



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

9/12/2022

This guidance has been revised to reflect CDC's updated "Operational Guidance for K-12 Schools and Early Care and Education Programs to Support Safe In-Person Learning" issued 8/11/22. **Revisions and additions are highlighted in yellow throughout this document and are bulleted below:**

- Removed the recommendation to quarantine and changed "Test to Stay" program to "Test to Know"
- Test to Know cadence has been modified to reflect testing for those masking versus not masking
- Recommendation for screening testing to focus on high-risk activities during high COVID-19 Community Level
- Describes testing strategy to discontinue masking after isolation
- Resources and links updated
- Added examples of high risk activities

School-based testing helps prevent transmission of SARS-CoV-2, the virus that causes COVID-19, and enables students, teachers 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 within schools and help keep schools open safely for in-person learning.

In addition to testing, Public Health continues to recommend prevention and isolation measures to decrease transmission of SARS-CoV-2. Schools should continue to implement layered prevention strategies like diagnostic testing, screening testing for high-risk activities, testing after exposure, 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 to use and will help identify cases amongst students/teachers/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

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/teachers/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). Before leaving home isolation, student/teacher/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. If they test positive, they should remain in isolation. Testing is not required to determine the end of isolation; however, people can use the test-based strategy outlined in CDC's [isolation guidance](#) to potentially shorten the duration of post-isolation mask use.

Following 5 days of home isolation,

- Student/teacher/staff should wear a high-quality, well-fitting mask when indoors around others at home and in public for 5 additional days (through day 10) **OR**
- Mask until they obtain two negative consecutive antigen tests taken 48 hours apart **OR**
- For those unable to wear a mask, isolate for 5 additional days (through day 10)

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.

Household contact: 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.

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 steps that need to be taken at home and what strategies, testing or masking policies, the school utilizes to keep students/teachers/staff and others safe.
 - Remind parents to watch for signs and symptoms of COVID-19 for 10 days after exposure.
 - 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/teacher/staff in Test to Know if exposed, regardless of vaccination status or history of recent 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 high-quality, well-fitting mask indoors around others at home and in public for 10 days after exposure (15 days for household contacts).
- Encourage students/teachers/staff to stay home when they feel ill and get tested, preferably more than once.
- Schools can consider requiring student/teacher/staff who tested positive and have completed at least 5 days of home isolation to obtain a negative result on a rapid antigen test before returning to school. Review CDC's [isolation guidance](#) for more details.

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:

- [Understand your child's risk](#) of getting very sick. Risk factors for becoming severely ill from COVID-19 include having a weakened immune systems or certain underlying health conditions and being older

aged. Protective factors that can help reduce the risk of getting very sick with COVID-19 include vaccination, timely testing and treatment, and previous infection.

- 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, consider retesting 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.
- Understand that there are different factors that lower or increase [Exposure Risk](#). For example, being in contact with an infected person for longer periods of time, during activities that involve heavy breathing, while the person was symptomatic, without the use of masks, being in poorly ventilated areas, and being in close proximity are all considered scenarios at higher risk for passing the disease from one person to another.
- If your child is exposed to COVID-19 outside of school, notify the school and consider enrolling your child in Test to Know if your school has a school testing program. If your school does not have a testing program, consider testing on Day 5 after exposure, or immediately if your child becomes symptomatic, and have your child mask wear a high quality, well-fitting mask when indoors around others at home and in public through Day 10. If your child cannot mask, consider testing your child more frequently. Free COVID-19 tests may be available at your local health department or through [Project Act](#).

What to do when a student/teacher/staff tests positive:

- Students/teachers/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 high-quality, well-fitting mask indoors at home and in public while around others for an additional 5 days. If a mask cannot or will not be worn, isolation for 10 days is recommended.
- Schools can consider requiring student/teacher/staff who tested positive and have completed at least 5 days of home isolation to obtain a negative result on a rapid antigen test before returning to school. Review [CDC's isolation guidance](#) for more details.

What to do in case of potential exposure:

- Anyone who was potentially exposed should watch for symptoms and wear a high-quality, well-fitting mask indoors around others for 10 full days, and test on day 5, or immediately if they have symptoms, (for close household contacts with potential ongoing exposure, mask while exposure is ongoing and for 10 full days after last exposure).
 - Consider enrolling anyone not masking in Test to Know for more frequent testing. Current variants are more transmissible and able to evade immunity and infect persons who have previously had COVID-19 or have been vaccinated.

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/teachers/staff for home testing. OTC tests can be used for diagnostic, screening, and Test to Know 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/teachers/staff to pick up tests from their school or school district for home testing. School districts can also consider alternative community locations where students/teachers/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/teachers/staff who test positive inform the school promptly.

