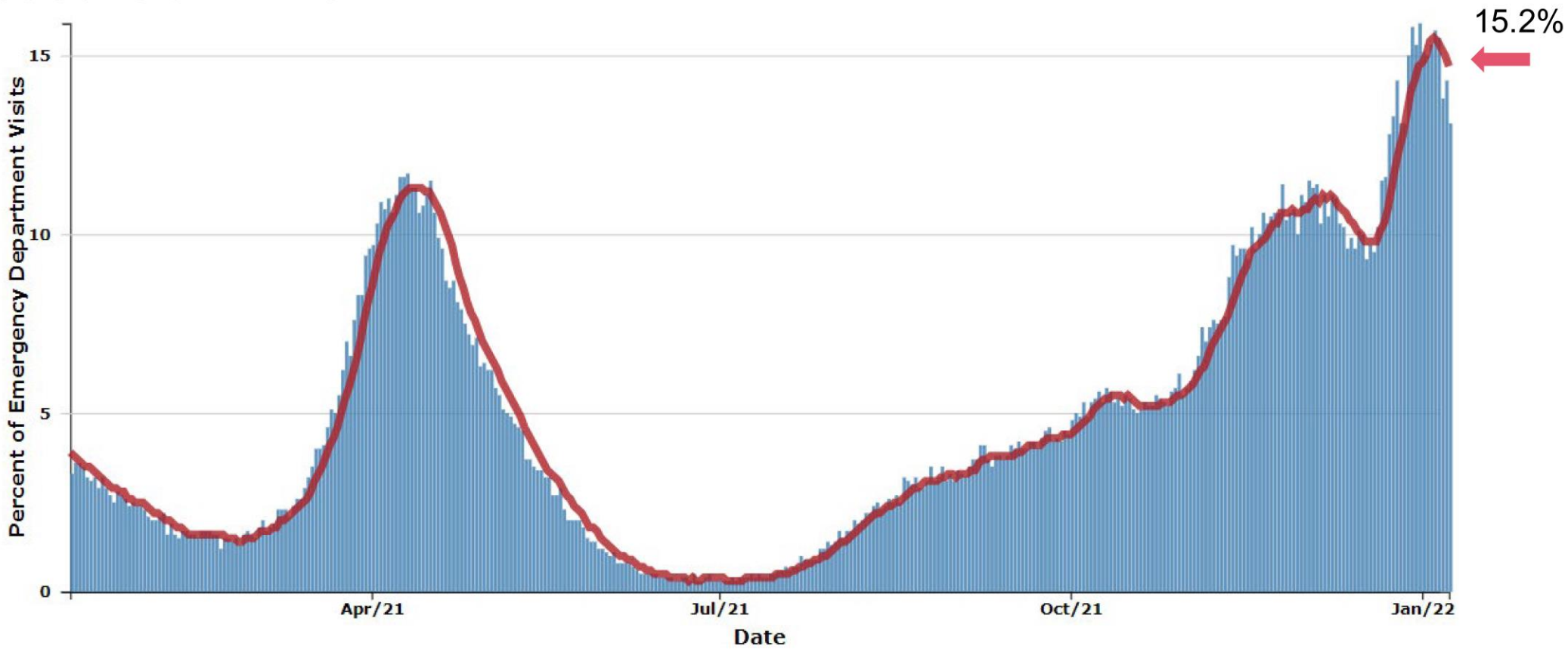
Daily new confirmed and probable cases per million by age group (7-day rolling average)



- Case rate trends for most age groups saw exponential increases over the past week and are expected to increase
- Case rates by onset date for all age groups are between 586 and 2,082 cases per million (through 1/3)
- Case counts and case rates are highest for 20-29-year-olds this week

Note: Case information sourced from MDHHS and reflects date of onset of symptoms
Source: MDHHS – Michigan Disease Surveillance System

