Kansas
Department of Health and Environment

COVID-19 Testing Guidance for K through 12
2022-2023 School Year

8/1/2022 Revisions and Additions are highlighted in yellow through out this document and are bulleted below:

- Adding context on Definition of and Test to Stay cadence for household contacts.
- Introduction of Over the Counter (OTC) test kits for at home use.
- Considerations for schools to test ANY close contact vs just susceptible close contacts based on recent variants.

School-based testing helps prevent transmission of SARS-CoV-2, the virus that causes COVID-19, and enables students and staff to remain in school for in-person learning, sports, and extracurricular activities. Regular school-based testing, in addition to COVID-19 vaccination, physical distancing, good ventilation, and proper mask wearing when community transmission levels are high, is a safe and effective way to help prevent the spread of COVID-19 and help keep schools open safely for in-person learning.

In addition to testing, Public Health continues to recommend quarantine and isolation measures to prevent transmission of SARS-CoV-2. While Public Health has transitioned away from investigating every COVID-19 case and contacting everyone potentially exposed, identifying cases and close contacts in certain settings, such as schools, remains an effective strategy for preventing disease spread. Schools should continue to implement layered prevention strategies like diagnostic testing, Test-to-Stay strategies, and universal indoor masking when community levels are high based on the KDHE Weekly Cumulative Incidence Rate and CDC COVID-19 Community Levels. The KDHE Weekly Cumulative Incidence Rate map shows the rate of new cases each week by county and is an early indicator of increasing disease rates. The CDC Community Levels map leans more heavily on when an area is experiencing increased hospitalizations and hospital capacity issues which are downstream effects of an increase in cases, and thus a late indicator of rising community transmission. **Federal funding is available through KDHE for the 2022-2023 school year to pay for staffing, supplies, equipment, and other resources needed for COVID-19 school testing programs.**

SCHOOL TESTING PROGRAMS

School testing programs will help schools meet increased testing demand during possible future surges in COVID-19 cases and help limit outbreaks in schools. KDHE will continue to provide rapid testing options

that produce results within 15 to 20 minutes. Tests offered are free, quick, and easy and will help identify cases amongst students or staff, even if they do not have symptoms.

Schools are expected to follow applicable legal requirements related to consent for testing; staff should not be tested without consent and students should not be tested without the consent of both the student and their guardian. Schools should keep test results confidential and only share results with those who by law, including local and state Public Health, may have access.

DEFINITIONS

Close Contacts: A close contact is someone who was less than 6 feet away from an infected person (laboratory-confirmed or a clinical diagnosis) for a cumulative total of 15 minutes or more over a 24-hour period (for example, three individual 5-minute exposures for a total of 15 minutes).

> **K-12 Exception:** In the K–12 indoor classroom setting or a structured outdoor setting where mask use can be observed (i.e., holding class outdoors with educator supervision), the close contact definition **excludes** students who were between 3 to 6 feet of an infected student (laboratory-confirmed or a clinical diagnosis) if both the infected student and the exposed student(s) correctly and consistently wore well-fitting masks the entire time. This exception does not apply to teachers, staff, or other adults in the indoor classroom setting.

Quarantine: Quarantine is a public health strategy used to prevent transmission of SARS-CoV-2, the virus that causes COVID-19, by keeping people who have been in close contact with someone with SARS-CoV-2 infection apart from others. Persons who are close contacts should quarantine at home for 5 full days based on their vaccination and booster status or history of prior infection in the past 90 days (see Table 1). The date of close contact with someone with COVID-19 is considered day 0. Day 1 is the first full day after last close contact with someone with COVID-19. Close contacts should wear a well-fitting mask for 5 additional days following quarantine. For people who cannot or will not mask, a 10-day quarantine period is recommended. You can utilize the CDC's Isolation and Quarantine Calculator to help determine how long individuals should quarantine.

While quarantine normally occurs at home, school-based testing programs allow a "modified quarantine" called **"Test to Stay" (TTS)** where students and staff who have been exposed can remain in-person at school during quarantine using a testing strategy (see TTS details in Testing Strategies section below).

