MI SAFE SCHOOL SARS-COV-2 TESTING PROGRAM

JANUARY, 2021

STATE OF MICHIGAN GUIDELINES FOR OPERATING SCHOOLS SAFELY

SARS-COV-2 TESTING IN SCHOOLS

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); managing school operations (e.g., class sizes); and preparing for when someone gets sick.

Testing is not a requirement for schools to return to in-person learning. Schools that follow existing guidance carefully and diligently are not considered major risks for outbreaks. However, testing and early detection of cases may be one additional tool that may be used to allow for in-person instruction.

The state has worked with the Michigan High School Sports Association to pilot a testing program in 200 state high schools. Now that feasibility has been assessed, the state will roll out a voluntary program to offer weekly testing to educators in public schools. Additional pilot programs may also be offered to school districts that are interested in a limited amount of student testing for the purposes of surveillance.

Testing in schools is not a replacement for mitigation practices, including use of masks and social distancing.

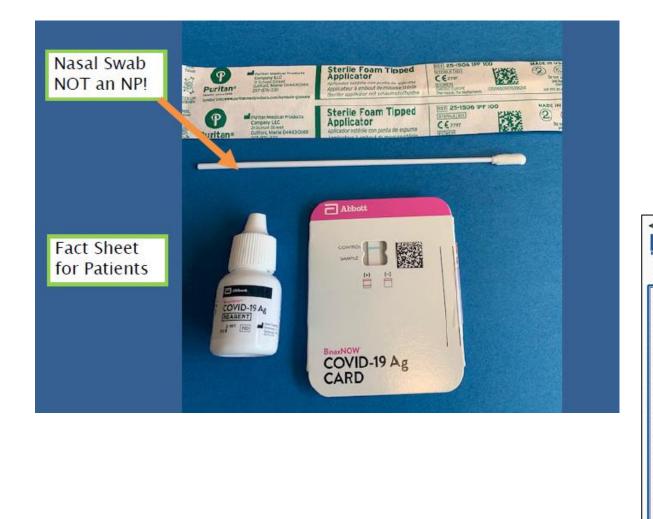
MI Safe School SARS-CoV-2 Testing Program

- Testing is **not a requirement** to return to in-person learning
- Testing and early detection of cases may be one additional tool to allow for in-person instruction
- This is a voluntary program offering weekly testing for educators involved in face-to-face instruction



School Sports Pilot – What did we learn?

- •7,000 participants in 200 schools
- •Testing of up to 80 people per hr (4 staff)
- >99% of tests were negative
- •Testing revealed 43 COVID + participants