Michigan Trends in Emergency Department (ED) Visits for Diagnosed COVID-19

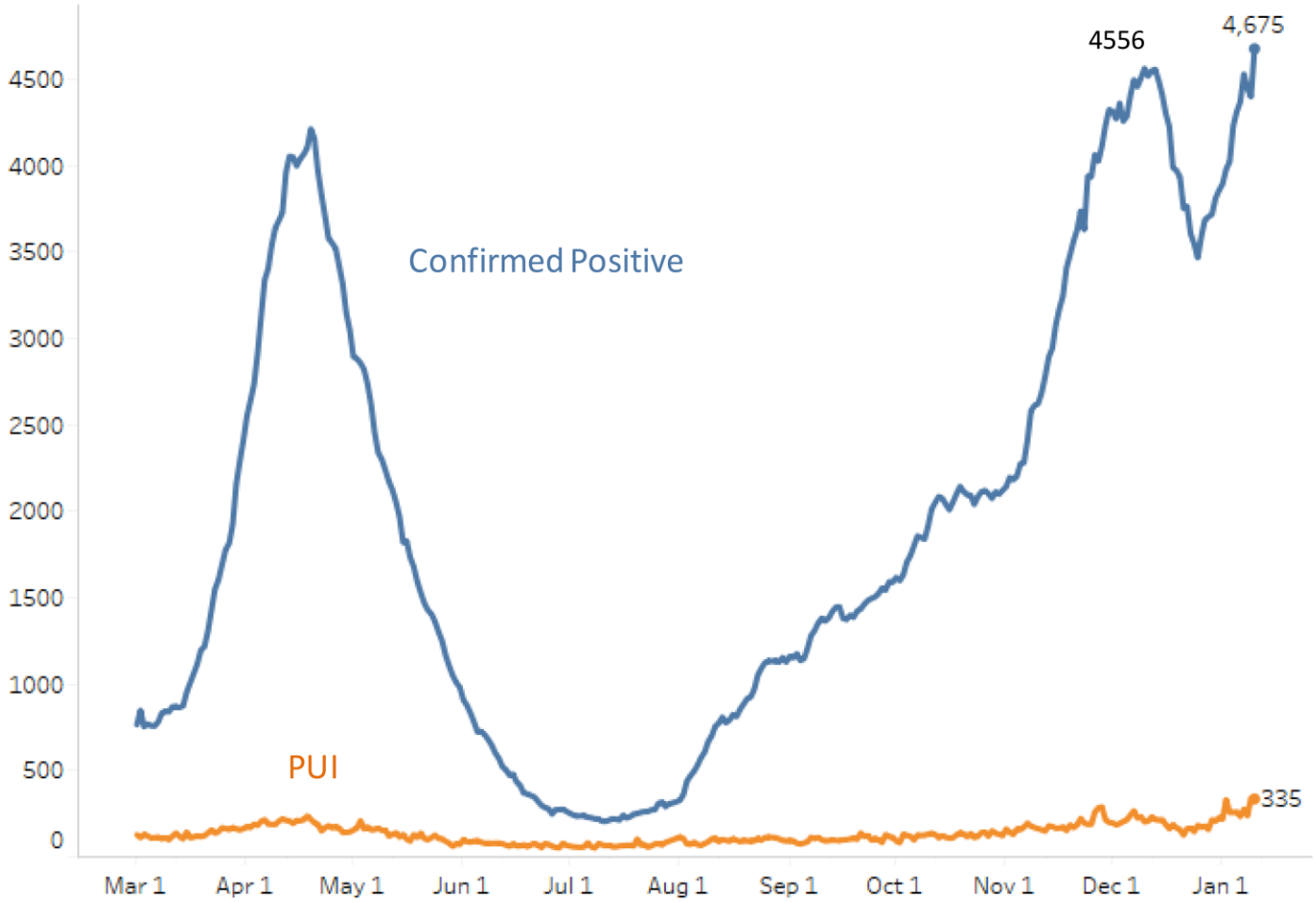


- Trends for ED visits have increased to 15.2% since last week (last week: 11.7%) but are down from the recent peak of 15.5% (on Jan 4)
- Over past week, those 40-49 years saw highest number of avg. daily ED CLI visits (16.8%), but those between 25-64 all above state average

Source: https://covid.cdc.gov/covid-data-tracker/#ed-visits; data extracted on 10/18/2021