Isolation: Isolation is a public health strategy that helps prevent viral transmission from person to person by separating those infected with the virus from those who are not infected. Students/staff who test positive for COVID-19 should isolate at home for at least 5 days (day of symptom onset is Day 0 or day of positive test if asymptomatic). CDC's Isolation and Quarantine Calculator is a tool to help determine how long individuals should isolate.

Before leaving home isolation, students/staff should be fever free for 24 hours without the use of fever-reducing medication and other symptoms should be improving. Schools can consider requiring a negative antigen test to return to school on day 6. Following return from home isolation, students/staff should wear a well-fitting mask indoors and outdoors when around others for 5 additional days. If student/staff cannot wear a mask when around others, they should isolate at home for 5 additional days (10 days total).

K.S.A 65-122 provides the legal requirement for schools and parents to keep anyone known to be infected with an infectious disease, including COVID-19, in isolation for the prescribed period (5 days home isolation followed by 5 days of masking or, if the person cannot or will not mask, then the period of isolation is 10 days).

Susceptible/non-immune: An individual is considered susceptible or non-immune to COVID-19 if they

- Have received two doses of an mRNA vaccine more than 5 months ago but have not received the recommended booster dose when eligible.
- Have received the single-dose Johnson & Johnson vaccine more than 2 months ago but have not received the recommended booster dose when eligible.
- Have not received any vaccine doses or have not completed a primary vaccine series AND there is no evidence of SARS-CoV-2 infection in the previous 90 days.

SCHOOL TESTING PROGRAM CONSIDERATIONS

Moving forward there will be a stronger focus on individual responsibility for testing and, when a person tests positive, for notifying the school and/or their close contacts about potential exposure.

Expectations for K-12 school districts:

- Communicate that it is the responsibility of families to monitor their children for signs of COVID-19 and to keep them home when sick.
- Schools may consider posting a list of classrooms and extracurriculars and the date(s) of exposure or push notifications to parents. Notifications should not identify the COVID-19(+) individual. Alternatively, schools may consider messaging to parents about the possibility of widespread transmission in public spaces. Messaging should:
    - Clearly state that anyone in that classroom/extracurricular activity is potentially exposed but that **specific** close contacts may not be identified and notified by the school.
    - Include education on how to self-identify as susceptible or not immune to COVID-19.
    - Include steps that need to be taken at home and what strategies, such as onsite or at home testing or masking policies, the school has available to keep themselves and others safe.
    - Remind parents to watch for signs and symptoms of COVID-19 for 10 days after exposure, especially in those susceptible.
    - Schools should consider requiring all teachers, staff, visitors, students, and children ages 2 and older in K-12 schools and Early Care and Education (ECE) programs, regardless of vaccination status, to mask when CDC COVID-19 Community Levels are **HIGH**. Schools can also consider recommending masking when the weekly cumulative incidence rate in Kansas is **HIGH** as this is an indicator of rising community transmission.
- Schools should ensure public health guidelines are followed and, if necessary, reach out to their LHD for support.
- Schools should consider enrolling any student/staff in Test to Stay if exposed, regardless of vaccination status or previous infection. Current variants are more transmissible and able to evade immunity and infect persons who have previously had COVID-19 or have been vaccinated.
- Schools should consider requiring anyone potentially exposed to wear a well-fitting mask around others for 10 days after exposure (15 days for household contacts).

- Encourage students/staff to stay home when they feel ill and get tested, preferably more than once.
- Schools should consider requiring student/staff who tested positive to do a rapid antigen test before returning to school on the morning of day 6. If positive, they should stay home for an additional 5 days (daily testing to return to school is not recommended as it is a strain on testing resources).
- Schools should continuously re-evaluate and adapt their multi-layered approach to mitigate spread of COVID-19. Strategies include physical separation, hygiene and disinfection, vaccination messaging, testing, improved ventilation, and masking.

Expectations for parents:

- Regularly monitor your children for symptoms of COVID-19.
- If your child is symptomatic, have them tested with a diagnostic test. If they test negative with an antigen test, keep your child home and retest in 24-48 hours to be sure.
- Do not send your child to school if they are sick or if they test positive.
- Notify your school if your child tests positive. CDC's Isolation and Quarantine Calculator is a tool to help determine how long individuals should isolate, quarantine, or take steps to prevent spreading COVID-19.
- If your child is exposed to COVID-19 outside of school, notify the school.

