



Board of Education Meeting

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Considerations for Reopening

- The benefits of getting kids back into school are balanced with the risks of school disruption or transmission due to COVID-19
- Students and teachers do their best to maintain safe practices but are not perfect
- Risk can be reduced but not eliminated
- If one person in a cohort has COVID-19, then all people in the cohort will be assessed for quarantine
- Recommendations will be updated based on new knowledge

MDH Guidance

- MDH updated guidance in late January identifies the following factors
 - Continue to effectively implement all MDH/MSDE health and safety requirements (i.e., distancing, masking, and cleaning/disinfecting)
 - Seek to limit transmission in the school environment (i.e., exclusion, quarantine, contact tracing, manage cases and outbreaks)
 - Consider the school's ability to manage operational issues
 - Provide parents and caregivers the opportunity to choose a remote option for their children

Dept of Health Guidance - Update

- Reopening case rate metrics are no longer part of the guidance in line with changes in the Maryland and CDC guidance.
- Testing for schools is updated based on current Health Department operations
- Contact tracing in schools is updated to reflect current guidance
- Managing cases in schools is updated to reflect the partnership between the Health Department and AACPS on jointly managing cases in school
- Vaccines is a new section that addresses their role as a key mitigation strategy

Case Rate and Metrics

- CDC recommends return to school without case rate decision points
- MDH guidance no longer relies on case rate metrics
- Data from around the country shows that the case rate for those in school, both students and staff, is similar to the case rate in the community
- This holds across a broad range of case rates and percent positivities
- *Department of Health will no longer use case rate based decision tool*

Testing Approach

- Available to all students, family and staff at no cost
- Available for symptomatic and asymptomatic people
- All existing Department of Health testing sites are available:
 - Glen Burnie
 - Annapolis
 - Deale
 - Odenton
 - Community pop ups
- New school testing teams will test exposed individuals at schools to facilitate cohort testing
 - At diagnosis
 - After 7-10 days

Contact Tracing

- Epidemiology staff do contact tracing and outbreak investigations in schools as a routine part of the work
- Students and staff to inform school if they are positive
- School will work with Department of Health to prioritize contact tracing for school based cases
 - Expedites cases when the individual is a county resident
 - Critical when the individual is not a county resident since AACo Health Department would not be informed initially
- Partnership between Department of Health ad AACPS to manage contact tracing

