



Back to School 2021-2022 With COVID-19 May 5, 2022

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Medical Director
CMDHD/MMDHD/DHD#10

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!

Excellent Blog Post from PolicyLab* at Children's Hospital of Philadelphia

COVID-19 Outlook: Forging Forward from the Pandemic

<https://policylab.chop.edu/blog/covid-19-outlook-forging-forward-pandemic>

- ▶ Early in the pandemic, our primary defense against COVID-19 was to limit person-to-person transmission via social distancing and mask use.
- ▶ These strategies were necessary to buy time and save lives until more sustainable interventions, such as vaccinations and improved treatment strategies, were available.
- ▶ In 2021, testing became more widely available and effective vaccines were offered to all adults.
- ▶ Now well over a year into vaccine availability and outreach, population immunity from vaccination coupled with immunity from natural infection is great enough that we believe fewer population-wide public health measures are needed.

**PolicyLab <https://policylab.chop.edu/> is a Center of Emphasis within Children's Hospital of Philadelphia Research Institute, one of the largest pediatric research institutes in the country. The mission of PolicyLab at Children's Hospital of Philadelphia (CHOP) is to achieve optimal child health and well-being by informing program and policy changes through interdisciplinary research.*

Blog Post from PolicyLab at Children's Hospital of Philadelphia, continued

- ▶ It is true that many of us have family members, friends and colleagues who are now becoming infected.
- ▶ They, on average, are not experiencing serious disease and are not requiring hospitalization.
- ▶ We can continue thoughtful reductions in our restrictions and avoid reinstating requirements unless hospitalizations begin to rise significantly.
- ▶ Simultaneously, we should continue to focus on optimizing resources that **bolster vaccination** rates and **improve awareness of newly available effective treatments** across all communities.
- ▶ This is not to say, however, that there are no more uncertainties with this pandemic.
- ▶ We will continue to monitor closely for evidence of worrisome trends in the epidemiology of hospitalizations related to COVID-19.
- ▶ Researchers will continue to work to optimize vaccines, provide data to inform vaccine boosting schedules and bring novel therapies to market.
- ▶ Make no mistake, SARS-CoV-2, the virus that causes COVID-19, will continue to exist.

Blog Post from PolicyLab at Children's Hospital of Philadelphia, continued

- ▶ Today's most frequently asked question is how communities should host traditional year-end events for youth such as prom and graduation.
- ▶ Our response has been: "have prom, have graduation."
- ▶ It is still reasonable and logical for school communities to seek outdoor or larger venues to allow people space to congregate—leveraging opportunities for outdoor ventilation and limiting indoor overcrowding is beneficial to reducing the transmission of any respiratory virus.
- ▶ Should clustered outbreaks occur, communities can be notified, and **testing** can be offered.
- ▶ The potential for clustered outbreaks should no longer be a deterrent for hosting these events.
- ▶ It's important that our children and families get back to the experience of normal, and we must redouble our efforts to catching kids up in school and promoting the resilience and well-being of our school communities as they emerge from the pandemic.

Sent April 29th:



COVID-19 K-12 School Testing Update

End of School Year Test Count

Who: Schools, ISDs, and School Districts

What: MDHHS is asking schools, districts, and ISDs to report year end COVID-19 **Antigen and OTC test** inventory and test expiration date information.

When: By Monday, **June 6th, 2022**

Why: To ensure resources can be utilized appropriately prior to expiry

How: Test inventory and expiration details can be provided through the [MI Safe Schools Antigen Inventory form](#)

Expired Test Kit Reporting

Schools can report expired test kits on the [School DISTRICT Antigen COVID Test Ordering Form](#). Schools **do not** have to order tests to complete the form and indicate expired tests kits, the order quantity would be 0. Schools will be asked to **only report expired test kits beginning January 1, 2022**, and only tests that have expired since the last order, ensuring the expired test kits are only reported once.

NOTE:
Unused test kits can be disposed of as regular waste

For questions about COVID-19 testing, please email

MDHHS-COVIDTestingSupport@michigan.gov

MDHHS COVID-19 Testing Collection & Coordination Team Office Hours

MDHHS has revised the Testing Collection & Coordination Team Office Hours from twice weekly to once weekly. The office hours schedule can be found below, along with the links to the corresponding zoom meetings.

- ▶ **TCC Office Hours Schedule** <https://www.michigan.gov/coronavirus/resources/k-12-school-opening-guidance/mi-safe-schools-testing-program/content/enrollment-materials>
- ▶ 1st and 2nd Monday of every month: [TCC Monday Office Hours Link](#)
- ▶ 3rd and 4th Friday of every month: [TCC Friday Office Hours Link](#)
- ▶ **Agenda for TCC Office Hours**
 - ▶ Review Antigen and OTC Test Ordering Process
 - ▶ Review Antigen Reporting Process
 - ▶ COVID-19 Testing Updates
 - ▶ HRA Updates
 - ▶ Q & A Session

Johns Hopkins Center for Health Security COVID-19 Testing Toolkit FAQ

[New Tool Added to the Johns Hopkins Center for Health Security COVID-19 Testing Toolkit](#)

The new Frequently Asked Questions (FAQs) tool will help answer users' frequent questions about COVID-19 testing.

Questions can be browsed by 8 topics or 54 keywords. Questions and answers are regularly updated to reflect new information, federal guidance, and topics of interest.

Access the FAQs here: <http://covidtestinganswers.org/>



Testing and treatment are important long-term strategies

**Don't Bring COVID-19 Home.
Get Tested Today At No Cost.**

Anyone with signs or [symptoms of COVID-19](#) should get tested, even those who are fully vaccinated or have already had COVID-19. There are many locations to get tested at no cost.

Call the COVID-19 Hotline at 888-535-6136, press 2 for help finding a test site.

[Get free at-home COVID-19 tests from COVIDTests.gov](#)

[Free at-home COVID-19 tests at participating libraries](#)

[Find a Test Site >](#)

[Self-Testing Fast Facts >](#)

[Public Guidance For At Home COVID-19 Testing >](#)

[Insurance Coverage for At-Home COVID-19 Tests >](#)

Medical Providers & Congregate Care Facilities

Find Michigan laboratories available to offer COVID-19 testing.

[Find a Lab >](#)

Michigan's Plan to Increase Testing

Learn more about Michigan's plan to increase testing and how they will [accomplish those plans](#).

[Michigan's Plan >](#)

Add New Testing Site to the Finder Tool

Are you a new COVID-19 testing site in Michigan? Get your COVID-19 testing site added to the test site finder tool.

[Add New Testing Site >](#)

Update Information on the Finder Tool

Are you already listed as a COVID-19 testing site in Michigan? Update your existing information found on the test site finder tool.

[Update Testing Site Info >](#)

State of Michigan Antigen Testing

Want to bring rapid COVID-19 testing to your school, long-term care facility, or neighborhood site? Learn more about free and low-cost ways to bring rapid testing to your community.

[Antigen Testing >](#)

Find a Test To Treat location

Use the [Test To Treat \(https://covid-19-test-to-treat-locator-dhhs.hub.arcgis.com\)](https://covid-19-test-to-treat-locator-dhhs.hub.arcgis.com), or call 1-800-232-0233 (TTY 1-888-720-7489) to find a testing location that can provide treatment if you test positive

COVID-19 Treatments and Medications

<https://www.cdc.gov/coronavirus/2019-ncov/your-health/treatments-for-severe-illness.html>

List of medical conditions more likely to get very sick with COVID-19 <https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html>

DON'T DELAY: TEST SOON AND TREAT EARLY

| COVID-19 |

If you are at high risk of getting very sick from COVID-19, and test positive, treatment may be available.



Get tested as soon as possible after your symptoms start.

Contact your healthcare provider right away if your result is positive.



Don't delay. Treatment must be started early to work.



cdc.gov/coronavirus

December 2021 through February 2022 saw COVID-19-associated hospitalization rates in children 5-11 that were twice as high among unvaccinated than in vaccinated children

- ▶ During the period of Omicron predominance (Dec 19, 2021–Feb 28, 2022), COVID-19-associated hospitalization rates in children aged 5–11 years were approximately 2X as high among unvaccinated as among vaccinated children
 - ▶ Thirty percent of hospitalized children had no underlying medical conditions, and 19% were admitted to an intensive care unit
 - ▶ Children with diabetes and obesity were more likely to experience severe COVID-19
- ▶ Increasing COVID-19 vaccination coverage among children aged 5–11 years, particularly among racial and ethnic minority groups disproportionately affected by COVID-19, can prevent COVID-19-associated hospitalization and severe outcomes



First influenza-associated pediatric death in Michigan this season

April 15, 2022

A child from Kalamazoo County who contracted Influenza A/H3. Nationally, there have been at least 23 influenza-associated pediatric deaths reported during the current flu season (as of 4/23).

Currently, for the 2021-2022 flu season, only 32% of Michigan residents have been vaccinated against flu.

According to data from the Michigan Care Improvement Registry, flu vaccine coverage among children ages six months through 17 years is 5.4% lower for the 2021-2022 flu season (25.8%) compared to the 2020-2021 flu season (31.2%).