What the test looks like

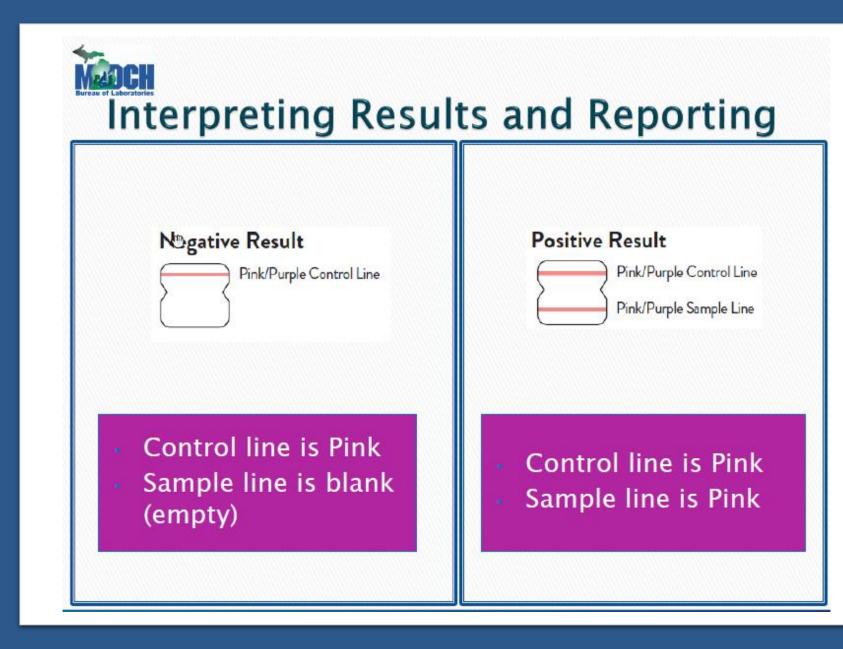
Interpreting Results and Reporting



Positive Result	
(=	Pink/Purple Control Line
\leftarrow	Pink/Purple Sample Line

Control line is Pink Sample line is blank (empty)

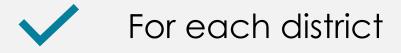
Control line is Pink Sample line is Pink



What the test looks like Step 1. Engagement with affected stakeholders

- Email, webinar, letter etc
 - Educators
 - Parents
 - School nurses

Step 2. Identify Point of contact





For each school (building)

THEN

complete interest survey

Step 3. Staff training videos

Watch training videos and review links

02

Attend training webinar 03

Attend MDHHS office hours if questions

*Identify staff to perform tests and staff to perform data entry

Step 4. Plan for Specimen collection:





Surgical masks

Gloves

Eye protection: face shield or goggles Disposable Coat or Gown

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Do you have a space to conduct the tests?



Do you have biohazard bags?

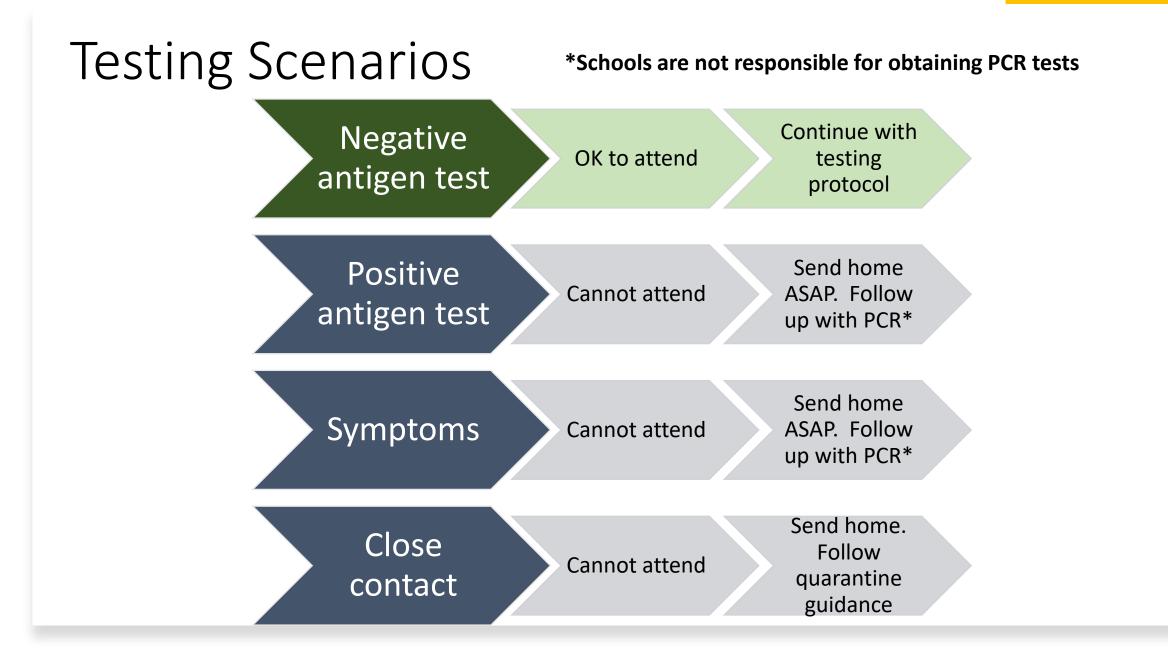
Step 5. Plan for those testing positive and for outbreak management

Positive participant

- Send home
- Follow up with doctor/urgent care/drive up PCR testing

Outbreak

• Work with your LHD



Participant First Name: _____ Last Name: _____

DOB: _____ School: _____

Please carefully read the following informed consent, which is required to participate in organized sports, as stated in the Michigan Department of Health and Human Services' ("MDHHS") "Gatherings and Face Mask Order" dated December 18, 2020, until further order or direction from the MDHHS.

