



Re: Recommendations for Summit County K-12 School Reopening

The mission of Summit County Public Health (SCPH) is to protect and promote the health of the entire community through programs and activities designed to address the safety, health and well-being of the people who live in Summit County. Since the beginning of the Covid-19 pandemic, SCPH has worked to implement disease mitigation strategies and provide guidance and technical assistance to our communities.

SCPH understands the importance of students being in school for their academic advancement, social development, and well-being. However, these are unprecedented and uncertain times. The novel Covid-19 virus continues to pose a significant risk to our students, teachers, staff and the community.

SCPH has worked closely with schools to answer questions, provide solutions and create individualized approaches to the unique challenges and situations that exist across the county. SCPH has reviewed the school districts' plans and believes that the school districts took great measures to come up with the most safe and effective way to get the students back in school.

Could reopening schools lead to increased rates of Covid-19?

According to the Centers for Disease Control and Prevention, there is evidence which suggests that reopening schools may be low risk in communities with low Covid-19 transmission rates. At this time, Summit County, Ohio is not experiencing low transmission rates. The CDC goes on to say that schools reopening may further increase spread in communities where transmission is already high. Based on the data outlined below, the opinion of Summit County Public Health is that our community is actively experiencing significant and sustained community transmission of Covid-19. While it is less likely that children will experience adverse outcomes like death, it does increase the likelihood of infection.

What data does SCPH consider in making these recommendations?



- Summit County: From 6/20 to 7/20, the 7-day average case count increased from 9.3 to 36.6 cases/per day; from 7/1 to 7/31, the 7-day average case count increased from 23.9 to 48.9 cases/ per day.
- In Summit County 93% of cases are in non-congregate settings meaning that 93% of cases are from community spread; During the four week period of July 8 to August 4, 2020 only 82 of 1126 cases have been linked to congregate living settings;
- In the past 14 days (July 26 to August 8, 2020) the new cases per capita was 117 cases per 100,000. This was over two times the 50 cases per 100,000 threshold designated by the Ohio Department of Health as an indicator of high COVID-19 community transmission.
- From 7/7 to 8/8, the seven-day average case rate/100,000 is remaining steady or increasing and is in the 6-9 cases/100,000 range. This indicates wide community spread. In other countries that are seeing successful school reopening, this rate is around 3 cases/100,000 or less.



- There have been 271 children and teens aged of 19 or less that have been reported as Covid-19 cases in Summit County;
- SCPH has investigated multiple situations and outbreaks with reported Covid-19 case(s) coaching and/or attending practices, and these cases were at times involved with other activities (e.g. dance, cheerleading, multiple teams);
- Testing availability is limited for children under the age of 18;
- COVID-19 hospitalizations, ICU admissions, and COVID-19 patients on ventilator support are all steady or rising;
- Summit County has been in the red or orange categories In the Ohio Public
 Health Advisory System throughout July. In both the red and orange
 categories, the recommendation is to decrease interactions outside of the
 household.

Due to the status of Covid-19 in Summit County, SCPH has identified modes of learning and sorted them based on risk-level. Ultimately, it is the decision of each district regarding the mode of learning selected, and Public Health supports districts that choose a remote, in-person and/or a hybrid option.

Below are our recommendations in order of risk for disease spread and transmission for the 2020/2021 school year:

Preferred Option #1 - Lowest Risk for Disease Transmission and Spread

- •SCPH strongly recommends that Summit County K-12 schools begin the 2020-2021 academic year in a remote learning environment as the preferred option for students. SCPH recognizes that some students with special education, intervention, and social/emotional learning needs are best taught in an in-person environment and these students should have access to those services in small, in-person group settings during this remote learning period.
- •SCPH offered recommendations to schools on July 24th regarding the delay of fall contact sports interteam play until October 1, 2020, that are identified as moderate or high risk where social distancing and masking are difficult.

Option #2 - Reduced Risk for Disease Transmission and Spread

- •A hybrid model of learning, where children split time between home and school for remote and in person learning. This could include modified class sizes to accommodate different learning models by grade level which meet the CDC guidelines.
- •This model should include mandatory masks for all students who do not have an exemption, a rigorous cleaning schedule and social distancing of 6 ft as much as possible. Districts should also follow ODE, ODH and CDC guidance. See See SCPH attached summary.

Option #3 - Highest Risk for Disease Transmission and Spread

•In-person education includes school-aged children in school 5 days a week with no modification to class size. This model presents the highest amount of risk and extreme precautions should be taken to implement disease mitigation strategies such as mandatory mask wearing, rigorous cleaning, and social distancing of 6 ft as much as possible.