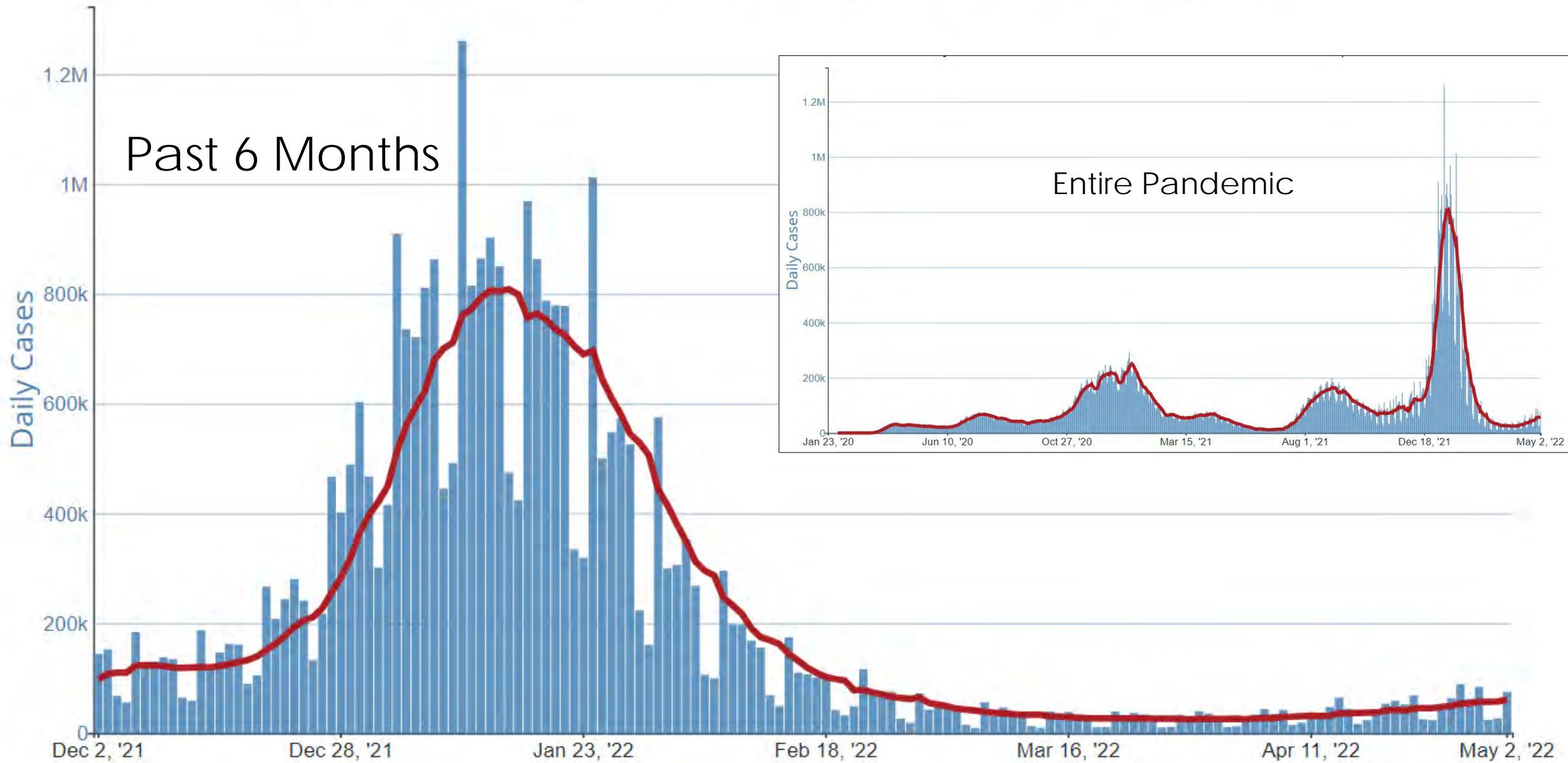
See the most up to date data at

<https://www.mistartmap.info/>

AND

<https://www.cdc.gov/coronavirus/2019-ncov/your-health/covid-by-county.html>

Daily Trends in Number of COVID-19 Cases in The United States Reported to CDC



https://covid.cdc.gov/covid-data-tracker/#trends_dailycases

Daily cases per million population

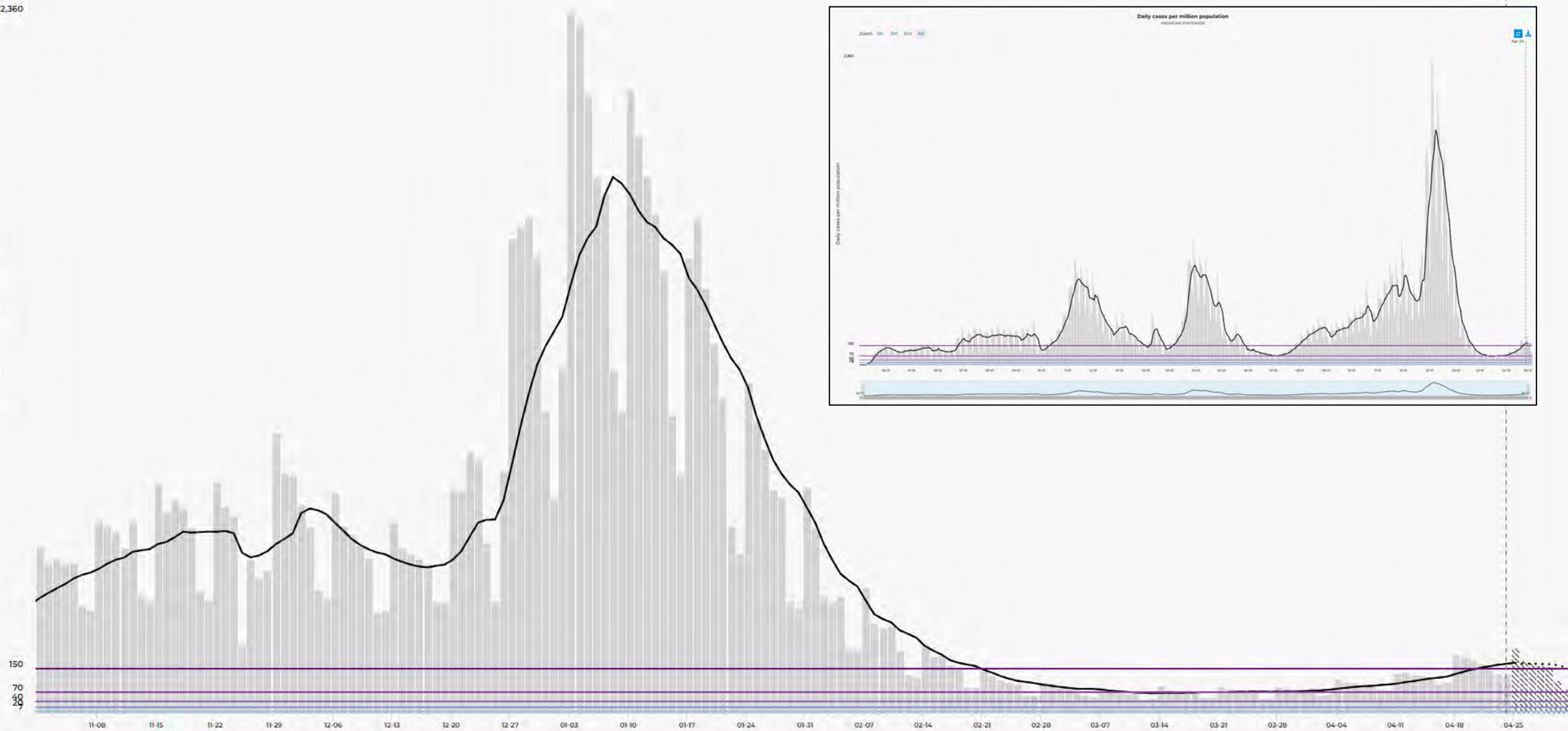
MICHIGAN STATEWIDE

Zoom 1m 3m 6m All

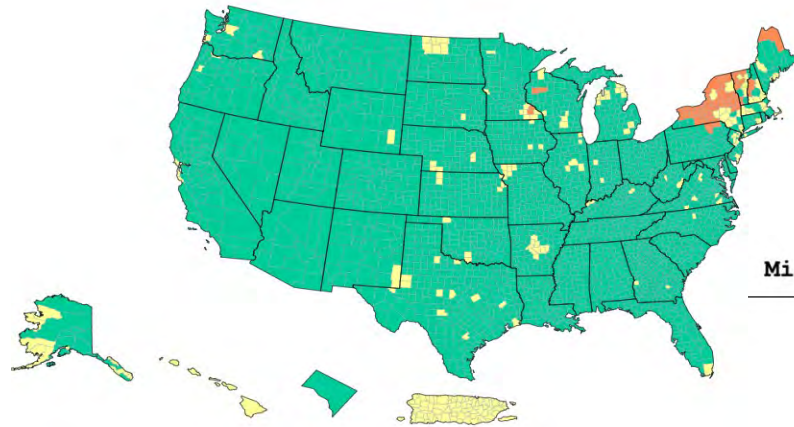
Apr 24

2,360

Daily cases per million population



<https://www.mistartmap.info/mism-indicators>

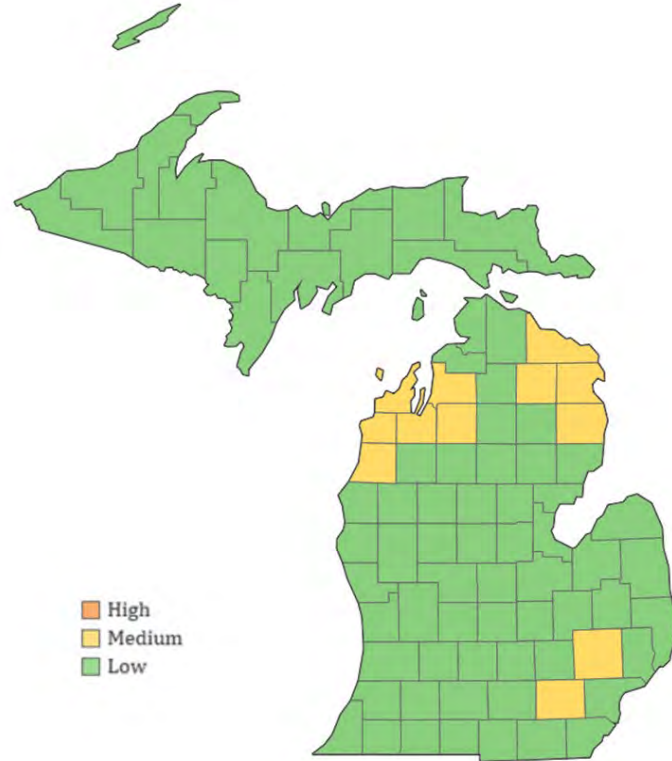


● Low
 ● Medium
 ● High
 ● No Data

Wed May 04 2022 09:09:41 GMT-0400

Michigan COVID-19 Community Levels by County

Date
April 28, 2022

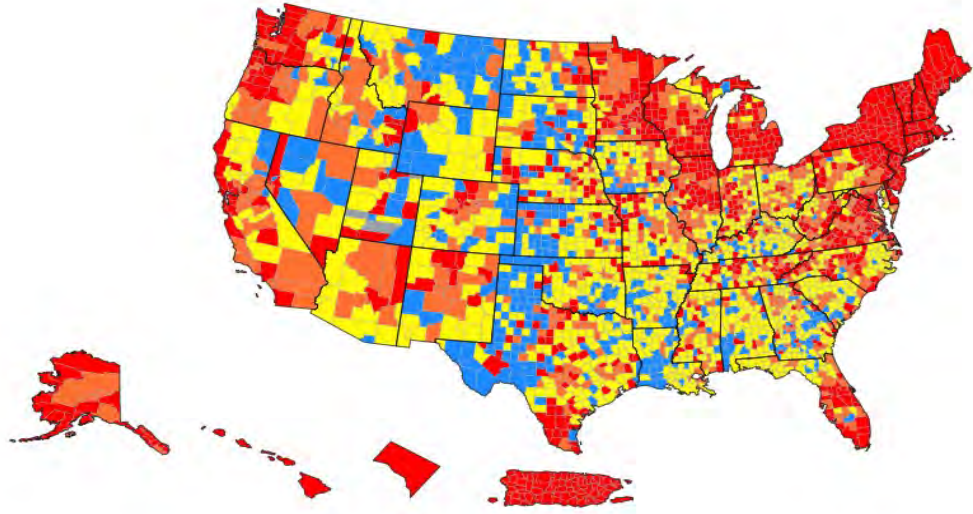


■ High
■ Medium
■ Low

