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How Should This Guidance Be Used?

Schools have an important role in slowing the spread of disease to help ensure students have safe and healthy learning environments. Schools should be able to utilize appropriate infection control materials and Personal Protective Equipment (PPE) to mitigate COVID-19 transmission, in particular by providing school nurses and delegated staff with the right PPE they need to safely provide care.

This guidance was developed collaboratively between the North Carolina Department of Health and Human Services (NCDHHS) and the North Carolina Department of Public Instruction (NCDPI). This Infection Control and PPE guidance should be used in combination with the StrongSchoolsNC Public Health Toolkit (K-12) first released on June 8, 2020 which outlines health requirements and recommendations for reopening schools.

Local education leaders should use this guidance to understand what PPE they will receive from the State through a two-month PPE Starter Pack, as well as what infection control and PPE supplies they should plan to purchase for their school or district. They are responsible for purchasing most of the items listed on the Infection Control Checklist for K-12 Schools. Infection control and PPE items should be acquired prior to school opening.

School nurses and delegated staff should use this guidance to understand what are appropriate conditions for PPE to be used, and how PPE should be maintained or disposed of properly.

Note: This guidance does not address the specific PPE requirements for individual health care procedures that are routinely performed in schools.

What are Infection Control Supplies?

Infection control supplies prevent or stop the spread of infections and can be divided into two categories:

1. Cleaning and hygiene items and 2. Personal Protective Equipment (PPE).

Cleaning and hygiene items are primarily used for hand and cough hygiene, cleaning, and disinfection. Examples include:

- Hand soap and paper towels, for promoting hand hygiene
- Hand sanitizer with at least 60% alcohol, for promoting hand hygiene
- Cloth face coverings, which can slow the spread of COVID-19 by helping people who may have the virus but do not know it from transmitting to others
- Gloves, when used for food service and cleaning

PPE is designed to protect the wearer and/or those nearby from the spread of illness-causing germs. When used properly, PPE acts as a barrier between infectious materials such as viral contaminants and the wearer’s skin, mouth, nose, or eyes (mucous membranes). The barrier has the potential to block transmission of contaminants from blood, bodily fluids, or respiratory secretions.

There are different kinds of PPE for different situations. PPE is not always required, and it is important to thoughtfully utilize available resources when necessary for protection. This guidance details when different types of PPE should be used. In a school setting, PPE should primarily be used by nurses and delegated staff.

Have questions about this guidance? Find your answer in our FAQ! (English | Spanish)
PPE should be used by school nurses or delegated staff in specific situations, including:

- Monitoring or assisting a symptomatic person and it is not possible to maintain the recommended distance of six feet;
- Completing certain breathing-related health care procedures; and
- Completing health care procedures for a symptomatic person while the person is awaiting transportation to go home.

PPE should be used with discretion. It should not be used all the time and should not be used with children who are healthy.

### Infection Control

<table>
<thead>
<tr>
<th>Cleaning and Hygiene Items</th>
<th>Personal Protective Equipment (PPE)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hand soap</td>
<td>Face shields</td>
</tr>
<tr>
<td>Hand sanitizer</td>
<td>Procedure masks</td>
</tr>
<tr>
<td>Cloth face coverings</td>
<td>Gowns</td>
</tr>
<tr>
<td>Gloves, when used for food and custodial service</td>
<td>Gloves, when used by nurses and delegated staff</td>
</tr>
</tbody>
</table>

*Note: Thermometers support Infection Control*

### What Supplies Has the State Provided for K-12 Schools?

#### Cloth Face Coverings

Prior to school reopening, the State supplied infection control items to public and non-public school students and staff across the state to ensure schools could mitigate the spread of COVID-19 when reopening for in-person instruction. In July, North Carolina provided over 9 million cloth face coverings to K-12 schools, so that each student and staff member could receive five cloth face coverings each. Questions about shipment of cloth face coverings should be directed to Ellen Essick, ellen.essick@dpi.nc.gov.