What to do when a student/staff tests positive:

- Students/staff who test positive for COVID-19 should stay home for at least 5 days and be fever-free for 24 hours without the use of fever reducing medication before leaving home (minimum 5-day home isolation). After that, they may resume normal activities but should wear a well-fitting mask around others, indoors and outdoors, for an additional 5 days. If a well-fitting mask can or will not be worn isolation for 10 days is indicated.
- Consider testing using an antigen test the morning of day 6. If positive, home isolation should continue for an additional 5 days.
- CDC's Isolation and Quarantine Calculator is a tool to help determine how long individuals should isolate, quarantine, or take steps to prevent spreading SARS-CoV-2.

What to do in case of potential exposure

- Everybody who was potentially exposed and considered a close contact should monitor for COVID-19 symptoms for 10 days, test immediately if any symptoms appear, and mask, indoors and outdoors, for a minimum of 10 days.
- If there is evidence of SARS-CoV-2 infection in the previous 90 days and/or the individual is up to date with their vaccinations, they are considered immune or not susceptible and quarantine is not indicated. However, consider enrolling in TTS or test on day 5 as persons considered not susceptible may still get COVID-19. Current variants are more transmissible and able to evade immunity and infect persons who have previously had COVID-19 or have been vaccinated.
- Susceptible/non-immune individuals:
    - Household contacts: Should quarantine as long as they are exposed to the case plus an additional 5 days beyond their last exposure.
        - Not able to mask: Quarantine for 15 days.
        - Able to mask: Quarantine for 10 days, test on day 10, and mask for 15 days.

- Non-household contacts:
  - Not able to mask: Quarantine for 10 days, do an antigen test on days 5 and 6 or just a PCR test on day 6.
    Able to mask: Quarantine for 5 days, do an antigen test on days 5 and 6 or just a PCR test on day 5 **OR** can remain in school and participate in activities if the modified quarantine plan with TTS is followed.

Table 1. Quarantine, testing and masking recommendations for close contacts		
If student/staff is a close contact and is <u>NOT</u> up to date on COVID-19 vaccinations and has not had COVID-19 within the past 90 days, they are considered susceptible:	**Stay home and quarantine for at least 5 days** Wear a well-fitting mask around others Get tested at least 5 days after last close contact (even if symptoms don't develop).	**After quarantine**, watch for symptoms until 10 days after last close contact with someone with COVID-19 If symptoms develop, get tested immediately. Continue to stay at home until results are known. Wear a well-fitting mask around others for 10 full days.
If student or staff is a close contact and is up to date on COVID-19 vaccinations:	**No quarantine** Does not need to stay at home unless symptoms develop. Get tested at least 5 days after last close contact (even if symptoms don't develop).	Watch for symptoms until 10 days after last close contact with someone with COVID-19. If symptoms develop, get tested immediately. Continue to stay at home until results are known. Wear a well-fitting mask around others for 10 full days
If student or staff is a close contact and had COVID-19 within the past 90 days (tested positive using a PCR or antigen test):	**No quarantine** Does not need to stay at home unless symptoms develop. Get tested at least 5 days after last close contact (even if symptoms don't develop).	Watch for symptoms until 10 days after last close contact with someone with COVID-19. If symptoms develop, get tested immediately. Continue to stay at home until results are known. Wear a well-fitting mask around others for 10 full days.

TEST TYPES

Point of Care (POC) Tests: Schools have the option of providing tests onsite via POC tests within schools or another centralized location within the school district for students, teachers, staff, and household members. These tests can be rapid antigen or PCR tests.

Over the Counter (OTC) Tests: While schools are encouraged to continue offering onsite testing, OTC antigen tests are now also available for distribution to students and staff for home testing. OTC tests can be used for diagnostic, screening, Test to Stay, and Test to Play strategies. OTC testing expands testing access and options and can decrease the school testing program workload and need for dedicated testing personnel. Additionally, OTC testing should enable schools to keep up with potential surges in COVID-19 cases and increased testing demands.

Schools interested in OTC testing should create plans for students/staff to pick up tests from their school or school district for home testing. School districts can also consider alternative community locations where students/staff can pick up tests to increase access (such as public libraries, fire stations, or other community partners that have different hours/locations).