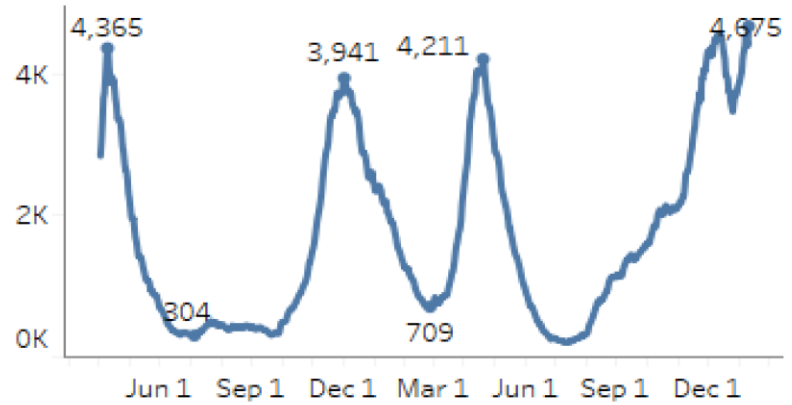
Statewide Hospitalization Trends: Total COVID+ Census

Hospitalization Trends 3/1/2021 – 1/10/2022
Confirmed Positive & Persons Under Investigation (PUI)



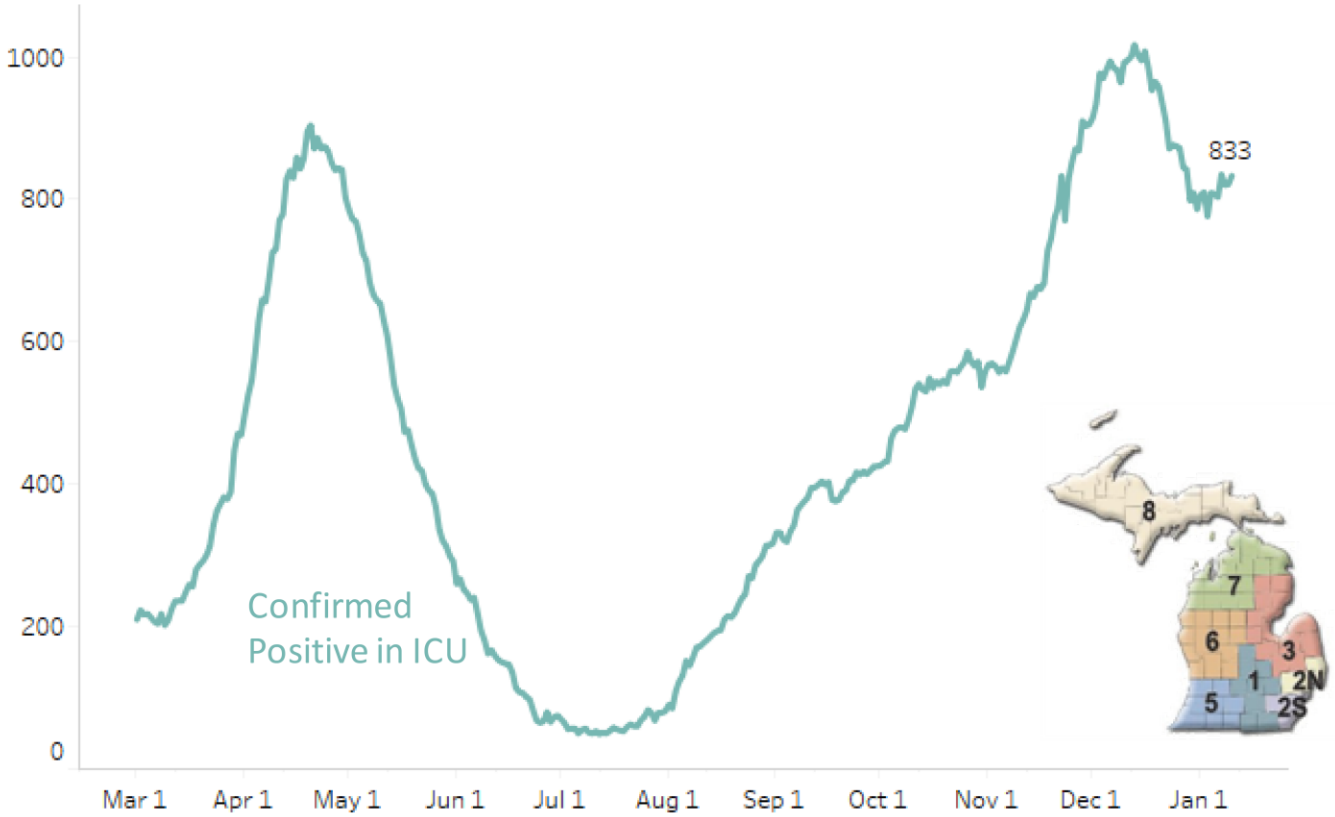
The COVID+ census in hospitals has increased by 16% over the past week and has set another pandemic record.