<https://www.michigan.gov/coronavirus/>

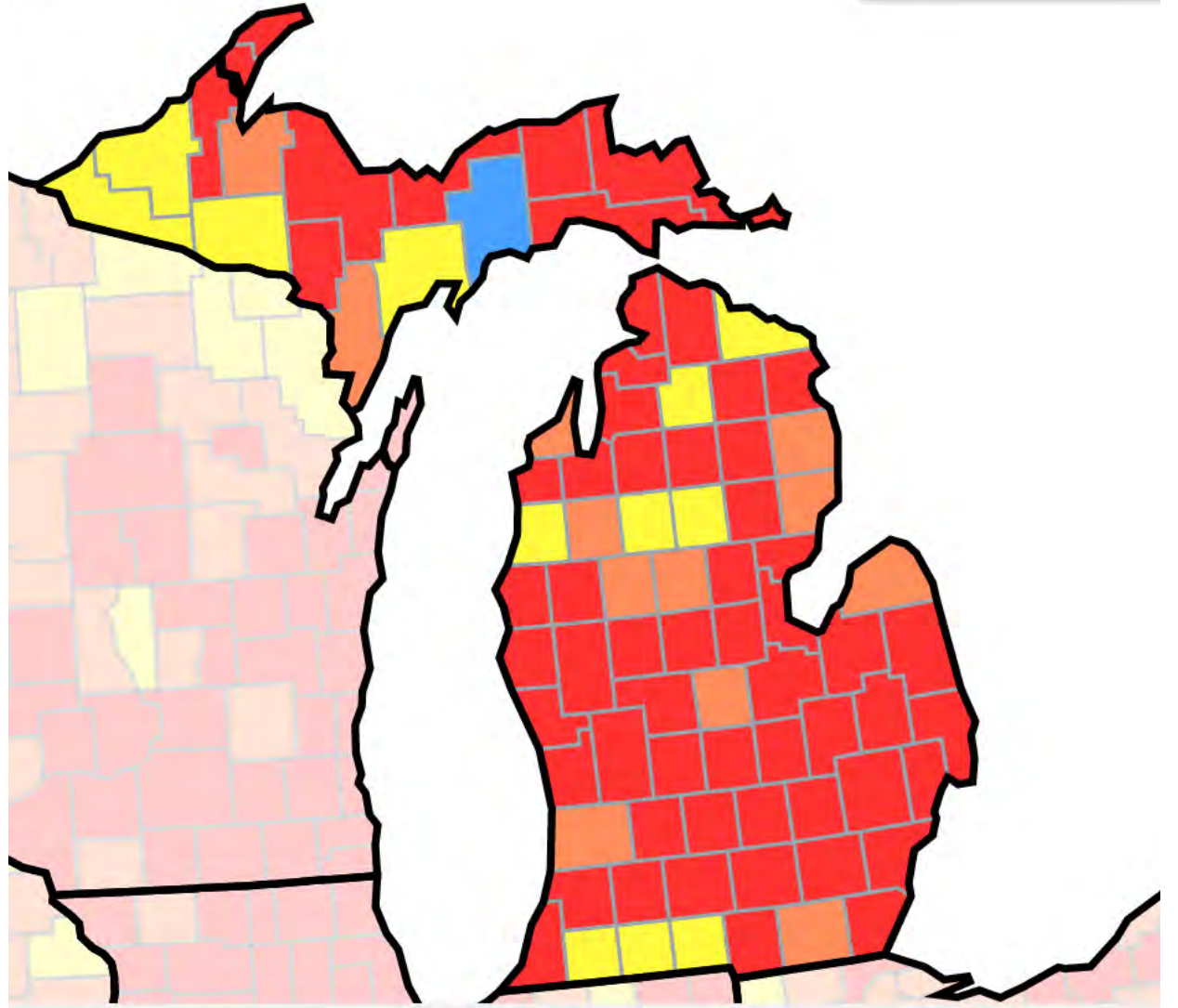
County	New COVID-19 Cases Per 100,000 people in the past 7 days	New COVID-19 admissions per 100,000 population (7-day total)	Percent of staffed inpatient beds occupied by COVID-19 patients
Arenac	67.2	2.3	0.7%
Clare	45.2	5.7	2.0%
Clinton	136.9	4.0	3.1%
Crawford	64.2	8.0	2.8%
Gladwin	55.0	5.7	2.0%
Gratiot	59.0	4.5	2.1%
Isabella	68.7	5.7	2.0%
Kalkaska	94.3	13.6	1.8%
Lake	67.5	3.6	6.9%
Manistee	40.7	13.6	1.8%
Mason	92.6	5.4	1.5%
Mecosta	80.6	4.5	2.1%
Missaukee	19.8	3.6	6.9%
Montcalm	48.5	4.5	2.1%
Newaygo	59.2	5.4	1.5%
Oceana	52.9	5.4	1.5%
Osceola	25.6	3.6	6.9%
Roscommon	33.3	8.0	2.8%
Wexford	59.5	3.6	6.9%

Community Transmission of All Counties in US



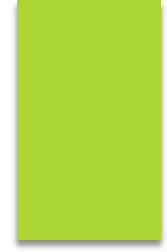
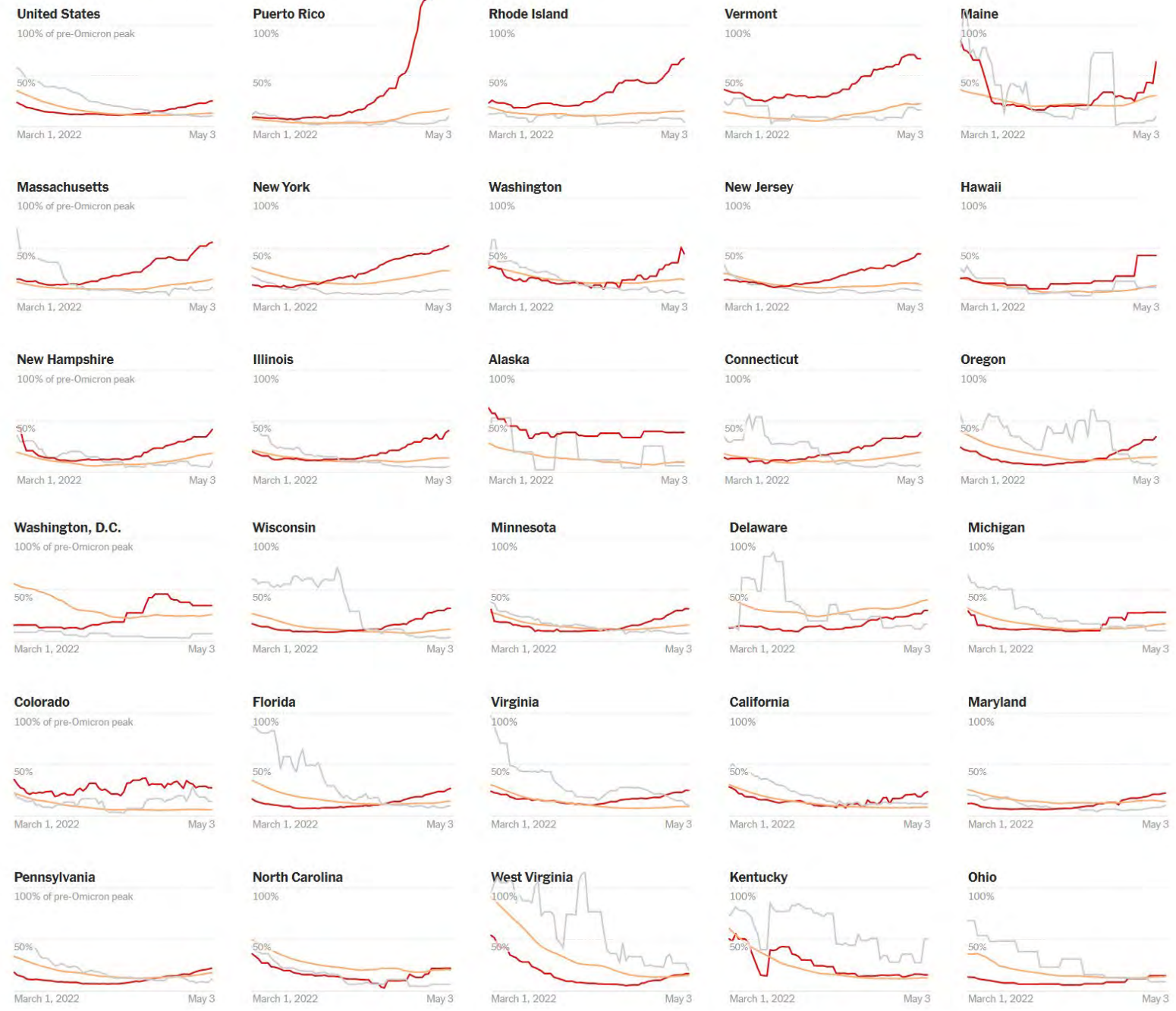
● High ● Substantial ● Moderate ● Low ▨ No Data