#### PPE Starter Packs

The State also supplied a PPE Starter Pack to all North Carolina public school units, which are required to implement requirements in StrongSchoolsNC Public Health Toolkit (K-12) to minimize risk of exposure to COVID-19 for students, staff, and families across North Carolina. PPE Starter Packs were distributed in July to Local Education Agencies (LEAs), charter schools, lab schools, and regional schools.

Schools received an initial two-month supply of PPE items intended for use by school nurses and delegated staff. The PPE Starter Pack includes:

- Temporal touchless thermometers for screening
- Disposable procedure masks
- Reusable face shields
- Disposable gowns

#### PPE Booster Packs

In September 2020, the State began supplying a second shipment of PPE Booster Packs for public school units that are currently operating in-person. The PPE Booster Pack will include another two-month supply of procedure masks and face shields. Specifically, the packs will include:

- 10 procedure masks per week per nurse for 8 weeks (total of 80 procedure masks),
- 10 procedure masks per week per school for 8 weeks (total of 80 procedure masks),
- 6 face shields per nurse, and
- 6 face shields per school.

It is estimated that the PPE Starter Pack supply and PPE Booster Pack supply will last schools approximately two months each. (See below to learn more about how amounts were calculated). However, how long supplies last will depend on each school's use of supplies and levels of illness. Schools should plan to purchase additional PPE items for school nurses and delegated staff as needed. Schools can reach out to their districts to request additional supplies, but may need to order supplies on their own if district supplies are unavailable.

Questions about the PPE Starter or Booster Packs should be directed to Ann Nichols, State School Health Nurse Consultant, ann.nichols@dhhs.nc.gov (for traditional LEAs) or Annette Richardson, Charter School Health Nurse Consultant, annette.richardson@dhhs.nc.gov (for charter schools).

### What Items are in the PPE Starter Pack and How Should They Be Used?

#### Screening Thermometers (Touchless, Temporal)

The PPE Starter Pack supplied by the State will include screening thermometers, with each public school unit receiving one thermometer per 100 students.

Thermometers should be used by trained staff when they are:

- Conducting daily screening at school entrances, as required in the StrongSchoolsNC Public Health Toolkit (K-12):
• Caring for a student during the school day due to development of possible COVID-19 symptoms; and/or
• Completing an assessment of a potentially ill student (school nurses).

Preparation of thermometers and ongoing maintenance:
• Staff using thermometers should review manufacturer’s guidelines for use, charging, calibration (if needed) and cleaning.
• Thermometer lens should be free of dust or debris prior to use.

WHY 1 THERMOMETER PER 100 STUDENTS?
The NC School Health Nurse Consultant team conducted a time analysis of how long daily symptom screening would take and estimated that school staff can efficiently screen about 100 children with one thermometer in about 30 minutes. The 30-minute period accounts for potential stoppage time for a student who may screen positive or needing to recalibrate a thermometer. By providing 1 thermometer per 100 children, schools may be able to set up multiple screening stations to efficiently screen students in the morning before school starts. Larger schools may also need to consider staggering or extending start times to manage screening of school populations.

Disposable Procedure Masks
The PPE Starter Pack supplied by the State will include a two-month supply of procedure masks, comprised of:
• Two procedure masks per day per school nurse, or ten per week; and
• Two procedure masks per day per school (to be used by delegated staff), or ten per week; and
• An additional amount of procedure masks equivalent to one percent of a school’s student population.

WHY THIS QUANTITY OF PROCEDURE MASKS?
Two procedure masks per day (or ten per week) for nurses and delegated staff is consistent with recommended amounts from other states. Based on data included in the annual NC School Health Services Survey, the School Health Nurse Consultant team has estimated that approximately 1% of the school population typically has medical orders for respiratory procedures (nebulizer treatments, respiratory suctioning, etc.) which have potential to aerosolize infectious particles if that child were to have COVID-19. During such respiratory procedures, school nurses and delegated staff should wear procedure masks and eye protection to protect themselves in accordance with CDC recommendations.

Since risk for exposure to asymptomatic COVID-19 during some aerosolizing respiratory procedures such as nebulizer treatments is not fully understood, it is recommended that schools identify a separate space when these procedures are needed. The space should not be the health room that is typically used for well care (e.g., providing medications, diabetic care). If not possible to identify a separate space, it is recommended that school nurses and delegated staff use a separated space within the isolation room.

