U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

Public Health Service

Centers for Disease Control
and Prevention (CDC)
Atlanta GA 30329-4027

October 23, 2020

The Honorable James E. Clyburn
Chairman, Select Subcommittee on the
Coronavirus Crisis
U.S. House of Representatives
Washington, DC 20515

Dear Chairman Clyburn:

Thank you for your September 30, 2020, letter regarding the Centers for Disease Control and Prevention's (CDC) guidance regarding schools and childcare programs during the Coronavirus 2019 (COVID-19) pandemic. I am sending an initial response to a number of questions contained in your letter.

Thank you for the opportunity to provide a bipartisan briefing to Subcommittee staff on October 21 regarding CDC's work to provide guidance on mitigation strategies to enable schools to re-open safely. As discussed during the call, CDC is constantly in the process of reviewing the state of the science on COVID-19 and updating relevant sections of our website as we learn more about this novel pathogen. As your letter noted, some of the information on our education guidance pages is out of date. As we noted on the call, the guidance we are currently in the process of updating include:

1.) *Operating Schools During COVID-19: CDC's Considerations* (www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/schools.html)
2.) *Preparing K-12 School Administrators for a Safe Return to School in Fall 2020* (www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/prepare-safe-return.html)
3.) *School Decision-Making Tool for Parents, Caregivers, and Guardians* (www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/decision-tool.html)

In addition, we have provided an enclosure with responses to questions 2, 4 and 5 of your letter.

We appreciate your support, and that of Congress, as we all work together to fight COVID-19. CDC remains committed to protecting the American public during this pandemic. Please contact Anstice Brand Kenefick in our CDC Washington Office at (202) 245-0600 or abrand@cdc.gov if you have further questions.

Sincerely,

Robert R. Redfield, MD
Director, CDC

Enclosure

Enclosure

Centers for Disease Control and Prevention (CDC) Responses to Questions 2, 4 and 5 of COVID-19 Oversight Subcommittee Letter on School Guidance

Question 2. Describe the steps CDC will take to update and harmonize its guidance on school reopening and the impact of the coronavirus on children, including to ensure this guidance reflects current scientific understandings and provides unbiased information to help schools and families to make informed decisions.

CDC continues to update our guidance, resources, and tools as more data, information, and evidence become available. Recently, CDC published a suite of materials to help school administrators and parents make informed decisions based on the latest scientific studies. These include:

- *Preparing K-12 School Administrators for a Safe Return to School in Fall 2020* (www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/prepare-safe-return.html), an update of previous guidance, is intended to help K-12 school administrators who are preparing for students, teachers, and staff to return to school in fall 2020. School administrators are individuals who oversee the daily operations of K-12 schools, and may include school district superintendents, school principals, and assistant principals.
- *Operating Schools During COVID-19: CDC's Considerations* (www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/schools.html) offers updated considerations for mitigation strategies that K-12 school administrators can use to help protect students, teachers, and staff and slow the spread of COVID-19. These updated considerations for schools are intended to aid school administrators as they consider how to protect the health, safety, and wellbeing of students, teachers, staff, their families, and communities
- *Indicators for Dynamic School Decision-Making* (www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/indicators.html) proposes core and secondary indicators that state, tribal, local and territorial partners can use to aid in their decision-making process regarding school reopening for in-person learning. In-person learning includes all classes and activities conducted during core school hours. The document notes that to enable schools to open and remain open, it is important to adopt and correctly and consistently implement actions to slow the spread of SARS-CoV-2, the virus that causes COVID-19, not only inside the school, but also in the community. SARS-CoV-2 transmission in schools may be a reflection of transmission in the surrounding community.
- *Interim Considerations for Testing for K-12 School Administrators and Public Health Officials* (www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/k-12-testing.html) provides guidance on the appropriate use of testing for SARS-CoV-2 (the virus that causes COVID-19) in K-12 schools for surveillance, diagnosis, screening, or outbreak response. Schools can help protect students and their families, teachers, staff, and the broader community and slow the spread of COVID-19. Testing to diagnose COVID-19 is part of a comprehensive strategy and should be used in conjunction with promoting behaviors that reduce spread (e.g., mask use, social distancing, hand hygiene); maintaining healthy environments (e.g., cleaning and disinfection, ventilation); maintaining healthy operations (e.g., scheduling, virtual learning, class sizes); and preparing for when someone gets sick.

Enclosure

These documents are based on CDC's current knowledge of COVID-19 in the United States. Through weekly publication of the *Morbidity and Mortality Weekly Report (MMWR)*, CDC releases the latest scientific information from the COVID-19 response. These include a number of publications related to children and COVID-19:

- *Transmission Dynamics by Age Group in COVID-19 Hotspot Counties — United States, April–September 2020* (www.cdc.gov/mmwr/volumes/69/wr/mm6941e1.htm?s_cid=mm6941e1_w)
- *Changing Age Distribution of the COVID-19 Pandemic — United States, May–August 2020* (www.cdc.gov/mmwr/volumes/69/wr/mm6939e1.htm?s_cid=mm6939e1_w)
- *COVID-19 Trends Among School-Aged Children — United States, March 1–September 19, 2020* (www.cdc.gov/mmwr/volumes/69/wr/mm6939e2.htm?s_cid=mm6939e2_w)
- *Adolescent with COVID-19 as the Source of an Outbreak at a 3-Week Family Gathering — Four States, June–July 2020* (www.cdc.gov/mmwr/volumes/69/wr/mm6940e2.htm?s_cid=mm6940e2_w)
- *SARS-CoV-2 Transmission and Infection Among Attendees of an Overnight Camp — Georgia, June 2020* (www.cdc.gov/mmwr/volumes/69/wr/mm6931e1.htm?s_cid=mm6931e1_w)
- *COVID-19–Associated Multisystem Inflammatory Syndrome in Children — United States, March–July 2020* (www.cdc.gov/mmwr/volumes/69/wr/mm6932e2.htm?s_cid=mm6932e2_w)
- *SARS-CoV-2–Associated Deaths Among Persons Aged <21 Years — United States, February 12–July 31, 2020* (www.cdc.gov/mmwr/volumes/69/wr/mm6937e4.htm?s_cid=mm6937e4_w)
- *Transmission Dynamics of COVID-19 Outbreaks Associated with Child Care Facilities — Salt Lake City, Utah, April–July 2020* (www.cdc.gov/mmwr/volumes/69/wr/mm6937e3.htm?s_cid=mm6937e3_w)
- *Limited Secondary Transmission of SARS-CoV-2 in Child Care Programs — Rhode Island, June 1–July 31, 2020* (www.cdc.gov/mmwr/volumes/69/wr/mm6934e2.htm?s_cid=mm6934e2_w)

CDC will continue to monitor COVID-19 activity and update guidance as needed, based on what is learned from scientific studies and interventions across the country and around the world. In doing so, CDC strives to ensure that all content is consistent and up to date. As new content, resources, and tools are approved and posted, CDC works to update all other webpages.

Question 4. Explain the purpose of CDC "school mitigation" team and any standards that exist for determining whether to deploy a school mitigation team.

In reducing the spread of COVID-19 in schools to protect children and the communities around them, CDC created multiple avenues to provide technical assistance. Our CDC field team deployments to a school are at the request of the local, state, tribal, or territorial health department, typically to respond to outbreaks, provide epidemiologic support, and bolster monitoring and

evaluation of mitigation strategies employed at the school. We support these requests through training, guidance development, and, as needed, deploying CDC field teams. One of our recent contributions is a resource to help local administrators interpret available data from their community to inform actions on school operations: *Indicators for Dynamic School Decision-Making* (www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/indicators.html).

In addition to deploying field teams, CDC also provides technical assistance through webinars, phone calls and consultations with local health departments and school administrators on the interpretation and implementation of CDC guidance in school settings.
Earlier in the pandemic, CDC established on-site and virtual deployments, including school walkthroughs to assess facilities and staff readiness for safe reopening and operating of schools during COVID-19. CDC created new tools to use during the walkthroughs and asked participating schools to provide feedback on the new tools. Some of the schools that participated in the pilot invited CDC to hone the tools at certain schools of the jurisdiction's choosing. The tools created from this work are now available and our current deployers are being trained to empower local jurisdictions to use them.

Question 5: Identify and describe each deployment of a CDC school mitigation team, including the purpose, staffing, dates of deployment, work performed, findings, guidance provided to local or school officials, and results of the deployment.

Between May 3 and Oct 16, 2020, at least 27 CDC teams have provided support to schools as part of the COVID-19 response, including 19 CDC teams to support K-12 schools, 15 CDC teams to support Institutions of Higher Education, and one CDC team to support an Early Childhood Education setting. Some teams support both K-12 and IHE institutions.

Schools that received either in-person or remote support were located in the following state, local, tribal, and territorial jurisdictions:

- State/Territories:
    - Alabama: Hale and Montgomery Counties
    - California: San Francisco
    - Georgia: Fulton County, Rome
    - Hawaii: state-wide assistance
    - Iowa: Iowa City
    - Mississippi: state-wide assistance
    - Missouri: Jefferson City
    - Nebraska: Lincoln
    - Texas: Austin, Trauma Services Areas V and S
    - Utah: Provo
    - Virginia: Blacksburg, Harrisburg
    - Wisconsin: Appleton
    - West Virginia: Charleston
    - Puerto Rico: San Juan
- Tribal: Crow Nation Reservation, Hopi, Mashpee Wampanoag, Navajo Nation, White Mountain (White River), Klamath, South Dakota (St. Kyle) and Arizona (San Carlos, Tuba City)

Enclosure

CDC provided a variety of supports to schools, including:

- Infection prevention and control; worker safety; surveillance; epidemiology and analysis; community mitigation; health communication; laboratory; IT; emergency response; outbreak investigation/contact tracing; school and work-place re-opening; data management
- Examples of some objectives for various school requests include:
    - Assess level of adherence to and impact of mitigation measures adopted by select schools.
    - Develop and pilot a process to implement guidance in school facilities.
    - Develop an early warning surveillance system to monitor disease transmission among vulnerable populations, low-income communities, mass transportation users, workforce, and schools.
    - Assist with surveillance efforts targeting at-high-risk groups, including residents of correctional facilities, persons experiencing homelessness, and students and employees of K-12 schools.
    - Compare point-of-care antigen testing to PCR testing.
    - Conduct paired antigen testing at a mass testing event of all students, faculty, and staff in response to a recent COVID-19 cluster detected among student athletes.
    - Evaluate quarantine procedures.
    - Identify optimal testing strategies.
    - Assess the relative intensity of close contact for exposed students using testing to develop a targeted approach to quarantine.
    - Develop an incident command structure.