Contact Tracing in Schools

The Centers for Disease Control and Prevention (CDC) has made new recommendations for contact tracing in schools based on the following premises:

- Students benefit from in-person learning, and safely returning to in-person instruction in the fall 2021 is a priority.
- Due to the circulating and highly contagious Delta variant, CDC recommends universal indoor masking by all students, staff, teachers, and visitors to K-12 schools, regardless of vaccination status.

How is the Delta different from other variants?

- Previous variants did not infect children at the same rate as adults and infected children were less likely to spread the illness to others. The Delta variant is highly contagious. Children seem to be more susceptible to the Delta variant and are likely to be able to infect others.

How do CCSD and SNHD work together to determine contacts?

- Health clinics, hospitals, and laboratories are required to report confirmed cases of COVID-19. The Southern Nevada Health District (SNHD) investigates all cases. If a Clark County School District (CCSD) student is identified in the investigation, SNHD works with CCSD to identify contacts and provides isolation guidance and disease education to the family. Sometimes, families report cases to CCSD before SNHD receives the report. In this instance, CCSD works with SNHD to confirm contacts. Information flows in both directions to best serve our community.

Why does the guidance permit students with known exposures to COVID-19 to remain in school?

- Providing in-person learning is a priority for CCSD and SNHD. Keeping children in school is a priority if at all possible. The CDC has released guidance for contact tracing in schools and this guidance is utilized when making decisions.

Sometimes whole classes are quarantined and sometimes they are not? Why isn’t it consistent?

- Contact tracing is not always black and white and many factors are taken into consideration including the age/grade of the children, ability to use masks appropriately, and how many cases have occurred in the classroom. When multiple cases are identified in a classroom then it is apparent spread has occurred, the classroom will be sent home to prevent further spread.

When will a decision be made to close a school?

- This is a decision that is not taken lightly, should be rare, and is a decision made in conjunction with CCSD and SNHD. This would only occur if there are multiple cases and a high amount of community spread.

Find additional information online:
- http://covid.southernnevadahealthdistrict.org/facts/
Isolation

Students, staff, and educators diagnosed with COVID-19 should isolate and stay away from the school premises until requirements for the end of isolation are met.

If you have symptoms and have tested positive: You must self-isolate for 10 days after your symptoms began, and until it has been at least 24 hours since you had a fever (without taking fever-reducing medicines like Tylenol or ibuprofen) and your other symptoms have improved.

If you tested positive but do not have symptoms: You must self-isolate for 10 days after your test was collected. A negative test within the 10-day isolation period does not eliminate the need for a positive person to complete their isolation period.

Quarantine

When cases are identified in these settings, K–12 schools and administrators should notify close contacts that they were exposed (and families of close contacts in the K–12 school setting), as soon as possible. Correct and consistent mask use is a critical step that people can take to protect themselves and others from COVID-19.

Quarantine Recommendations: People who are fully vaccinated do NOT need to quarantine after contact with someone who had COVID-19 unless they have symptoms. However, fully vaccinated people should get tested 3-5 days after their exposure, even if they don’t have symptoms.

If you are asked to quarantine:
• Monitor for symptoms and preferably schedule testing

You may end quarantine:
• After day 10 without testing
• After day 7 after receiving a negative test result (test must occur on day 5 or later)

Breakthrough Cases

A vaccine breakthrough infection is defined as the detection of SARS-CoV-2 RNA or antigen in a respiratory specimen collected from a person ≥14 days after they have completed all recommended doses of a U.S. Food and Drug Administration (FDA)-authorized COVID-19 vaccine. Vaccine breakthrough cases occur in only a small percentage of vaccinated people.

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