Procedure masks should be used with face shields when working with symptomatic students and recommended distance of six feet cannot be maintained. Face shields provide barrier protection from liquid splashes and sprays not provided by most procedure masks. Cloth face coverings should be routinely worn at other times.

It is expected that symptomatic students will be released to go home as quickly as possible. This guidance addresses care that must be provided while awaiting transportation when it is necessary to be in close contact (within six feet) for an extended amount of time (15 minutes or longer).

Procedure masks should be used with face shields by school nurses and delegated staff when they are:
• Providing health care procedures or physical assistance for a symptomatic person;
• Providing respiratory-related health care procedures that carry the risk of aerosolization (nebulizer treatments, respiratory suctioning, etc.); and/or
• Monitoring or supervising the room designated for students who either screen positive for COVID-19 symptoms at the school entrance or develop COVID-19 symptoms during the day and are waiting for transportation to go home.

Intended use and disposal of procedure masks:
• Disposable procedure masks should be used to care for and manage COVID-19 symptomatic students when recommended six feet of distance cannot be maintained
• Use procedure masks at the recommended rate in order to preserve the supply
• If procedure masks are reused due to having minimal contact with symptomatic students, follow CDC guidelines for Optimizing the Supply of Facemasks.
• Masks that are soiled or that sustain exposure to respiratory secretions should be disposed of after single use.
Reusable Face Shields
The PPE Starter Pack supplied by the State will include two face shields per school nurse and two face shields per school (for delegated staff). Face shields provide eye protection and barrier protection from liquid splashes and sprays for procedure masks when needed. Face shields are reusable and providing two per school will ensure that there is a backup available in case of contamination or breakage.

Face shields should be used by school nurses and delegated staff when they are:
• Monitoring, assisting or providing care for a symptomatic person in combination with a procedure mask; or
• Providing an ordered respiratory procedure (such as a nebulizer treatment)

Length of use and disposal of face shields:
• Reusable face shields should be cleaned after each use following the manufacturer recommended process and products. If manufacturer guidelines are unavailable, follow CDC guidance for cleaning.
• With proper cleaning, a face shield may be used until damaged, it no longer fastens securely, or visibility is obscured.

Disposable Gowns
The PPE Starter Pack supplied by the State will include a two-month supply of disposable gowns.
• Each elementary school will receive five gowns per week, and each middle school and high school will receive two gowns per week.
• Elementary schools are receiving a larger supply of disposable gowns because younger students often respond to the onset of illness with vomiting and/or diarrhea and typically have less control of their bodily response than older students.

Gowns should be used by school nurses or delegated staff when they are interacting with a person who is producing respiratory or other body fluids to a degree that is likely to get on the clothing of the caregiver.

Length of use and disposal of disposable gowns:
• Gowns are rarely needed and should be single-use items due to soiling.
• A small supply of gowns should be kept on hand in case of need as defined above.

How and When Will Schools Receive These PPE Supplies from the State?
The State has supplied all PPE Starter Packs to public school units prior to school reopening in July, and as of September, started shipping PPE Booster Packs (secondary shipments) to schools that are operating for in-person instruction. North Carolina Emergency Management teams will continue to distribute PPE Booster Packs at a designated delivery site for school districts (LEAs) and charter, regional, and lab schools. It is recommended that local education leaders coordinate with their school nurse teams to ensure that PPE Starter/Booster Packs are distributed appropriately to school nurses and delegated staff in schools. For LEAs, districts will be responsible for determining the logistics of distribution to individual school nurses and schools once supplies arrive at the designated delivery site. Similarly, charter, regional, and lab school leaders will be responsible for determining the logistics of distribution to individual school nurses or designated staff once supplies arrive at the designated delivery site.

Local education leaders must ensure that PPE supplies are provided directly to school nurses or delegated staff, who should be primary users of these supplies.
How Can School Nurses and Delegated Staff Get Trained to Use PPE?

The NC Department of Health and Human Services, Division of Public Health (DPH) School Health Nurse Consultant team will provide support for PPE training and assistance for school personnel.