Hospitalized COVID Positive Long Term Trend (beginning March 2020)



Statewide Hospitalization Trends: ICU COVID+ Census

Hospitalization Trends 3/1/2021 – 1/10/2022
Confirmed Positive in ICUs



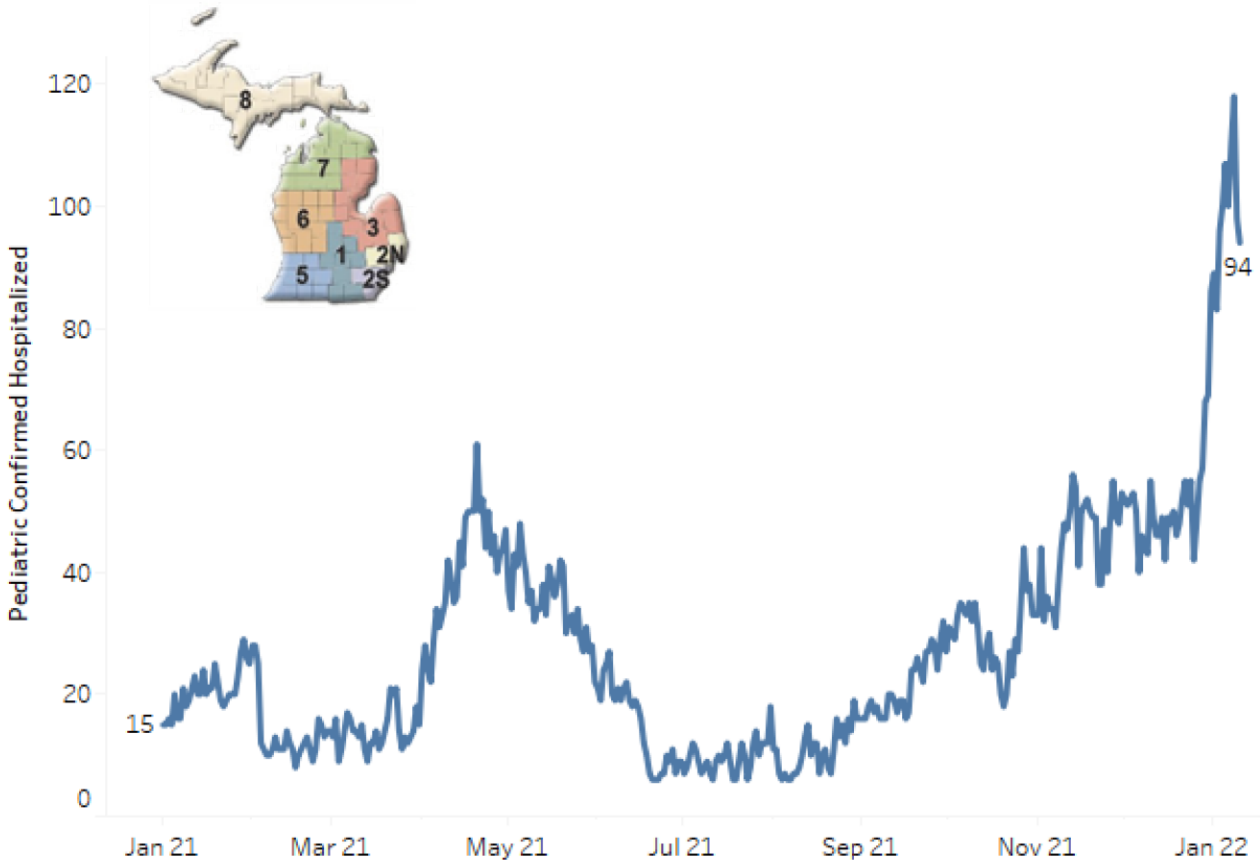
The census of COVID+ patients in ICUs has increased 7% from last week. Census in ICUs has increased in all regions except for Regions 3 and 6.

