

School Health Advisory Board Meeting 1/18/2022

Present: Rebecca Abernathy, Lori Balaban, Gemilia Bouber, Gale Burt, Erin Callas, NyShae' Carter, Kristen Carty, Kristy Davis, Christine Eagleson, Eileen Gomez, Leanne Knox, Mark Niehaus, Chris Siebert, Kevin Kirst; Guest: Jeff Vergales

Membership Eileen explained that School Board appointees serve 2-year terms with the option of reappointment, but members who wish to continue to serve can move to other another category after 2 consecutive terms.

Masks Despite the new [governor's order](#) that lifts mask mandates, ACPS will continue to require masking in all of its buildings and vehicles based other state and federal laws. Given evidence that cloth masks are not as effective against the Omicron variant, the board recommends high-filtration masks such as the KN95 masks for employees and 3-ply surgical masks for students. Fit can be improved by flipping the ear loops of masks as well as wearing a cloth mask over the surgical mask. If high-filtration masks are available in pediatric sizes, they might be an option for certain students who would be able to tolerate them. The most effective masks for children are masks that they can comfortably and consistently wear.

Test-to-Stay Dr. Vergales, who has been serving on various pandemic committees with the VA AAP, the former governor, a consortium of school and health department officials and has been directly advising ACPS, spoke about the feasibility of instituting a [Test-to-Stay](#) program for students to be able to stay in school following an exposure. He explained that in the controlled school environment employing layered mitigation strategies, testing students with rapid antigen tests at given intervals would be a safe way to minimize the academic and socio-emotional disruption of quarantine.

He went on to describe current barriers including: limited availability of antigen tests, the need for a [CLIO Waiver](#), and logistical challenges in an already strained school health services staff.

Points in the ensuing discussion:

- Perhaps this is an endeavor that can be initiated once the current surge recedes
- Would this testing be only for school-based exposures?
- Could it be used for sibling exposures?
- What is the recommended testing cadence?
 - In LA, they are testing every three days
 - In other localities, the frequency has been every 2 days
 - VDH recommends daily testing for 5 days
- Perhaps the rollout could be staged with testing of in-school exposures first
- Students and staff with symptoms must stay home irrespective of testing (or vaccine status)
- Omicron may be less detectable on an antigen test
- Rapid antigen tests pick up about 50% of asymptomatic positives
- Would a case that tests as a false negative be less contagious?
- The risks of missing cases through antigen testing would have to be weighed against the benefits to keeping students in school.

- The mental health impacts of the pandemic and extended school closures are significant with increased reports of childhood depression, anxiety, and related conditions
- In-patient pediatric psychiatric hospitalizations are high
- The SHAB supports efforts to keep children in school to the extent safely possible

The SHAB will revisit this issue at its next meeting.

School Numbers: Eileen reported that there has been a surge in the number of cases reported cases in first week back after winter break and snow days. For the week of 1/10, there have been 161 student cases and 40 staff cases. She reported that the school nurses have been extremely busy doing the contact tracing. She and Gayle estimated that it takes at least 1 hour per case, netting on average 7 close contacts with about 3 who must quarantine due to the exposure and their vaccine status.

ACPS protocols relative to new CDC guidance on abbreviated isolation and quarantine On December 27, the CDC released guidance on [shortened isolation and quarantine](#) periods based data about the shorter incubation period of the Omicron variant. (from 10 days to 5 days for both iso and quar). ACPS and CCPS determined that the division would return to school in the same posture regarding mitigation strategies as we have been using. Given the fact that the timing of revised guidance from the CDC and VDH did not allow enough time to pivot, the case counts are at the highest point of the pandemic, and the fact that our current measures are stricter, they determined that the safest call to cut down on potential confusion and anxiety for our employees and families is to maintain the status quo. Officials from the BRHD agreed. The plan is to monitor the data and adjust if warranted. As of 1/15, ACPS changed the protocol about staff who are fully vaccinated but not boosted.

Who Needs to Quarantine After an Exposure to COVID-19? (Effective 1/15/2021)

People Who Need to Quarantine	People Who Do NOT Need to Quarantine
All unvaccinated individuals regardless of age	All individuals who received 2 doses of Moderna and Pfizer vaccines and who have received a booster dose
All partially vaccinated individuals (only 1 dose or not at least 2 weeks since 2 nd dose)	All students who have received 2 doses of Pfizer vaccine but have not received a booster dose even if 2 nd dose was > 6 months ago
All those who have been vaccinated but not boosted if aged 18 and over and it has been > 6 months since 2 nd vaccine of Moderna or Pfizer (see below)*	All those who received their 2 nd dose of Moderna or Pfizer within 6 months even if they have not received a booster dose, or those who received their single dose of Johnson and Johnson within 2 months
Individuals who had a previous COVID infection more than 90 days before the exposure who meet the above criteria	Individuals who have tested positive within the past 90 days

*School staff who have completed their primary COVID vaccine series, but have not yet received a booster dose may end quarantine after 5 days if they test negative on day 5 or later and are symptom free.

Please note, as of 1/5/2022, there is no longer a time interval after receiving a booster dose that an individual would have to wait in order to avoid quarantine provided the exposure occurred after receipt of the booster dose.

Fully vaccinated household contacts Eileen reports that various stakeholders would like a statement from the SHAB about quarantine for fully vaccinated household contacts of someone who tests positive for COVID. Given observations of the transmissibility of the Omicron variant even in the fully vaccinated, people believe it is irresponsible to allow family members to stay in school. The BRHD supports the [CDC guidance](#) that people up-to-date with vaccinations still do not need to quarantine.

Eileen shared data from a [technical briefing](#) that Ryan McKay of the BRHD shared with her.

Table 5. Secondary attack rates for contacts of cases with Omicron VOC-21NOV-01 (B.1.1.529) and Delta
(Case test dates 15 November to 14 December 2021, exposure dates 15 November to 11 December 2021, variant data as of 20 December 2021 and contact tracing data as of 21 December 2021)

Variant	Count of cases	Household contacts becoming cases / all household contacts	Secondary attack rate amongst household contacts (95% CI)	Non-household contacts becoming cases / all non-household contacts	Secondary attack rate amongst non-household contacts (95% CI)
Delta	256,854	40,644 / 403,162	10.1% (10.0%-10.2%)	2,922 / 102,997	2.8% (2.7%-2.9%)
Omicron	27,803	2,539 / 18,682	13.6% (13.1%-14.1%)	1,109 / 14,606	7.6% (7.2%-8.0%)

Secondary attack rates from NHS Test and Trace should generally be considered lower bounds due to the nature of contact tracing and testing, and specifically so here because of the restricted (7 days) time period for follow up. Data provided is for exposures in the period until 11 December 2021 in order to allow some time for contacts to become cases, hence case counts are lower than other sources. Contacts are included in secondary attack rates if their date of exposure if the contact is a non-household contact, or onset or test of exposing case if the contact is a household contact, is during the period of study.

The board issued the following recommendation: **The SHAB board recommends following the CDC guidance that fully vaccinated individuals (or those whose [vaccines are up-to-date](#)) not be required to quarantine after an exposure even within a household, but recommends that families be advised to try to isolate positive individuals from the rest of the family as much as possible, and to encourage masking, spacing and disinfecting in the home.**

Upcoming meetings

March 17

April 14

May 12