For school nurses and other NC Board of Nursing licensed health care staff:

- Nurses routinely receive training in use of PPE as a component of education for licensure. Although use of PPE in the school setting is common, all requirements included in the StrongSchoolsNC Public Health Toolkit (K-12) and this guidance are not considered to be routine use.
- School nurses instruct school staff regarding PPE use for specific delegated health care procedures in the school setting during each school year. That instruction should be supplemented to reflect guidance in the StrongSchoolsNC Public Health Toolkit (K-12) and in this guidance.
- The NC Board of Nursing has recommended that nurses in need of review take a PPE refresher course entitled COVID-19: Epidemiology, Modes of Transmission and Protecting Yourself with PPE. This course is provided through the National Council for State Boards of Nursing, and is free, self-paced and provides 1.5 Continuing Nursing Education (CNE) credits. It includes multiple sources for short videos on donning (putting on) and doffing (taking off) PPE that may also be used with school staff.
- The DPH School Health Nurse Consultant team will develop a narrated slide deck that discusses application to the school setting and K-12 requirements prior to the start of school. This will include a teaching plan template for school nurse use in reviewing proper PPE use with school staff.
- Virtual opportunities for content review, Question and Answer sessions, and technical assistance will be shared in July and August. DPH School Health Nurse Consultants are available for individual assistance.

For personnel at charter schools without a school nurse who are designated to provide health care to charter school students:

- Charter school staff who will be using PPE as described in this guidance should review available videos for proper donning (putting on) and doffing (taking off) of PPE (see PPE resource list below).
- The DPH School Health Nurse Consultant team will develop a narrated slide deck that discusses application to the school setting and K-12 requirements prior to the start of school.
- Virtual opportunities for content review, support, question and answer sessions, and technical assistance will be shared in July and August. DPH School Health Nurse Consultants are available for individual assistance.

Resources about PPE:

- CDC: Using Personal Protective Equipment (PPE) includes video on donning
- CDC: Using Personal Protective Equipment (PPE) When Caring for Patients with Confirmed or Suspected COVID-19
- CDC: Strategies to Optimize the Supply of PPE and Equipment
- Emory University General PPE Guidance
- PPE Video with Removal, Handwashing
- Rush University Medical Center: Video on PPE Equipment for COVID-19 Care

Resources about PPE:

- CDC: Using Personal Protective Equipment (PPE) includes video on donning
- CDC: Using Personal Protective Equipment (PPE) When Caring for Patients with Confirmed or Suspected COVID-19
- CDC: Strategies to Optimize the Supply of PPE and Equipment
- Emory University General PPE Guidance
- PPE Video with Removal, Handwashing
- Rush University Medical Center: Video on PPE Equipment for COVID-19 Care
Infection Control Checklist for K-12 Schools

In anticipation of K-12 school facilities reopening for instruction, this checklist reflects predicted items of need for infection control materials and PPE. These documents are intended to inform policy decisions.

*Note: This checklist does not address the routine use of PPE as normally indicated for completion of typical, daily medical procedures for students

School Building
- Hand Sanitizer (with at least 60% alcohol)
- Hand Soap
- Paper Towels

Teachers
- Cloth Face Coverings
- Hand Sanitizer (with at least 60% alcohol)
- Cleaning Products (EPA registered disinfectants effective against coronavirus) – See EPA’s List N: Disinfectants for Use Against SARS-CoV-2
- Tissues

Students
- Cloth Face Coverings

Nurses
- Cloth Face Coverings
- Procedure Masks
- Gowns
- Gloves
- Face Shields
- Screening thermometers (temporal, touchless)

Individual School Staff Delegated by a Nurse to Perform Medical Tasks
- Cloth Face Coverings
- Procedure Masks
- Gowns
- Gloves
- Face Shields
- Screening Thermometers (temporal, touchless)
- Cleaning Products (EPA registered disinfectants effective against coronavirus) – See EPA’s List N: Disinfectants for Use Against SARS-CoV-2
Custodial Staff
- Cloth Face Coverings
- Gloves