TESTING REPORTING REQUIREMENTS

KDHE no longer requires reporting of negative POC results to KDHE using the Kansas Notifiable Disease Portal or LabXchange. Positive results from rapid antigen and rapid PCR tests are still reportable to KDHE within 24 hours of test administration. While negative results no longer need to be reported to KDHE, per the Health Insurance Portability and Accountability Act of 1996 (HIPAA), patients have the right to receive a written notification of their test result. Schools may choose to continue reporting negative results via LabXchange, which can notify patients of their results, or may plan an alternative strategy for communicating results.

Neither negative nor positive results of OTC tests are required to be reported to KDHE; however, it is recommended that students/staff who test positive inform the school promptly.

TESTING STRATEGIES AND PLANS

Diagnostic Testing: Diagnostic testing is intended to identify current infection in individuals and should be performed on anyone that has signs and symptoms consistent with COVID-19 and/or following recent known or suspected exposure to SARS-CoV-2.

Examples of diagnostic testing include:

- Testing anyone with symptoms consistent with COVID-19, be it students/staff that become symptomatic at school during the school day or develop symptoms while at home.
- Testing vaccinated and unvaccinated people who were exposed to someone with a confirmed or suspected case of COVID-19.
- For school districts that do not allow in-person learning during quarantine:

- Test susceptible close contacts upon return to school from 5-day home quarantine on day 6 with a PCR test **OR**
- Provide at-home OTC tests for student/staff to self-test on days 5 and 6 **OR**
- Offer POC antigen testing at the school for student/staff to self-test on days 5 and 6.
- Student/staff can return to school if the test results are negative. Student/staff should remain symptom free and wear a mask daily for 10 full days following exposure.

Screening Testing: Screening tests are intended to identify people with are infected with SAR- SARS-CoV-2 who are asymptomatic and do not have known, suspected, or reported exposure to someone with COVID-19. Screening helps to identify unknown cases more quickly so that measures can be taken to prevent further transmission. Schools can consider offering screening testing to facilitate a safer return to school at the beginning of the school year or after breaks.

Schools can consider screening testing to facilitate safer participation in any activities with elevated risk such as activities that involve singing or shouting, band participation, and vigorous exercise that could lead to forceful or increased exhalation. Schools can choose to routinely test any involved parties who could come into close contact with others during these types of activities. Schools should consider implementing screening testing up to 24 hours before sporting, competition, or extracurricular events. Screening testing may be most valuable in areas with substantial or high community transmission levels, in areas with low vaccination coverage, and in schools where other prevention strategies are not implemented.

Test to Stay (TTS): TTS is a school testing strategy for keeping asymptomatic close contacts in the school setting as an alternative to traditional quarantine at home. TTS combines identifying close contacts and serial testing (testing that is repeated at least twice during a seven-day period after last close contact with a person with COVID-19) and participation in a TTS program provides an alternative whereby exposed students and staff (close contacts) can remain in school instead of quarantining at home. This includes people who are not up to date on their COVID-19 vaccines, have not had COVID-19 in the past 90 days, do not test positive for SARS-CoV-2, and have no symptoms. Students/staff who participate in TTS should properly wear well-fitting masks for at least 10 days while around others and should stay home and isolate if they develop symptoms or test positive for SARS-CoV-2.

SPECIFIC PLANS FOR TESTING STRATEGIES

- **Test to Know:** This plan provides the resources to provide diagnostic testing for students, teachers, and staff on site within schools or another centralized location within the school district. This plan aims to provide rapid COVID-19 testing on site within schools for students, teachers and staff who become ill with symptoms during the school day.

- **Test to Stay (TTS)**: Students who participate in TTS should wear well-fitting masks daily for at least 10 days after exposure and should stay home and isolate if symptoms develop or they test positive.

Testing is preferably done before the start of the school day. If operationally not feasible, the close contact should be tested around the same time each day. Daily testing does not include weekends. If identifying specific susceptible close contacts is operationally difficult, schools may choose to deem everyone in a classroom/activity/etc. potentially exposed and enroll the larger group in the TTS program.