Regions 1, 2S, and 3 have ICU occupancy greater than 85%. All regions except for Regions 5 and 8 have 30% or more ICU beds filled with COVID+ patients.

Region	Adult COVID+ in ICU (% Δ from last week)	Adult ICU Occupancy	% of Adult ICU beds COVID+
Region 1	76 (12%)	86%	37%
Region 2N	174 (16%)	79%	31%
Region 2S	234 (5%)	87%	34%
Region 3	111 (-5%)	93%	34%
Region 5	48 (17%)	78%	28%
Region 6	128 (0%)	81%	43%
Region 7	45 (36%)	81%	34%
Region 8	17 (6%)	76%	27%

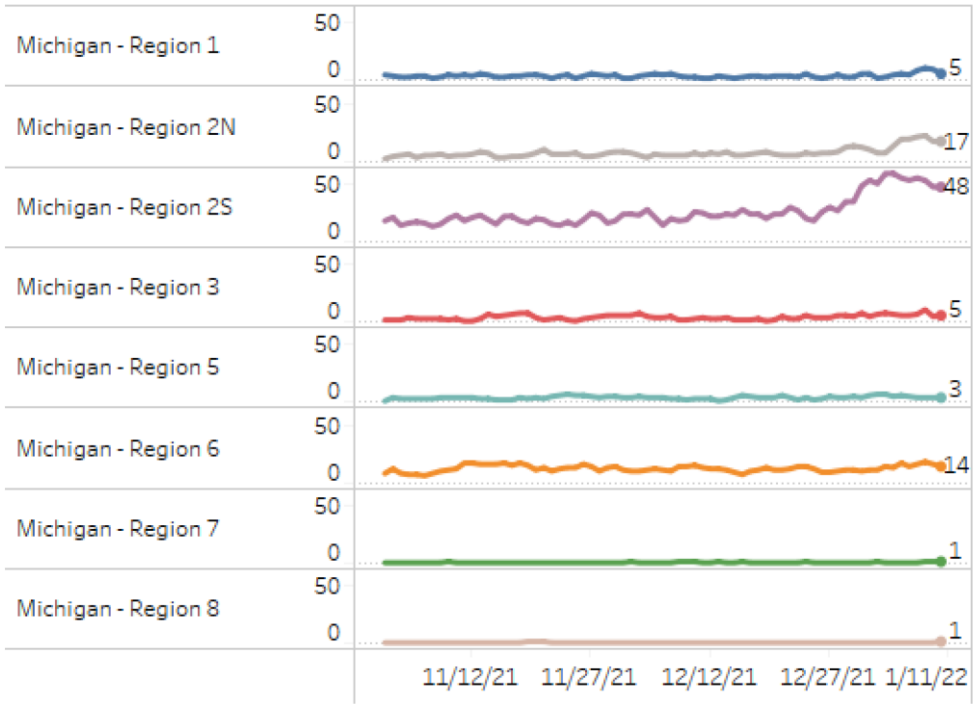
Statewide Hospitalization Trends: Pediatric COVID+ Census

Hospitalization Trends 1/1/2021 – 1/10/2022
Pediatric Hospitalizations, Confirmed



Pediatric COVID+ Hospital census remains high although it is down slightly from last week's record high.

Pediatric Hospitalizations by Region
(Nov 2021-Jan 2022)



Identified COVID-19 Cases Caused by Variants of Concern (VOC) in US and Michigan

SARS-CoV-2 Variants Circulating in the United States, Dec 4 – Jan 8 (NOWCAST)