Nutrition Services Staff
- Cloth Face Coverings
- Gloves

Bus Drivers
- Cloth Face Coverings
- Hand Sanitizer (with at least 60% alcohol)
- Cleaning Products (EPA registered disinfectants effective against coronavirus) – See EPA’s List N: Disinfectants for Use Against SARS-CoV-2
- Tissues

School Staff Who May Need to Make Home Visits, or Visits to Multiple Schools (e.g., Social Workers, Physical Therapists, Speech Therapists, Instructional Coaches)
- Cloth Face Coverings
- Hand Sanitizer (with at least 60% alcohol)

All Other School Staff (e.g., Administrators, Coaches)
- Cloth Face Coverings

Person Who Screens Positive for COVID-19 Symptoms On-Site
- Procedure Mask or Cloth Face Covering

Individual Accompanying or Supervising a Person Who Screens Positive for COVID-19 Symptoms On-Site
- Procedure Mask or Cloth Face Covering
- Gloves
- Hand Sanitizer (with at least 60% alcohol)
What Quantities of Infection Control Items Should Schools Plan to Purchase?

This section of the guidance builds on the Infection Control Checklist found in the StrongSchoolsNC Public Health Toolkit (K-12), and outlines recommended quantities for the infection control items are based on best estimates from health experts. Schools and districts should plan to measure actual usage rates during the first 30 days of building operations and adjust their reorder levels accordingly. Training for all staff who use infection control items is also critical to ensure proper usage of supplies.

Note: This guidance does NOT address the routine use of PPE as normally indicated for completion of typical, daily health care procedures for well students.

Hand Sanitizer (with at least 60% alcohol)

- Methanol is not an acceptable ingredient for hand sanitizer products, and can result in nausea, vomiting, headache, blurred vision, permanent blindness, seizures, coma, permanent damage to the nervous system or death. To view the FDA's do-not-use list of hand sanitizers that are, or may be, contaminated with methanol, in addition to other hand sanitizers the agency is urging consumers not to use, please visit [www.fda.gov/drugs/drug-safety-and-availability/fda-updates-hand-sanitizers-consumers-should-not-use](http://www.fda.gov/drugs/drug-safety-and-availability/fda-updates-hand-sanitizers-consumers-should-not-use).
- All individuals in the school building should wash their hands with soap and water whenever possible rather than using hand sanitizer. Hand sanitizer use should be limited to times when soap and water are not available.

- Recommended strategies to optimize handwashing include:
  - Provide students and staff with instruction on proper handwashing procedures including timing for handwashing during the school day.
  - Increase handwashing stations within the school where possible.
  - Identify handwashing opportunities within class schedules.
  - Establish an expectation of compliance with hand hygiene guidance.
  - Ensure that students and staff wash their hands before going to shared spaces like the cafeteria and library.
- Supervise use of hand sanitizer by students, particularly younger students:
  - Direct students on dose amount (dime-sized amount of hand sanitizer).
  - Direct students to rub their hands together (as if washing), spread the product on all sides and between fingers, and allow to dry.
- Ensure that students use soap and water if they have skin reactions or contraindications to hand sanitizer.

- Schools purchasing large quantities of hand sanitizer should ensure proper labeling as flammable for storage and transport. If transferring hand sanitizer from large containers to smaller containers, schools should label secondary containers with product name, hazardous ingredients in the product, and key hazards in writing or by picture found on the original container or on the Safety Data Sheet, per OSHA Hazard Communication standards. Contact your Local Health Department for additional questions related to storing, transporting, or transferring hand sanitizer.
- Additional resources on hand sanitizer use:
  - CDC: When and how to use hand sanitizer
  - CDC: Handwashing: Clean Hands Save Lives