- **Test to Stay and Learn:** This plan provides the resources to test susceptible close contacts during their quarantine period with the goal of keeping close contacts who test negative on-site and in-person learning/teaching. Participation in this testing strategy effectively reduces or eliminates the need for close contacts to miss in-person school after exposure to a case.
- **Test to Stay, Play and Participate:** This plan provides the resources to test susceptible close contacts daily during their quarantine period with the goal of keeping close contacts who test negative participating in extracurricular activities and school-based events. Participation in this testing strategy effectively reduces or eliminates the need for close contacts to miss extracurricular activities and school-based events.

TEST TO STAY/TEST TO PLAY AND PARTICIPATE TESTING CADENCE

Susceptible close contacts should be tested upon notification of their exposure and then every other day through day 7 allowing them to continue in-person:

- Using rapid antigen tests (POC/OTC): minimum of 3 tests with at least one test occurring on day 5 or later **OR**
- Using rapid PCR (POC): minimum of 2 tests with at least one test occurring on day 5 or later

*It is important to note that more frequent testing enables students who become infected with SARS-CoV-2 to be identified sooner, thus, more effectively prevents transmission in the school setting.

If a school chooses not to implement a TTS program, susceptible close contacts should quarantine at home and should not attend school in-person.

HOUSEHOLD CONTACTS

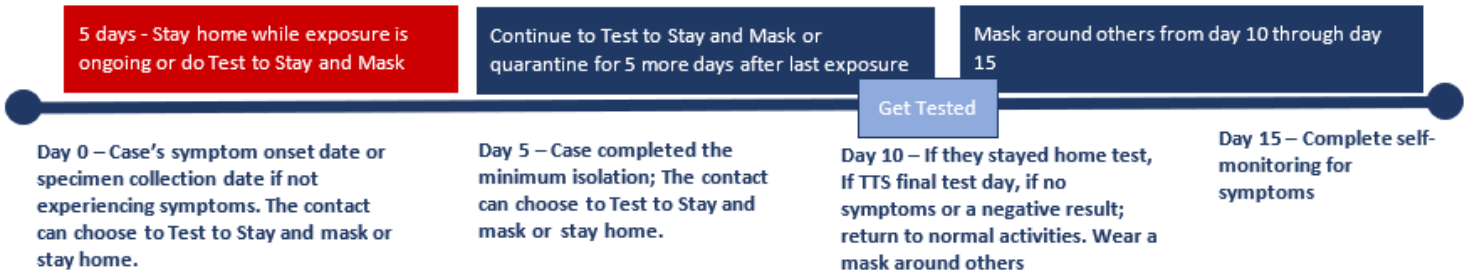
A household contact is an individual who shares any living spaces with a case. This includes bedrooms, bathrooms, living rooms, kitchens, etc.

If the contact can separate from the case within the home, then they are no longer considered exposed and can follow the guidance for a non-household contact. To separate, the case 1) should never be in the same room as household members 2) should not share plates, cups, dishes, or phones with household members 3) should have their own bathroom and bedroom.

Able to wear a well-fitting mask

Quarantine start: Household contacts should quarantine at home or opt into Test to Stay program if they are exposed to the case plus a 5-day period beyond their last exposure.

Quarantine end: The Test to Stay period or at-home quarantine can end after Day 10. The contact should monitor for symptoms and wear a mask for 5 additional days

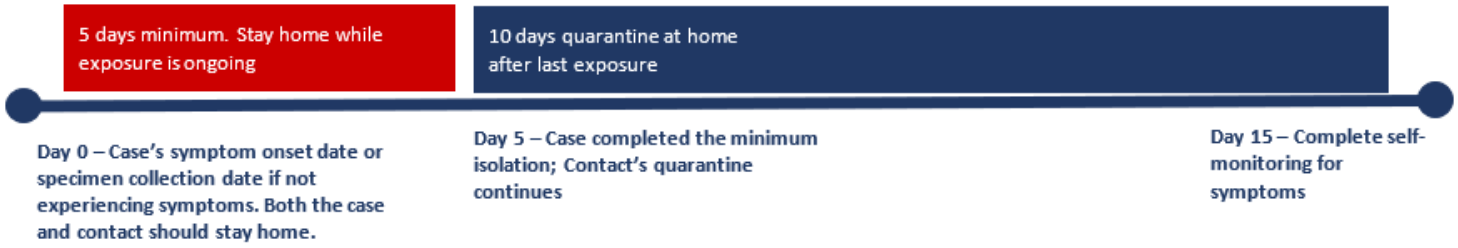


NOT able to wear a well-fitting mask

Quarantine start: Household contacts should quarantine as long as they are exposed to the case, and for a 5-day period beyond their last exposure.