What can we provide weekly to schools and communities to monitor the status of these options?

SCPH will continue to evaluate surveillance data and communicate observations with school partners as the school year progresses. SCPH will monitor the following:

- Overall level of risk as defined by the Ohio Public Health Advisory Alert System, including the 7 indicators listed below:
 - New cases per capita
 - Sustained increase in new cases
 - Proportion of cases not in a congregate living settings
 - Sustained increase in ED visits for COVID-like illness
 - Sustained increase in outpatient visits for COVID-like illness
 - Sustained increase in COVID hospital admissions
 - Intensive Care Unit bed occupancy
- Weekly trends in overall number of cases for children
- Weekly trends in the number of cases associated with schools/childcare/sport settings
- Significant increase in capacity of testing for youth

When can students return to school?

In order to recommend the safe return of all students, SCPH would need to see the majority of the following indicators change:

- 1) Sustained declining cases in Summit County for ideally for 4-6 weeks;
- 2) A move to a yellow- risk status as defined by the Ohio Public Health Advisory System;
- 3) Increased testing capacity for youth:
- 4) A decrease in hospitalizations, which is a marker for community spread.

School districts need to remain nimble and to modify strategies on a real time basis that assures the safety of everyone. By following these recommendations, we not only protect the students, but we protect the school staff and student's family members as well. We appreciate your willingness to review our considerations for the safety of all.

Ohio COVID-19 Risk Level Guidelines for the Public

LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4		
Public Emergency Active exposure and spread. Follow all current health orders.	Public Emergency Increased exposure and spread. Exercise high degree of caution. Follow all current health orders.	Public Emergency Very high exposure and spread. Limit activities as much as possible. Follow all current health orders.	Public Emergency Severe exposure and spread. Only leave home for supplies and services. Follow all current health orders.		

LEVEL 1-4 REQUIRE COMPLIANCE WITH ALL HEALTH ORDERS

Over 60% of Ohioans are considered high-risk based on CDC guidance. High-risk individuals* are at an increased risk of severe illness and should take every precaution to guard against contracting COVID-19, including following higher risk level guidance outlined below. Consult a doctor about your risk.

LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4
 Conduct a daily health/symptom self-evaluation and stay at home if symptomatic.** Maintain social distancing of at least 6 feet from non-household members. Wear face coverings in public, especially when social distancing is difficult to maintain. Increase caution when interacting with others not practicing social distancing or wearing face covers. Avoid traveling to high-risk areas. Follow good hygiene standards, including: Wash hands frequently with soap and water for at least 20 seconds. Use hand sanitizer frequently. Avoid touching your face. Cover coughs or sneezes (e.g., into a tissue, or elbow). Symptom self-evaluation monitoring. 	 Same guidelines as in Level 1. Avoid contact with anyone who is considered high-risk. High-risk individuals* should take extra care to follow precautions. Decrease in-person interactions outside household. Seek medical care as needed, but limit or avoid unnecessary visits to hospitals, nursing homes, and residential care facilities to see others as much as possible. 	Same guidelines as in Levels 1-2. Decrease in-person interactions with others. Consider necessary travel only. Limit attending gatherings of any number.	Same guidelines as in Level 1-3. Stay at home/ necessary travel only.

Households should assume that if one person is sick every person living there is as well and should take appropriate measures to control the spread, which should include self-quarantining and contacting a doctor.

Click here for public health orders and sector specific guidance

The public health orders in place serve as the baseline for what counties must do to combat this disease. If local officials determine it's necessary to implement additional safeguards, they can and should to benefit everyone.

*Per CDC, among adults the risk for severe illness from COVID-19 increases with age, with older adults at highest risk. People of any age with the following conditions are at increased risk of severe illness: chronic kidney disease; chronic obstructive pulmonary disease; weakened immune system from solid organ transplant; obesity (body mass index of 30 or higher); serious heart conditions such as heart failure, coronary artery disease, or cardiomyopathies; Sickle cell disease; and Type 2 diabetes mellitus. Children who are medically complex, who have neurologic, genetic, metabolic conditions, or who have congenital heart disease are at higher risk for severe illness from COVID-19 than other children. People who need to take extra precautions include racial an a ethnic minority groups; people experiencing homelessness; women who are pregnant or breastfeeding; people with disabilities; and people with developmental and behavioral disorders. More information is available at https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/index.html.

**Per CDC, symptoms include fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, and diarrhea. This list of symptoms can change as more is learned about COVID-19, and CDC updates this list on its website at https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html.









7/1/2020