Wed May 04 2022 09:07:32 GMT-0400



● High ● Substantial ● Moderate ● Low ▨ No Data

■ Cases ■ Hospitalizations ■ Deaths



Each chart shows how these three metrics compare to the corresponding peak level reached nationwide before Omicron became the dominant variant (January 2021).

For example, a state's case line exceeds 100 percent on the chart when its number of cases per capita exceeds the highest number of U.S. cases per capita reached in January 2021.

<https://www.nytimes.com/interactive/2021/us/covid-cases.html>



MI COVID Response Data and Modeling Update-May 3rd

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

Recent statewide trends

Statewide trends

million
cases per million

Cases: 94.5
Hosp. rate: 1.5%
Deaths: 0.0

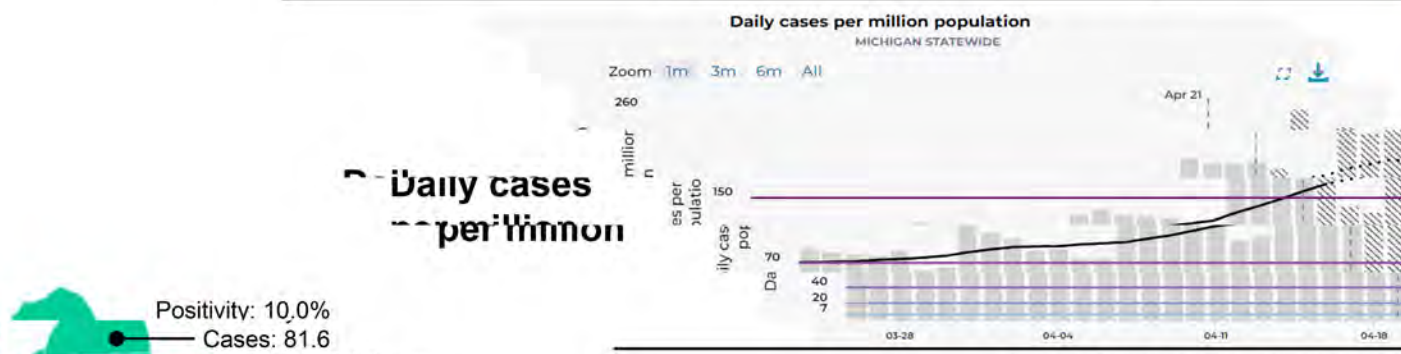
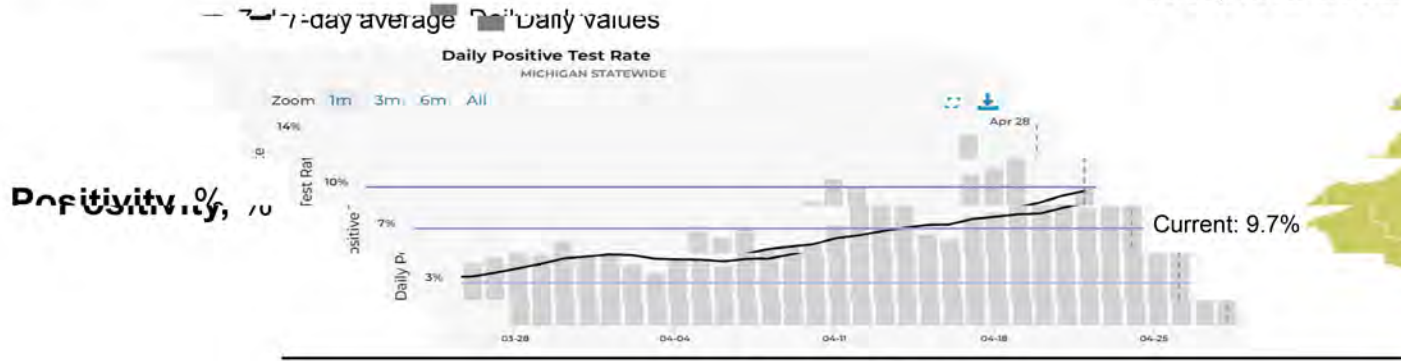


Positivity: 11.3%
Cases: 74.0
Hosp. rate: 3.7%
Deaths: 1.7

Positivity: 11.7%
Cases: 70.3
Hosp. rate: 2.9%
Deaths: 0.4

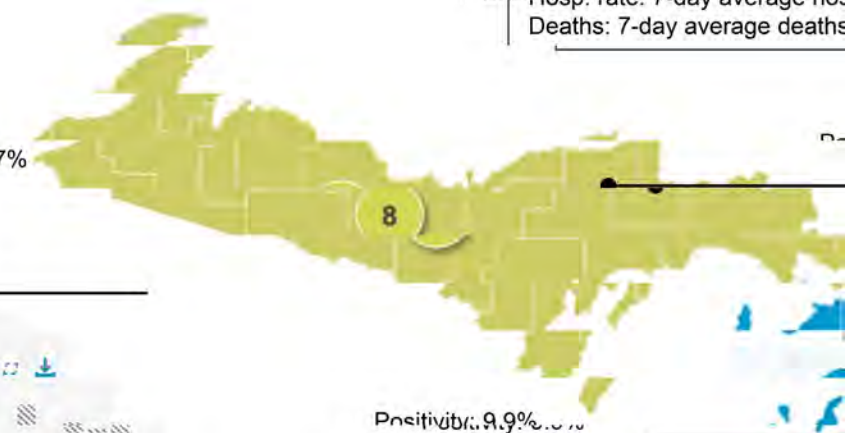
Positivity: 10.0%
Cases: 81.6
Hosp. rate: 2.4%
Deaths: 1.4

Positivity: 10.4%
Cases: 126.7
Hosp. rate: 4.0%
Deaths: 0.3



MERC Regional breakdown: Positivity, cases, hospitalization rate, and deaths

Positivity: 7-day average positivity, %
Cases: 7-day average cases per million
Deaths: 7-day average deaths per million



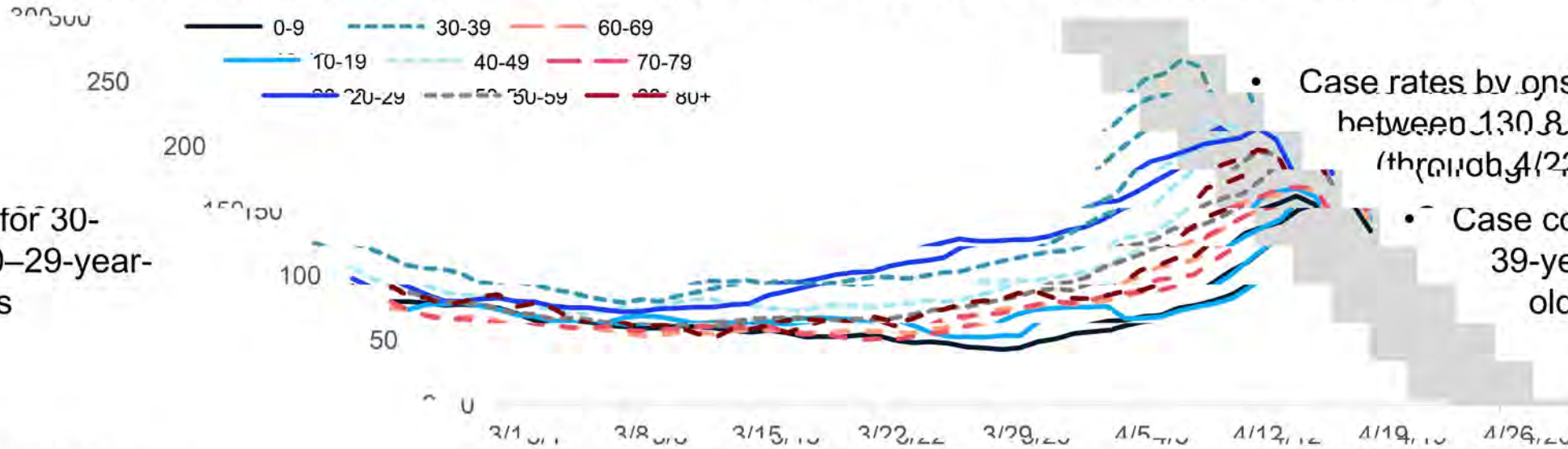
Positivity: 9.9%
Cases: 96.4
Hosp. rate: 2.4%
Deaths: 0.6