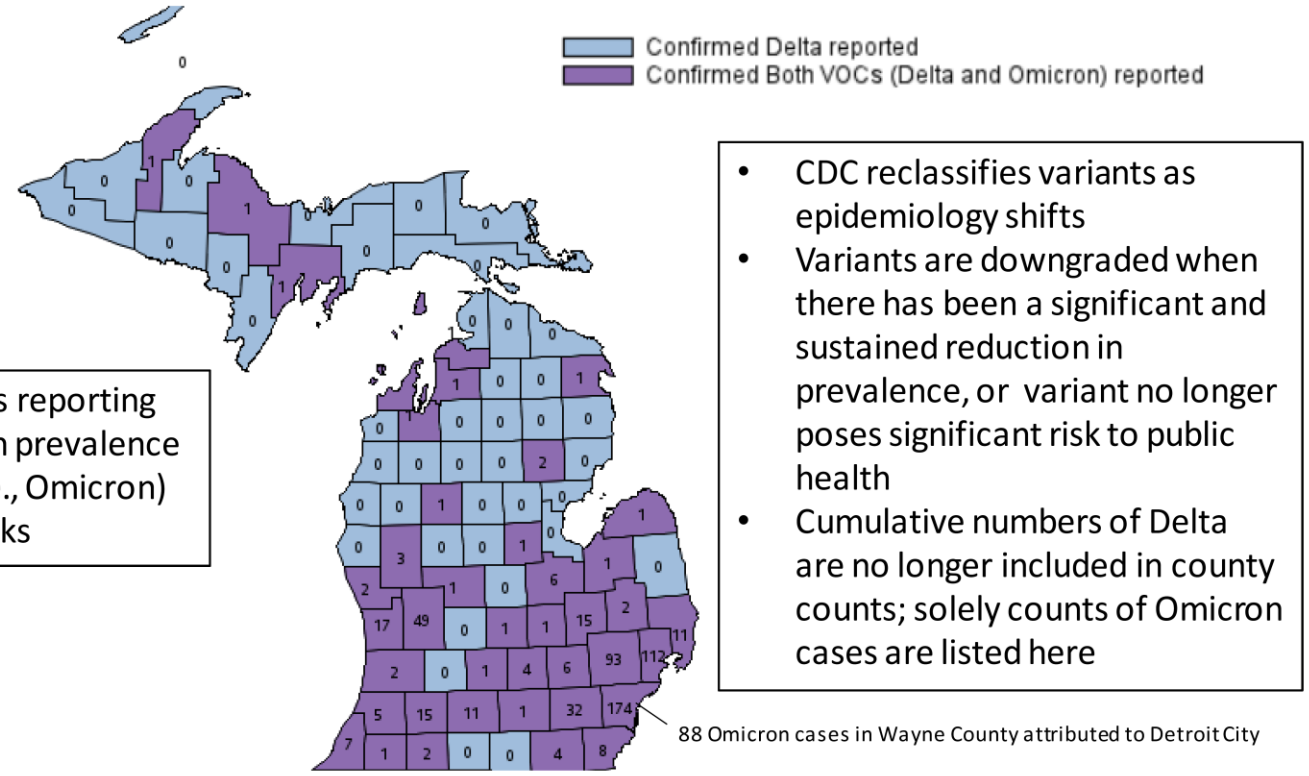
USA

WHO label	Lineage #	US Class	%Total	95%PI
Omicron	B.1.1.529	VOC	98.3%	96.9-99.1%
Delta	B.1.617.2	VOC	1.7%	0.9-3.0%
Other	Other*		0.0%	0.0-0.0%

* Enumerated lineages are US VOC and lineages circulating above 1% nationally in at least one week period. "Other" represents the aggregation of lineages which are circulating <1% nationally during all weeks displayed.
** These data include Nowcast estimates, which are modeled projections that may differ from weighted estimates generated at later dates
# AY.1-AY.127 and their sublineages are aggregated with B.1.617.2. BA.1, BA.2 and BA.3 are aggregated with B.1.1.529.

Currently, CDC is reporting rapid increase in prevalence of B.1.1.529 (i.e., Omicron) over past 6 weeks

Variants of Concern in Michigan, Jan 10



- CDC reclassifies variants as epidemiology shifts
- Variants are downgraded when there has been a significant and sustained reduction in prevalence, or variant no longer poses significant risk to public health
- Cumulative numbers of Delta are no longer included in county counts; solely counts of Omicron cases are listed here

Variant	MI Reported Cases	# of Counties	MDHHS VOC Sequenced Prev. ¶	Last Week
B.1.617.2 (delta)	30,295	83	30.3%	68.1%
B.1.1.529 (omicron)	617	41 (18 counties last week)	69.7%	31.9%