<table>
<thead>
<tr>
<th>Location</th>
<th>Recommended Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>At school building entrance &amp; in the cafeteria</td>
<td>An effective dose of hand sanitizer is one dime-sized amount (approximately one teaspoon or 5 mL), although the actual amount dispensed by a device may vary widely. In estimating needs, one ounce of hand sanitizer will yield about six doses. To determine total amount needed, consider how many individuals will be entering the building or cafeteria, and how many times they will use hand sanitizer at that location during the day. For example, assuming that a school typically has 100 people enter the building per day, and assuming each person uses hand sanitizer twice a day at the entrance, a school would need 0.25 gallon per day at the entrance.</td>
</tr>
<tr>
<td>In classrooms</td>
<td>To determine total amount needed, consider the number of students entering the classroom and number of times using hand sanitizer in a given day.</td>
</tr>
<tr>
<td>On school transportation</td>
<td>To determine total amount needed, consider number of students per run and number of runs per day per bus.</td>
</tr>
<tr>
<td>For school staff who make home or multiple school visits</td>
<td>To determine total amount needed, consider how many home visits a staff member will make, with anticipated use at the start and end of the visit.</td>
</tr>
</tbody>
</table>
Cloth Face Coverings

In July, the State has provided five cloth face coverings per student, teacher, and staff member in North Carolina public and private K-12 schools. Additionally, in October the State will distribute additional cloth face coverings for students and staff to public and private schools that requested additional face coverings. Schools should plan to purchase additional cloth face coverings to supplement the initial supply from the State.

Suggested quantities are outlined below. Wearing cloth face coverings is required for all students from kindergarten through 12th grade, and all teachers, staff and adult visitors on buses or other transportation vehicles, inside school buildings, and anywhere on school grounds, including outside. Cloth face coverings are meant to protect other people in case the wearer is unknowingly infected with COVID-19 but does not have symptoms.

- Should be reused until damaged or no longer maintain shape
- Should be handled and laundered following CDC guidance
- Should be distributed to students and staff
- Should not be placed on individuals who have trouble breathing or are unconscious, incapacitated or otherwise unable to remove without assistance, or cannot tolerate a covering due to developmental, medical or behavioral health needs
- Students and staff must be taught proper use of cloth face coverings, including covering both the nose and mouth while wearing

<table>
<thead>
<tr>
<th>Groups</th>
<th>Recommended Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Students</td>
<td>5 per student</td>
</tr>
<tr>
<td>All staff</td>
<td>5 per staff member</td>
</tr>
<tr>
<td>People who come to school with COVID-19 symptoms and do not have a cloth face covering</td>
<td>Have available at least 10 masks/cloth face coverings per day. Schools can consider purchasing either disposable masks or cloth face coverings for the purposes of children who need to be isolated due to symptoms.</td>
</tr>
</tbody>
</table>

Facial Tissues

<table>
<thead>
<tr>
<th>Location</th>
<th>Recommended Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>School transportation</td>
<td>• At least one box of tissues per vehicle per week.</td>
</tr>
<tr>
<td>Classrooms</td>
<td>• Elementary and middle school: At least two boxes of tissues per classroom per week. • High school: At least one box of tissues per classroom per week.</td>
</tr>
</tbody>
</table>

Gloves – for infection control (not routine use of gloves during the school year)

Gloves are routinely provided in schools each year for needed purposes including PPE for health care procedures, custodial activities, and food service. Schools/districts should rely on those routine orders for typical quantities of gloves, and purchasing additional gloves for the increased cleaning requirements and screening activities listed in StrongSchoolsNC Public Health Toolkit (K-12). Recommendations in this guidance are for the additional gloves needed beyond normal school activities.

- Many activities can be done hygienically with good handwashing and do not require gloves.
- Wearing gloves is not a substitute for cleaning your hands.
- Adherence to hand hygiene protocols will limit the number of gloves being used.
- Staff wearing gloves should receive a training/refresher on proper removal to prevent contamination and need for hand hygiene after removal of gloves.