Positivity: 13.2%
Cases: 100.0
Hosp. rate: 3.0%
Deaths: 0.8

Source: <https://mistanmap.info/>

Case rates are plateaued or increasing for stratified groups

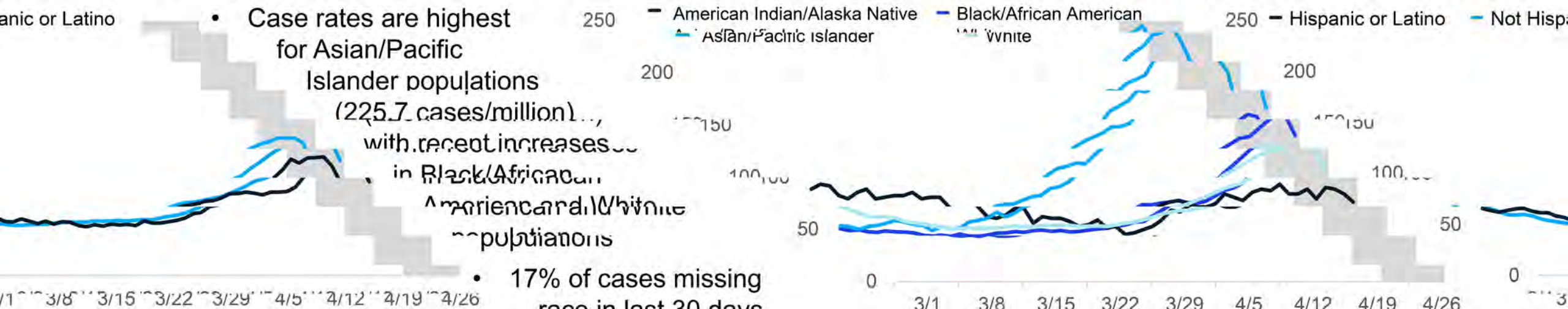
Daily number of confirmed and probable cases per million by age group (by onset date), Michigan, 2020



groups are...
per million...
s are highest for 30-
followed by 20-29-year-
ear age groups

- Case rates by onset date for all age groups peaked between 130.8 and 229.2 cases per million (through 4/22/20).
- Case counts and case rates for 39-year-olds this week, 100 cases and 225.7 cases per million, are the highest for 39-year-olds and the 40-49-year-olds.

Race and ethnicity categories



- Case rates are highest for Asian/Pacific Islander populations (225.7 cases/million), with recent increases in Black/African American, American and White populations.

- 17% of cases missing race in last 30 days

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

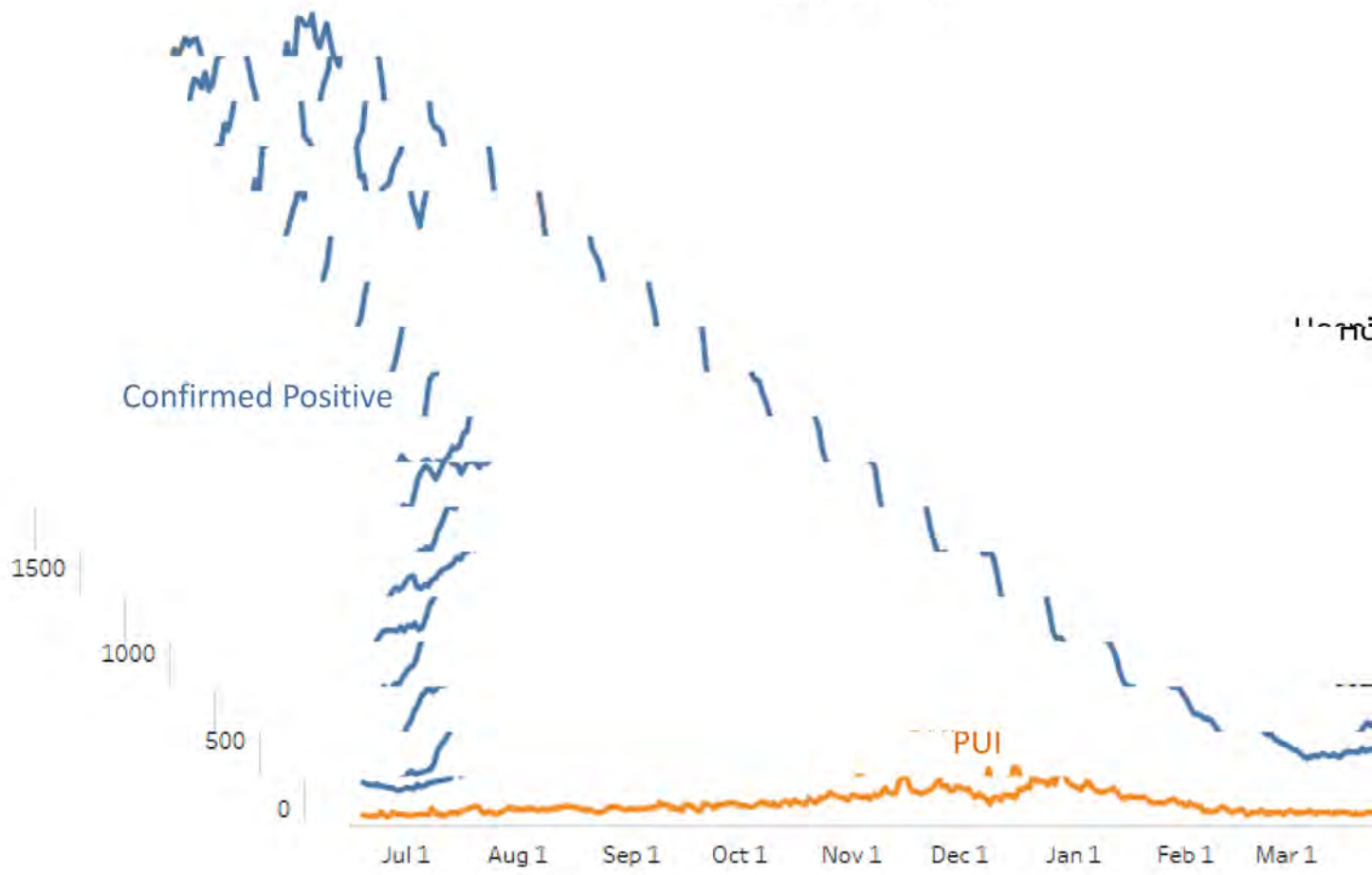
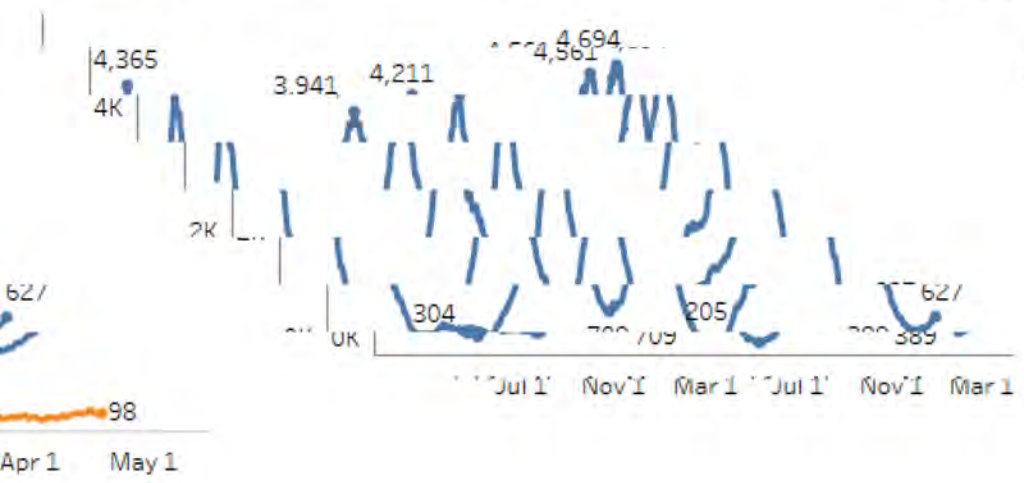
Statewide Hospitalization Trends: Total COVID+ Census

Increased
infections

Hospitalization Trends 7/1/2021 – 5/2/2022
Confirmed Positive & Persons Under Investigation (PUI)

The COVID+ census in hospitals has increased
10% since last week (previously was 18%).

Hospitalization Trends (beginning March 2020)



Statewide Hospitalization Trends: ICU COVID+ Census

Us has
4%. There...
cross the state.