Data last updated Jan 10, 2022
Source: MDSS
¶ Sequence specimens are from the most recent week by onset date which may change as more specimens are sent in

Vaccines

Protect against severe outcomes

Boosters are more important than ever, and available for individuals 12+

Masks, Distancing & Ventilation

Prevent spread

Well-fitting, high-quality masks in all indoor public or crowded settings are more important than ever

Tests

Prevent spread

We encourage testing before gatherings, with symptoms, and after exposure

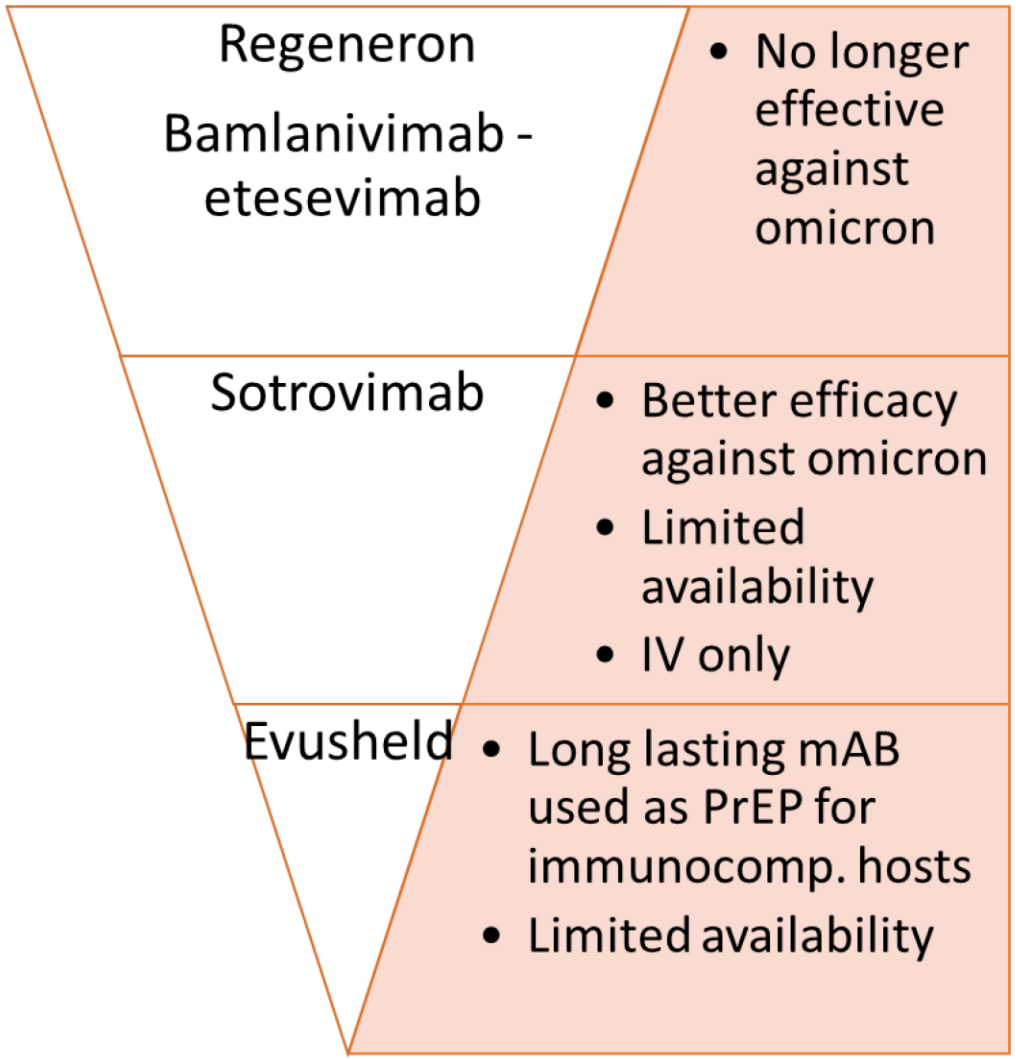
Treatment

Protect against severe outcomes

Oral antivirals and monoclonal antibody infusions are available

Therapeutics

Antibodies



Antivirals