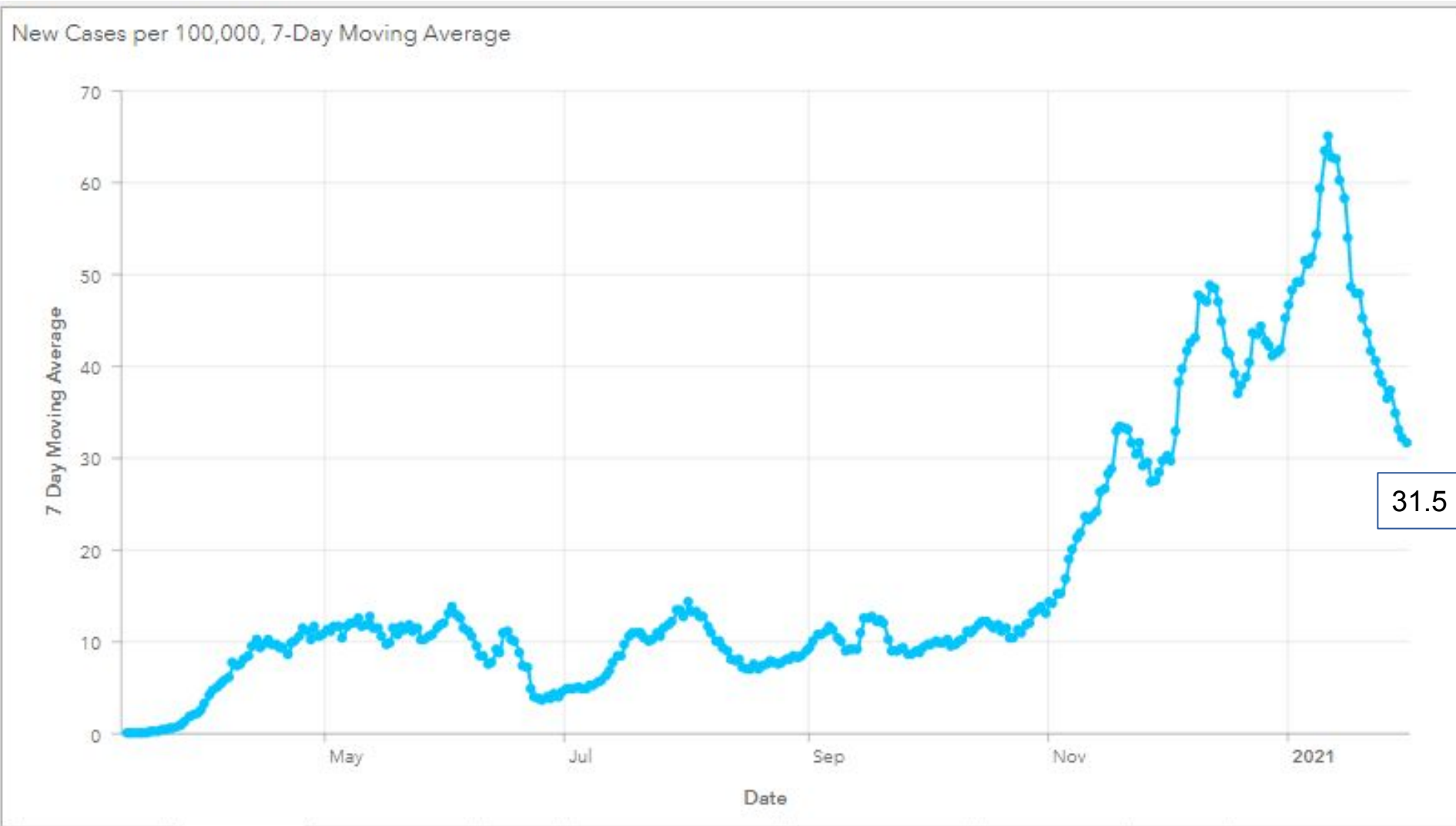
Cases in School

- When a case is identified, their cohort will be assessed for quarantine
 - Classroom
 - Work area (staff only)
 - Transportation
 - Extracurricular
- Quarantine will be managed by the Health Department and last 14 days
- Testing will be offered but does not shorten the length of quarantine
- Case can be community acquired or school acquired – may not always be clear

Vaccines

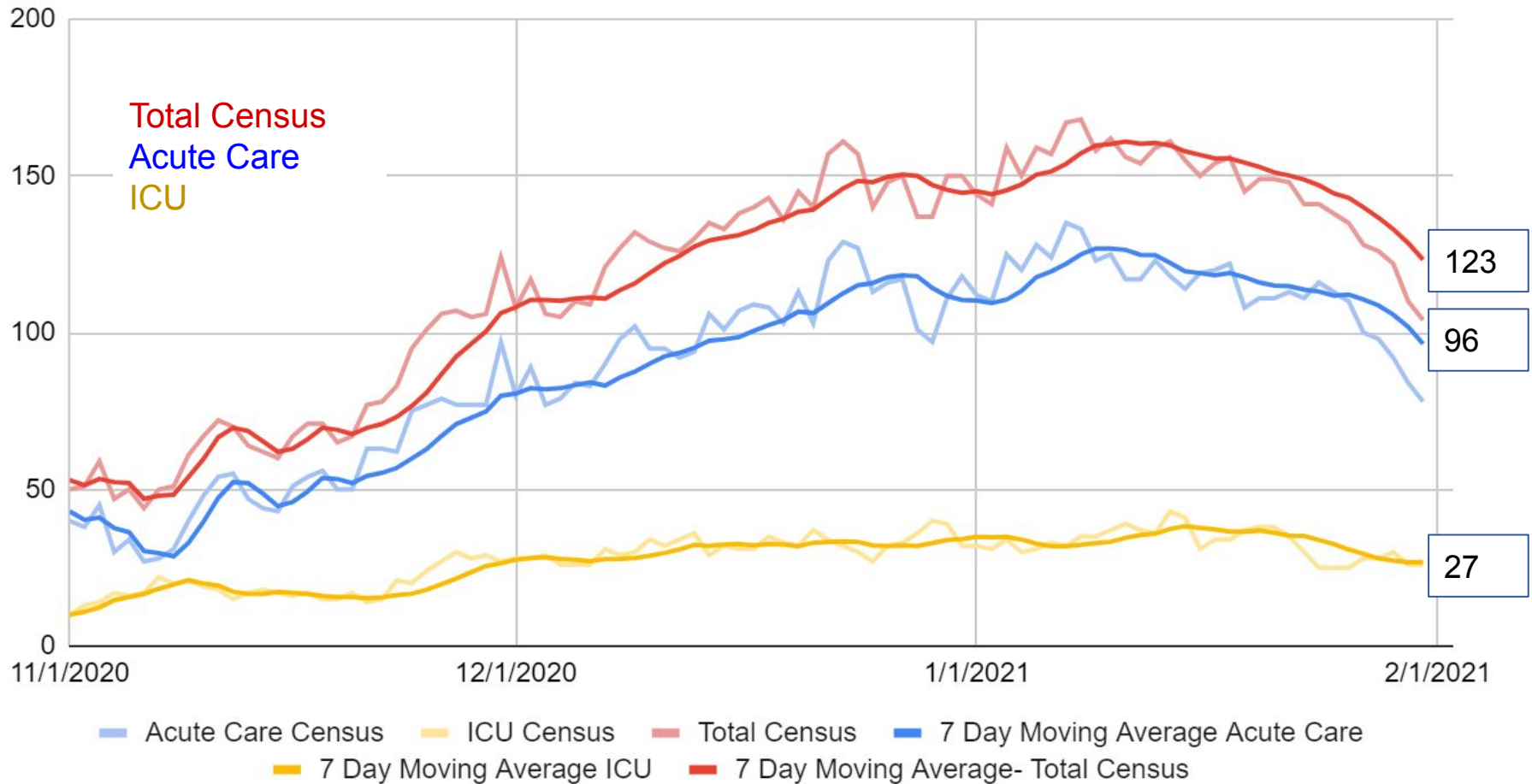
- Educators are in Phase 1b
- Beginning Educators next week (week of Feb 8)
- Pace of vaccination based on vaccine availability to Health Department

New Cases per 100,000 per day Anne Arundel County



Hospital COVID Census - Anne Arundel

COVID-19 Patients by Day, Acute Care and ICU



Current Status in the County

- Decreasing case rate
- Decreasing hospitalizations
- Past peak hospitalizations
- Restrictions relaxed due to improving conditions