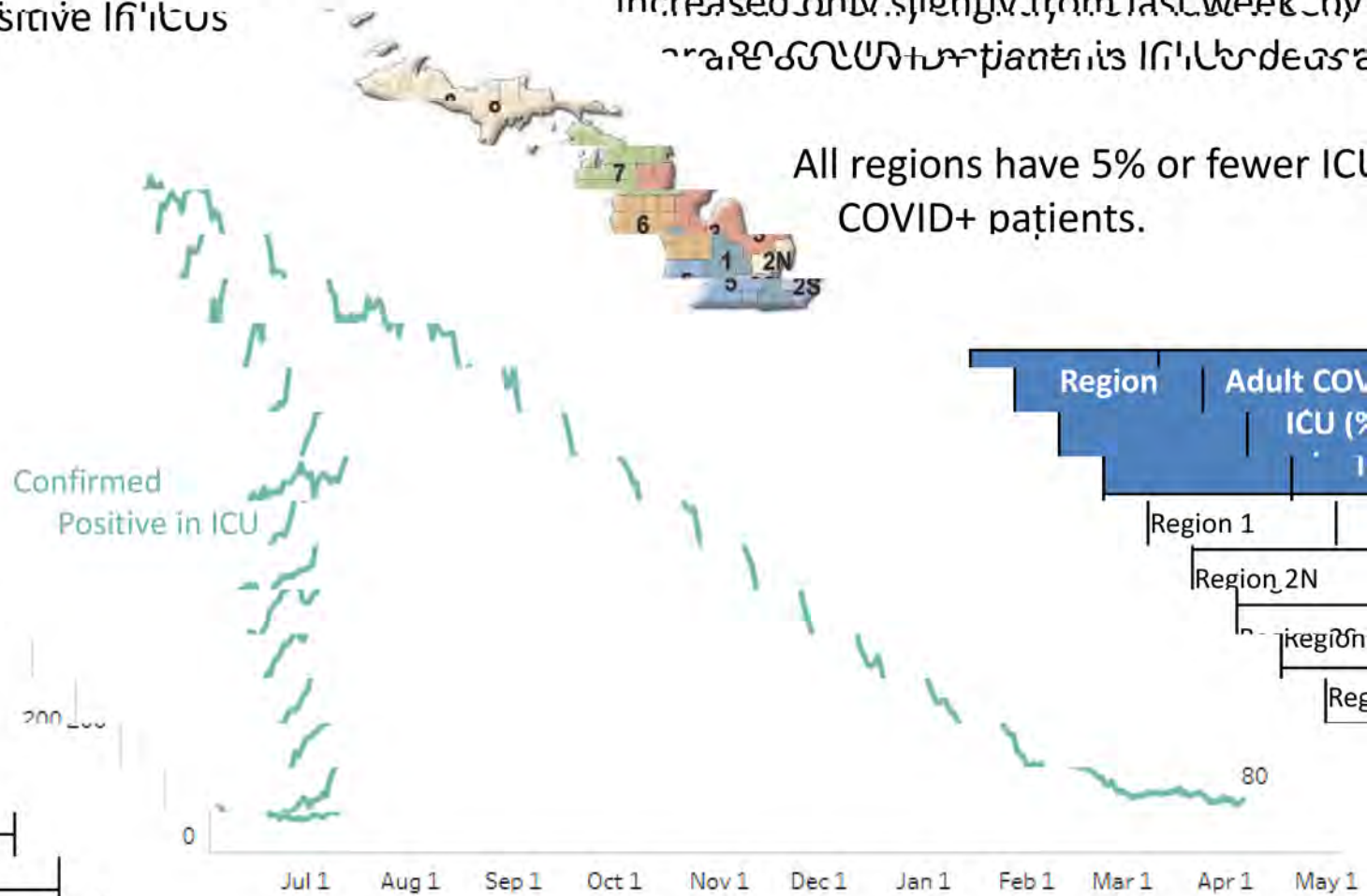
Hospitalization Trends 7/1/2023 - 5/2/2023
Continued positive ICU census

Overall, the census of COVID+ patients in ICU increased only slightly from last week by...
...positive ICU census

ICU beds filled with

All regions have 5% or fewer ICU COVID+ patients.

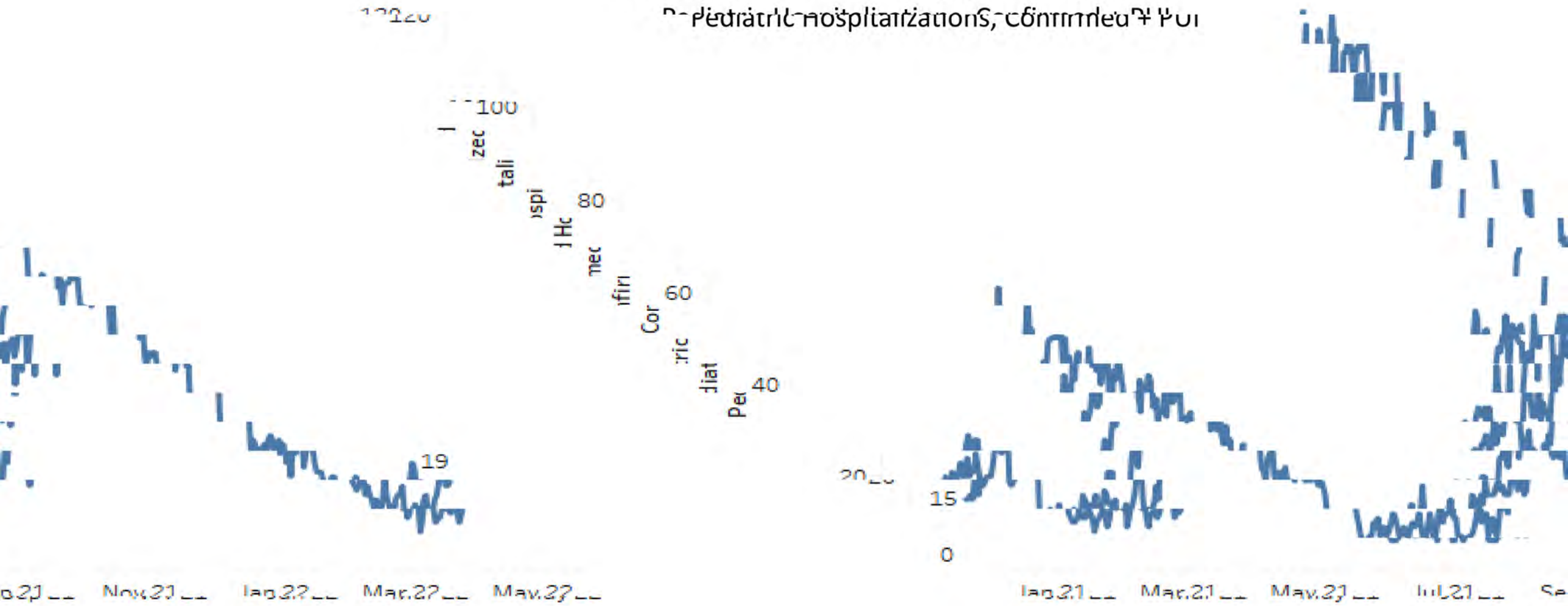
Region	COVID+ in ICU (% Δ from last week)	ICU Occupancy	% of ICU beds COVID+
Region 1	9 (80%)	83%	5%
Region 2	21 (5%)	70%	4%
Region 3	4 (-43%)	87%	1%
Region 5	5 (25%)	69%	3%
Region 6	6 (10%)	67%	3%
Region 7	4 (33%)	79%	3%
Region 8	0 (-100%)	54%	0%



Statewide Hospitalization Trends: Pediatric COVID-19 Census

Hospitalization Trends 1/1/2021 - 5/2/2022

Pediatric hospitalization confirmed cases

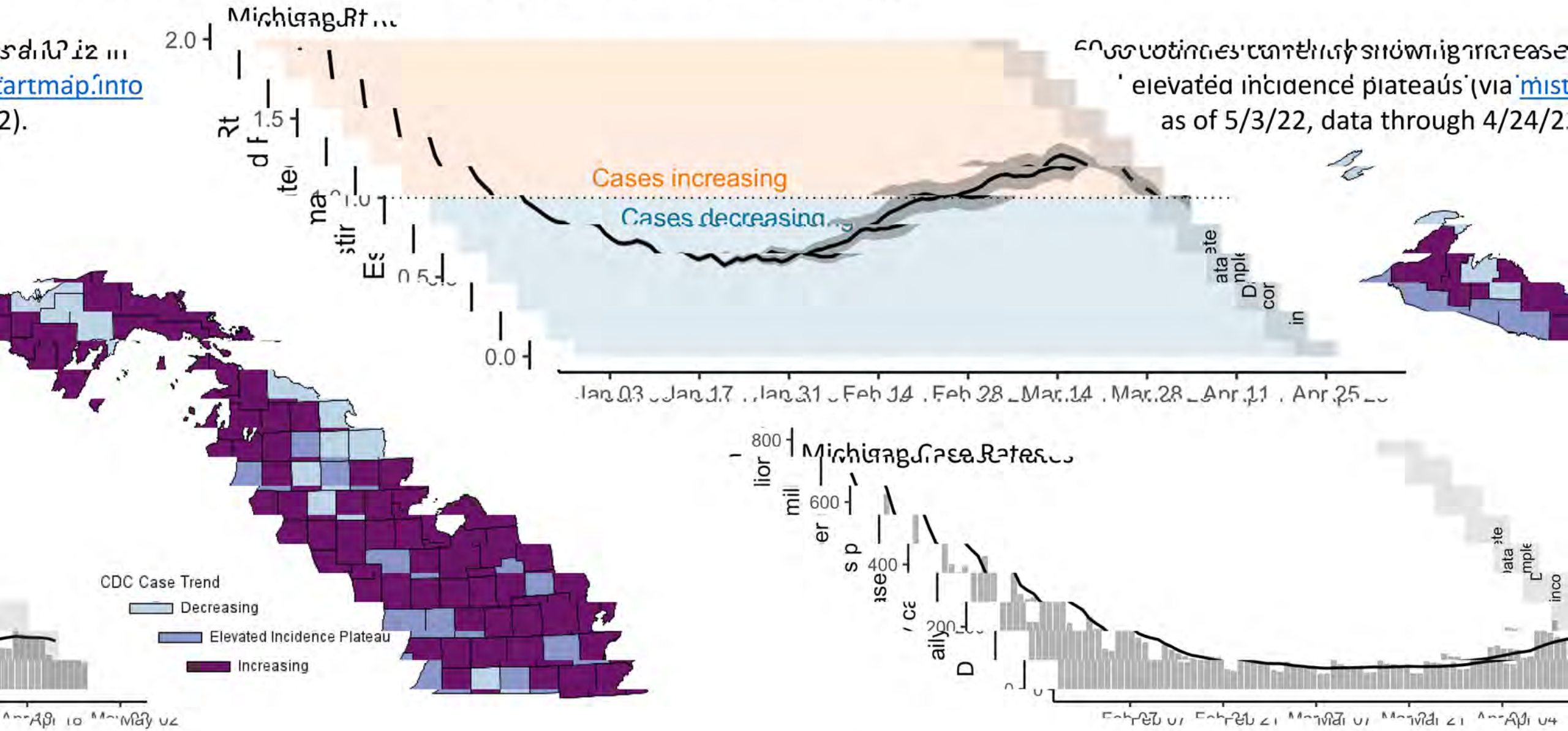


Cases by Michigan County

partmap.info

2).

elevated incidence plateaus (via [mist](#) as of 5/3/22, data through 4/24/22).