Quarantine end: The at-home quarantine can end after at least Day 15.

- If the contact cannot separate from the case within the home, the contact should quarantine for the case's (minimum) 5-day isolation period plus an additional 10 days.



School districts choosing not to have a TTS program should:

- Consider implementing diagnostic testing (TTK) to support students/teachers/staff who become symptomatic during the school day and/or for students/teachers/staff that call and notify the school that they are symptomatic.
- Consider implementing rapid antigen testing for people returning from 5 days home isolation after testing positive. This can be a one-time test on the morning of return to school (day 6) with the option to test again the following morning.
- Consider implementing rapid antigen or rapid PCR testing for people returning from 5 days home quarantine on days 5 and 6 with either OTC or POC tests. They can also test on day 6 with a PCR test.
- Consider providing OTC tests and encourage your school community to test if symptomatic, exposed, returning from home isolation, or returning from home quarantine.

MONITORING TRANSMISSION TRENDS AND MASKING GUIDANCE

Monitoring Transmission

K-12 school testing program staff should regularly monitor for SARS-CoV-2 infection among students, staff and educators and changing trends in the school and surrounding community.

- Multiple cases among students, teachers, or staff in a classroom within 14 days of each other (AND NO likely known epidemiologic link to a case outside of the school setting) could indicate transmission within the classroom. If multiple cases in the same classroom are identified, schools should consider implementing universal masking for at least 2 weeks for the entire classroom to prevent further transmission among the classroom or group.
- Multiple cases among students, teachers, or staff in several classrooms within 14 days of each other (AND NO likely known epidemiologic link to a case outside of the school setting) might indicate wider transmission within the school. In this circumstance, schools should consider implementing school-wide universal masking for at least 14 days to prevent further transmission within the school.
- Consider monitoring increases in absenteeism above their baseline. If schools identify increases, especially due to respiratory illness, or an increase in reported cases of COVID-19, they should contact their LHD. LHDs should work closely with schools to determine if an outbreak is suspected and if activation of outbreak response strategies is needed to control transmission.

Masking Guidance

Students returning from isolation and quarantine should consider wearing a well-fitting mask when around others, for 10 full days after their last close contact with someone with COVID-19. During times in the school day when students or staff members may typically remove masks indoors (such as during lunches, snacks, band practice, etc.), have a plan for them to adequately distance from others and ensure they wear their masks when not actively participating in these activities (such as when they are not actively eating). If a student cannot participate in an activity while safely masking, they should not participate in the activity for the remaining time they are considered potentially infectious.

All individuals ages 2 and older, including students, teachers, staff, or visitors, regardless of vaccination status should consider masking in the K-12 setting when CDC COVID-19 Community Levels are **HIGH**. Schools can also consider recommending masking when the weekly cumulative incidence rate in Kansas is **HIGH** as this is an indicator of rising community transmission.

At all community COVID-19 levels, people can choose to wear a mask based on personal preference, informed by personal level of risk. People with symptoms, a positive test, or exposure to someone with COVID-19 should wear a mask.

ADDITIONAL RESOURCES

- School Testing for COVID-19 | CDC
- Guidance for COVID-19 Prevention in K-12 Schools | CDC
- Overview of COVID-19 Isolation for K-12 Schools | COVID-19 | CDC
- Steps for Determining Close Contact and Quarantine in K–12 Schools (cdc.gov)

- Toolkit for Responding to COVID-19 Cases | CDC
- CDC's Communication Toolkit for Schools**:** Letters, FAQs, social media posts, posters, and flyers to reach parents and educators
- Open and Safe Schools**:** Toolkit to support state and public health leaders and school leaders in starting or continuing testing programs (from the Shah Family Foundation)
- Rockefeller Foundation's K-12 Playbook**:** Detailed, step-by-step guidance to design and start or continue testing programs in schools