<table>
<thead>
<tr>
<th>Groups</th>
<th>Recommended Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nurses</td>
<td>• Always maintain at least one box of disposable gloves near the isolation room for use when caring for symptomatic students who are awaiting transportation to go home.</td>
</tr>
<tr>
<td>Delegated staff who are performing health tasks for symptomatic students, or supervising symptomatic students awaiting transportation and needing assistance.</td>
<td>• Always maintain at least one box of disposable gloves in the reception/health office area for screening of individuals who arrive after the morning screenings.</td>
</tr>
<tr>
<td>Custodial staff</td>
<td>• Glove use should be monitored to inform use rate for future orders.</td>
</tr>
<tr>
<td>Nutrition services staff</td>
<td>• Two pairs of disposable gloves per staff member per day during daily screening at school entrance.</td>
</tr>
</tbody>
</table>

Hygiene and Cleaning Items

<table>
<thead>
<tr>
<th>Item</th>
<th>Recommended Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hand soap and paper towels for school buildings</td>
<td>Consider increased need for soap and paper towels to meet additional requirements of handwashing. Monitor usage rates during the first 30 days and adjust reorder levels accordingly.</td>
</tr>
<tr>
<td>Cleaning products for classrooms, for buses, for individuals delegated by nurses to perform health care tasks (EPA registered disinfectants effective against coronavirus)</td>
<td>Consider increased use of cleaning products due to additional requirements for frequent cleaning. Monitor usage rates during the first 30 days and adjust reorder levels accordingly.</td>
</tr>
</tbody>
</table>
Each public school unit is responsible for acquiring the supply items from the Infection Control Checklist needed to safely and responsibly re-open their school buildings consistent with the requirements outlined in the StrongSchoolsNC Public Health Toolkit (K-12). While the State is providing a starter pack including a 2-month supply of PPE for school nurses and delegated staff, public school units should plan to purchase items such as procedure masks and gowns for nurses and delegated staff for the rest of the school year.

- The State has established statewide term contracts with specific vendors who sell Infection Control and PPE items at a negotiated, discounted rate.
- Schools and districts will be able to take advantage of State convenience contracts with specific vendors to order infection control and PPE items at a discounted, negotiated rate.
- There are 15 vendors that sell various infection control and PPE items. Due to the fluctuating supply chain, the inventory profile of available supplies will change over time. If your school/district plans to make use of state contracts and available pricing for additional infection control and PPE items, take action to place your orders as soon as possible.
- Schools can view vendor catalogs by using NC E-Procurement. Instructions on how to access NC E-Procurement are provided to the right.

The NC E-Procurement Help Desk can assist school districts with using the E-Procurement system to order PPE. They are not qualified to advise on appropriate PPE levels to be purchased by a school district. School districts can contact vendors for their guidance/guidelines to inform their purchasing decisions.

**Be Aware of Price Gouging**

North Carolina’s price gouging law went into effect on March 10, 2020 when Governor Cooper declared a state of emergency in North Carolina in response to the COVID-19 pandemic. If you are concerned about a seller charging an unreasonably excessive price, please report potential price gouging by calling 1-877-5-NO-SCAM or by filing a complaint at https://ncdoj.gov/file-a-complaint/price-gouging/.

If the LEA or school already has access to NC E-Procurement:

1 - Log into NC E-Procurement (buyer.ncgov.com) using your NCID user ID and password.

2 - Search for a vendor's catalogue using the Statewide Term Contract Number. A *job aid* for how to search for catalogue items is available.

3 - Search the supplies you seek and create an order.

Note that the E-Procurement system will be updated on July 1, 2020. If you log in after that date, the system will look different but will offer the same purchasing features.

Find more help on creating a requisition on the website or by contacting the help desk (call 888-211-7440, select Option 1, or send an email to ephelpdesk@its.nc.gov).

If the LEA or school does not have access to NC E-Procurement, two options are available:

1. Get access to NC E-Procurement to view the catalogs by contacting the help desk (call 888-211-7440, select Option 1, or send an email to ephelpdesk@its.nc.gov).

2. Reach out to the vendor contact person directly and request catalogue information for the supplies you seek. Also mention the Statewide Term Contract # (shown on page 11) to benefit from the prices and conditions negotiated by the State.
# List of PPE Vendors with Statewide Term Contracts