Sources: MDSS cases plotted by onset date as of 5/2/22, ...

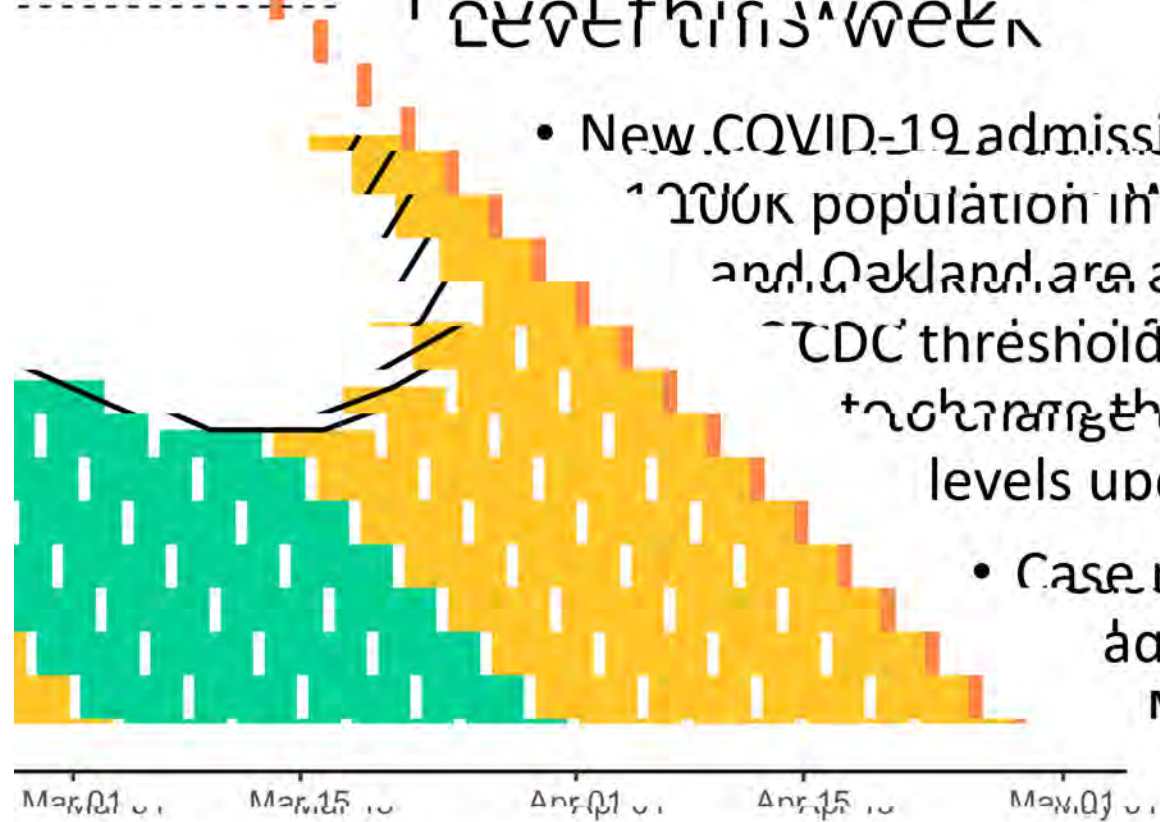
SE Michigan counties

likely to reach CDC

High community

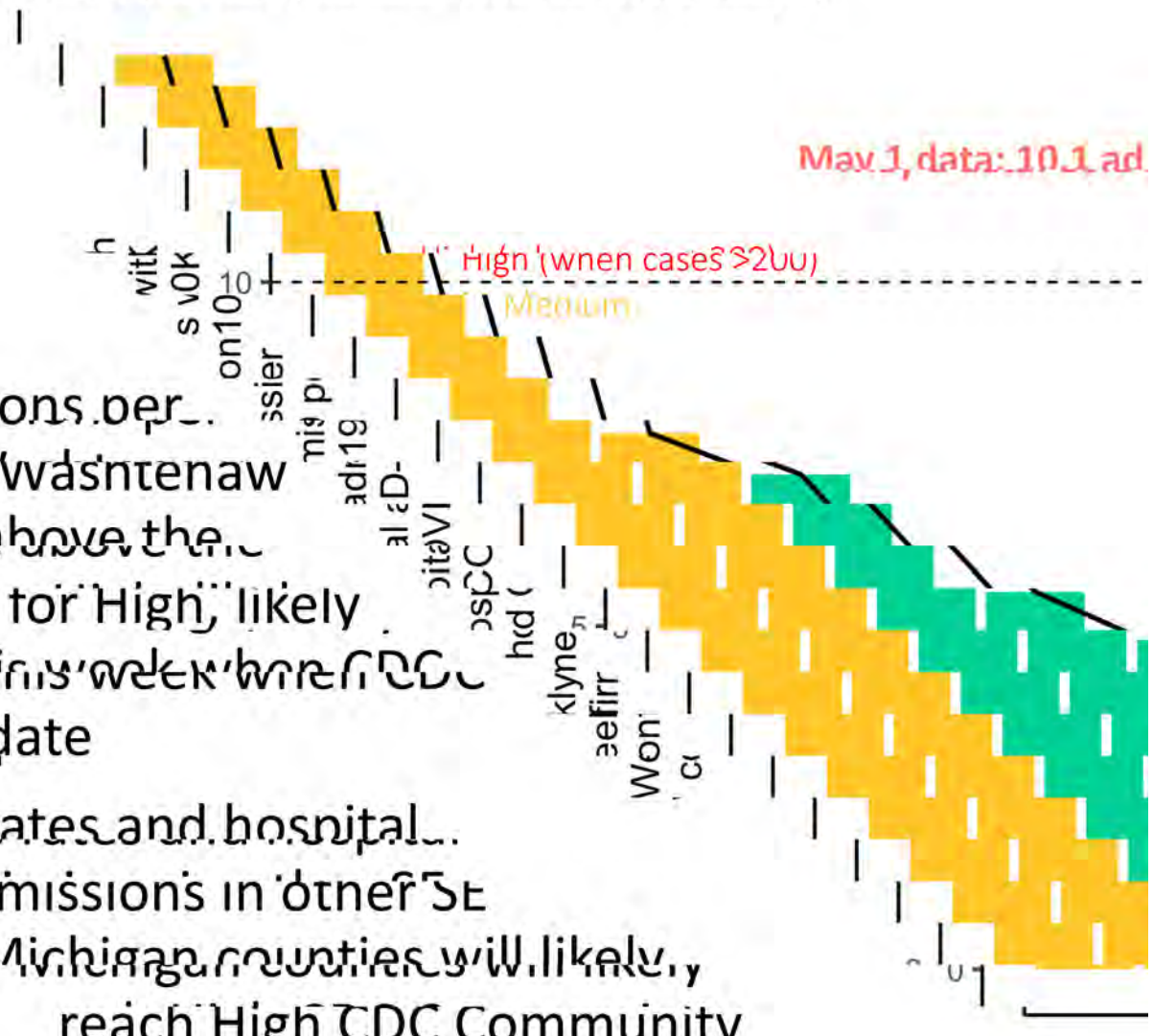
level this week

mits/100K...



CDC Community Level
 Low Medium High

Detroit Area HSA (includes Washtenaw, Oakland)