Please carefully read the following notice and sign the authorization to test for COVID-19.

1. I understand that the COVID-19 testing will be conducted three times per week through a BinaxNOW antigen test, or other acceptable test as ordered by an authorized medical provider or a public health official.

2. I understand that my ability to receive testing is limited to the availability of test supplies.

3. I understand that I am not creating a patient relationship with the ordering physician by participating in this testing. I understand the entity or individual performing the test may be a school administrator or coach, and is not acting as my medical provider. Testing does not replace treatment by my medical provider. I assume complete and full responsibility to take appropriate action with regards to my test results and my medical care. I agree I will seek medical advice, care, and treatment from my medical provider or other health care entity if I have questions or concerns, if I develop symptoms of COVID- 19, or if my condition worsens.

 I understand it is my responsibility to inform my health care provider of a positive test result, and that a copy will not be sent to my health care provider for me.

 I understand that my antigen test result will be available in 15-30 minutes. If the result is positive, it will need to be confirmed with a polymerase chain reaction ("PCR") test before participation in organized sports will be approved.
I understand and acknowledge that a positive antigen test result is an indication that I need to self-isolate to avoid infecting others until I obtain a negative PCR test result.

7. I have been informed of the test purpose, procedures, and potential risks and benefits. I will have the opportunity to ask questions before proceeding with a COVID-19 diagnostic test at the testing site. I understand that if I do not wish to continue with the COVID-19 diagnostic test, I may decline to test. If I decline to test, I may not participate in athletic practice or competition.

8. I understand that to ensure public health and safety and to control the spread of COVID-19, my test results, which will be retained by an appropriate schools administrator, may be shared with third parties, including the appropriate health authorities as required by law, and I hereby consent to the same under the Family Educational Rights and Privacy Act ("FERPA") and the Health Insurance Portability and Accountability Act ("HIPAA").

9. I understand, acknowledge, assume, and accept any and all risks of injury and illness associated with participating in the pilot testing program and any related practices and competitions.

10. I understand that I may withdraw my consent to participate in testing at any time, and that doing so will forfeit my ability to participate in the pilot program and athletic practice or competition.

AUTHORIZATION/CONSENT TO TEST FOR COVID-19

□ I agree to undergo the COVID-19 antigen testing for the duration of the fall athletics testing pilot period/ authorize myself (or my minor child) to undergo testing.

Step 6. Finalize consent forms

*This plan is HIPAA and FERPA compliant. Work with district lawyers

Steps to Enroll

Now:

- 1. District fills out interest survey: <u>http://bit.ly/schoolCOVIDtestinginterest</u>
- Review enrollment materials at <u>www.Michigan.gov/schoolcovidtesting</u>. Attend MDHHS training series and/or MDHHS office hours to learn more and train staff

Later:

- 1. Gather participant consent and school participation agreements
- 2. District submits enrollment and places first Binax order with MDHHS

MDHHS Training Series and Office Hours

Thursday, January 14, 2021 (10-11 am): Teams Live Event: Introductory Webinar and Q&A Tuesday, January 19, 2021 (2-3 pm): Teams Live Event: Enrollment Requirements and Forms Wednesday, January 20, 2021 (2-3 pm): Teams Live Event: BinaxNOW Training Friday, January 22, 2021 (9-10 am): Office Hours Monday, January 25, 2021 (2-3 pm): Reporting and Reordering January 29, 2021 (9-10 am): Office Hours

All events in the series will be online. Links will be posted in advance and recordings will be posted afterward at <u>www.Michigan.gov/schoolcovidtesting</u>. MDHHS plans to hold more office hours through February and will add more office hours as needed.

Questions?

www.Michigan.gov/schoolcovidtesting