<table>
<thead>
<tr>
<th>Statewide Term Contract #</th>
<th>Statewide Term Contract Vendor</th>
<th>PPE Categories Provided</th>
<th>Contact Person</th>
<th>Contact Phone Number</th>
<th>Contact Email Address</th>
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<tbody>
<tr>
<td>260A</td>
<td>Darby Dental Supply</td>
<td>All</td>
<td>Kelly Jorgensen</td>
<td>800-901-1369 Ext. 1011</td>
<td><a href="mailto:Kelly.Jorgensen@DarbyDentalSupply.com">Kelly.Jorgensen@DarbyDentalSupply.com</a></td>
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<tr>
<td>260A</td>
<td>Dental Health Products</td>
<td>All</td>
<td>LaDeana DeClark</td>
<td>920-866-9001 Ext. 1308</td>
<td><a href="mailto:LaDeana.DeClark@dhpi.net">LaDeana.DeClark@dhpi.net</a></td>
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<tr>
<td>260A</td>
<td>Henry Schein Dental</td>
<td>All</td>
<td>Drew Horne</td>
<td>770-330-8919</td>
<td><a href="mailto:Drew.Horne@henryschein.com">Drew.Horne@henryschein.com</a></td>
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<tr>
<td>445B</td>
<td>Grainger</td>
<td>All</td>
<td>Tiffany Jelovich</td>
<td>919-830-5589</td>
<td><a href="mailto:Tiffany.Jelovich@grainger.com">Tiffany.Jelovich@grainger.com</a></td>
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<tr>
<td>475A</td>
<td>Concordance Healthcare Solutions</td>
<td>All</td>
<td>Marie Neubert</td>
<td>914-819-1120</td>
<td><a href="mailto:MNeubert@concordancehs.com">MNeubert@concordancehs.com</a></td>
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<td>475A</td>
<td>Henry Schein Medical</td>
<td>All</td>
<td>Curran Hoover</td>
<td>919-818-2013</td>
<td><a href="mailto:curran.hoover@henryschein.com">curran.hoover@henryschein.com</a></td>
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<tr>
<td>475A</td>
<td>McKesson</td>
<td>All</td>
<td>Kathy Fleischman</td>
<td>954-980-3774</td>
<td><a href="mailto:kathy.fleischman@mckesson.com">kathy.fleischman@mckesson.com</a></td>
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<tr>
<td>475A</td>
<td>Medical Solutions</td>
<td>All</td>
<td>Lynn Meyers</td>
<td>888-557-8020</td>
<td><a href="mailto:lmeyers@medicalsolutionsinc.com">lmeyers@medicalsolutionsinc.com</a></td>
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<tr>
<td>493A</td>
<td>Krackeler</td>
<td>All</td>
<td>Chris Lee</td>
<td>919-614-6676</td>
<td><a href="mailto:cpl@krackeler.com">cpl@krackeler.com</a></td>
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<tr>
<td>493A</td>
<td>Thermo Fisher</td>
<td>All</td>
<td>Kris Schoolfield</td>
<td>336-254-6285</td>
<td><a href="mailto:kris.schoolfield@thermofisher.com">kris.schoolfield@thermofisher.com</a></td>
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<td>493A</td>
<td>VWR</td>
<td>All</td>
<td>Lynn Moore</td>
<td>434-249-1196</td>
<td><a href="mailto:lynn.moore@avantorsciences.com">lynn.moore@avantorsciences.com</a></td>
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<tr>
<td>615A</td>
<td>FSI, Inc</td>
<td>All</td>
<td>Beth Freeman</td>
<td>704-578-0671</td>
<td><a href="mailto:Beth.Freeman@formsandsupply.com">Beth.Freeman@formsandsupply.com</a></td>
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<td>640A</td>
<td>Brame Specialty</td>
<td>Tissues</td>
<td>Mercer Stanfield</td>
<td>800-672-0011 Ext. 1330</td>
<td><a href="mailto:m.stanfield@bramespecialty.com">m.stanfield@bramespecialty.com</a></td>
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<tr>
<td>875A</td>
<td>DRE Medical</td>
<td>All</td>
<td>Hannah Harris</td>
<td>502-882-8760</td>
<td><a href="mailto:hharris@dremed.com">hharris@dremed.com</a></td>
</tr>
<tr>
<td>983B</td>
<td>Cintas</td>
<td>All</td>
<td>Christopher Dunne</td>
<td>239-634-8994</td>
<td><a href="mailto:DunneC@cintas.com">DunneC@cintas.com</a></td>
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