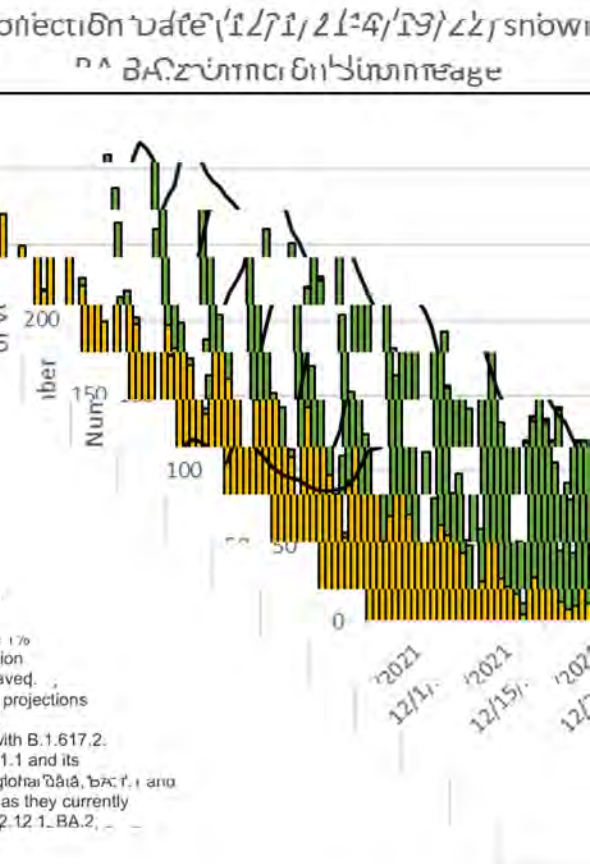
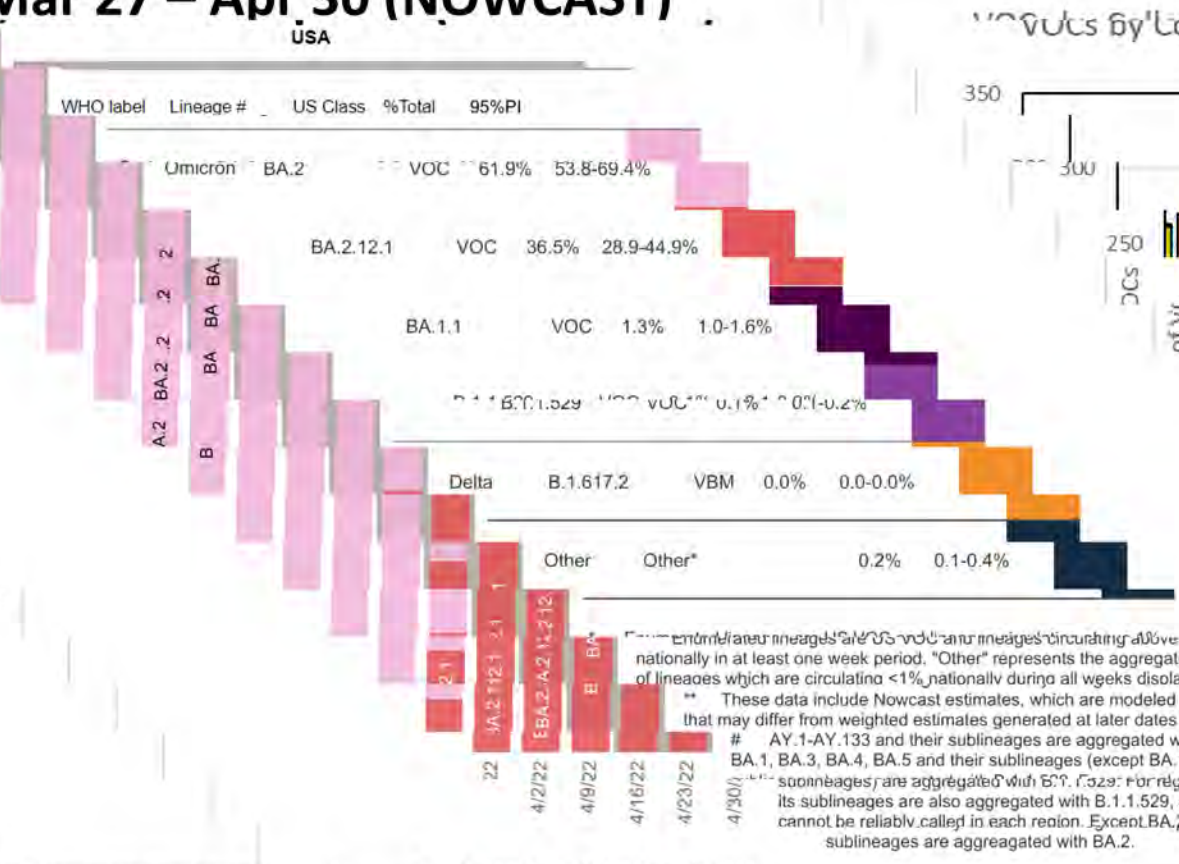
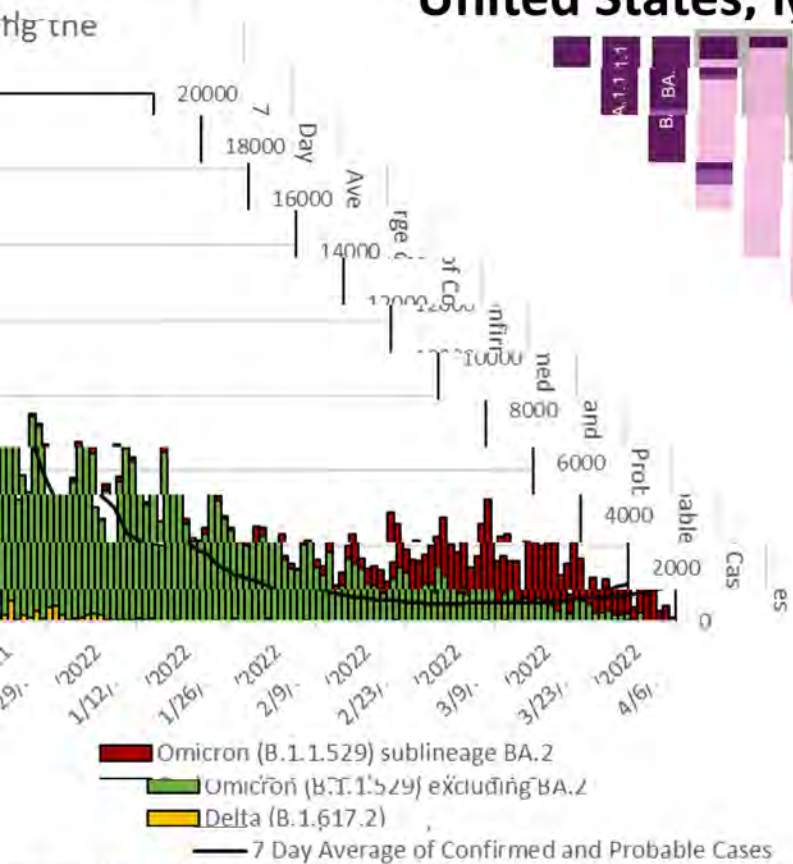


- New COVID-19 admissions per 100K population in Washtenaw and Oakland are above the CDC threshold for High, likely to reach High this week
- Case rates and hospital admissions in other SE Michigan counties will likely reach High CDC Community level this week

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

SAKS-C6V-2 variants circulating in the United States, Mar 27 – Apr 30 (NOWCAST)

VOC distribution in Michigan



* These data include Nowcast estimates, which are modeled projections that may differ from weighted estimates generated at later dates
 # AY.1-AY.133 and their sublineages are aggregated with B.1.617.2
 BA.1, BA.3, BA.4, BA.5 and their sublineages (except BA.1.1 and its sublineages) are aggregated with B.1.1.529 as they currently cannot be reliably called in each region. Except BA.2.12.1, BA.2, and its sublineages are aggregated with BA.2.

Data last updated May 3, 2022
 Source: MDSS

* Sequence specimens are from the most recent week by onset date which may change as more specimens are sent in

- Since March 15, there have 1,532 VOC specimens sequenced
- Cumulatively, 1,280 Omicron BA.2 specimens identified from 57 counties and City of Detroit

Emerging Variants Update

- Omicron continues to be the predominant variant of concern, including all its sublineages

- There are several sublineages of this variant, including BA.1, BA.2, BA.2.12.1, and several other recombinants BA.1 and BA.2, including the XE recombinant

- Most of these sublineages are, by a small fraction of specimens, sequenced internationally and nationally

- Here in the U.S., BA.2 remains the most predominant but the proportion of BA.2.12.1 is increasing faster than other lineages

- In the UK, XE appears to have a slight growth advantage over BA.2 in the +10% of cases

- BA.2.12.1 is the most common circulating strain in Northeastern U.S., where cases are rising

- Globally, BA.4 and BA.5 have only been identified in a number of countries where 200 specimens sequenced

- The data, therefore, do not appear to be an increase from BA.2 or 'additional evasion' of current counter measures

Sources: UKHSA technical briefings; WHO science briefing; GISAID COVID sequence

COVID-19 was the 3rd leading cause of death in 2021

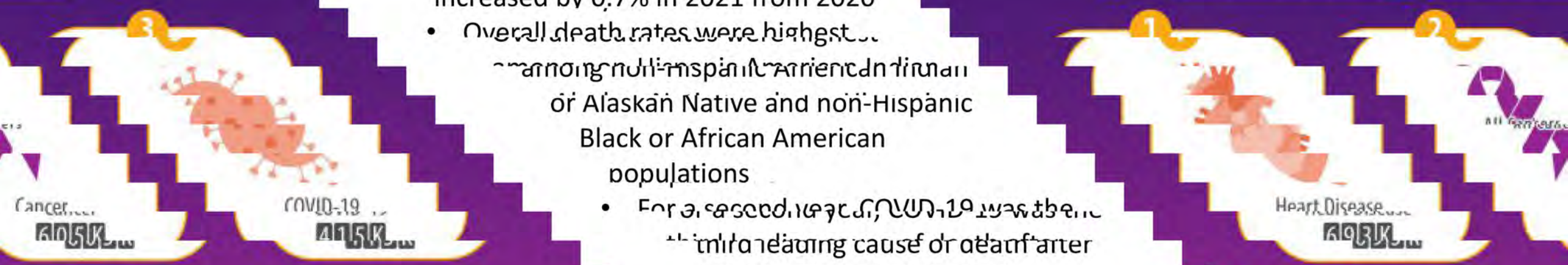
- Between January and December 2021, COVID-19 was associated with approximately 450,000 deaths in the U.S.

- The overall age-adjusted death rate increased by 0.7% in 2021 from 2020
- Overall death rates were highest among non-Hispanic American Indian or Alaska Native and non-Hispanic Black or African American populations
- For a second year, COVID-19 was the third leading cause of death after heart disease and cancer

led with 2020; death

60,000 more people died of COVID-19 during 2021 compared to 2020. COVID-19 remained the 3rd leading cause of death.

PROVISIONAL 2021 DEATHS



bit.ly/MMWR7117

April 22, 2022

MMWR

Next Meeting: As Needed??