TESTING STRATEGIES AND PLANS

DIAGNOSTIC TESTING

Diagnostic testing is a school testing strategy intended to identify current infection in individuals and should be performed on anyone who has signs and symptoms consistent with COVID-19 and/or following recent known or suspected exposure to SARS-CoV-2. Schools can choose to conduct testing on-site (POC/OTC) or OTC tests can be sent home with students/teachers/staff.

Examples of diagnostic testing include:

- **Symptomatic Diagnostic Testing:** Testing anyone with symptoms consistent with COVID-19, be it students/teachers/staff that become symptomatic at school during the school day or develop symptoms while at home.
- **Test to Know (TTK):** Testing anyone exposed to someone with COVID-19 or anyone who would like to know their status.

Symptomatic Diagnostic Testing Plan: This plan provides the resources to provide diagnostic testing for students/teachers/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/staff who become ill with symptoms during the school day.

Test to Know (TTK) Plan: This plan provides the resources to provide diagnostic testing for students/teachers/staff who have been exposed to someone with COVID-19. 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 TTK program. Exposed persons should self-monitor for symptoms and isolate if symptoms develop or they test positive. Testing is preferably done before the start of the school day.

Test to Know Testing Cadence (non-household contacts):

- Students/teachers/staff who choose to wear well-fitting masks daily for at least 10 days after exposure should be tested on day 5 following their exposure (POC/OTC).
- Students/teachers/staff who choose not to mask should be tested upon notification of their exposure and then every other day through day 7:
 - 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

Test to Know Testing Cadence for Close Household Contacts:

- Students/teachers/staff who are close household contacts who choose to wear a high-quality, well-fitting mask indoors daily should mask while household exposure is ongoing and for 10 days following their last exposure and testing is recommended on day 5 after last exposure, or immediately if symptoms develop.
- Students/teachers/staff who are close household contacts who choose not to mask should be tested upon notification of their exposure and then every other day through day 7 after last exposure:
 - 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/teachers/staff who become infected with SARS-CoV-2 to be identified sooner, thus, more effectively prevents transmission in the school setting.

SCREENING TESTING

Screening testing is strategy intended to identify people who are infected with SARS-CoV-2 who are asymptomatic and do not have known, suspected, or reported exposure to someone with COVID-19. Screening helps to identify infected persons more quickly so that measures can be taken to prevent further transmission. While CDC no longer recommends routine screening testing in K-12 schools, schools can consider implementing screening testing for students/teachers/staff after high-risk activities, especially at a high COVID-19 Community Level, and for safer return to school after breaks.

Examples of high-risk activities include, activities that involve close heavy breathing like contact sports and singing, activities where masks are not worn, and activities taking place in enclosed, poorly ventilated areas.

Examples of screening testing include:

- Schools can consider offering screening testing to facilitate a safer return to school (such as return following holidays, spring break, at the beginning of the school year).
- Schools can consider screening testing to facilitate safer participation in any school-associated activities with elevated risk or exposure. Schools can also choose to routinely test anyone who comes in close contact during these types of activities (e.g., coaches, assistants, referees, etc.). Schools can also choose to test students/teachers/staff who participate in activities outside of school before they return to school.

Examples of when schools might consider screening testing include:

- **Test to Play and Participate (TPP)** in school-associated activities:
 - Close contact sports that involve vigorous exercise that could lead to forceful or increased exhalation
 - Activities that involve singing or shouting, playing musical instruments (e.g., band, choir, creative arts competitions/performances, cheer)
 - Group travel (e.g., sports games, tournaments, class trips)
 - Gatherings with participants from different areas
 - Any overnight events
 - School-hosted gatherings/activities (prom, dances)
- **Return to School** from activities outside of school:
 - Any activities mentioned above
 - Attending large gatherings
 - Travel

Screening Testing Plans: This plan provides the resources for screening testing. 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 Play and Participate (TPP):** Screening testing (POC or OTC) should be implemented up to 24 hours before sporting, competition, or extracurricular events and offered 5 days after.
- **Return to school:** Schools can consider offering screening testing (POC or OTC) to facilitate a safer return to school. Participating students/teachers/staff should test at least one time 24 hours prior to return.

School districts choosing not to have a TTK program should:

- Consider implementing diagnostic testing 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 providing OTC tests and encourage your school community to test if symptomatic, exposed, returning from home isolation or **before/after high-risk activities**.
 - **Examples of high-risk activities include activities that involve close heavy breathing like contact sports and singing, activities where masks are not worn, and activities taking place in enclosed, poorly ventilated areas.**

MONITORING TRANSMISSION TRENDS AND MASKING GUIDANCE

Monitoring Transmission

K-12 school testing program staff should regularly monitor for SARS-CoV-2 infection among students/teachers/staff and changing trends in the school and surrounding community. **Strategies that can help reduce transmission during an outbreak include wearing well-fitting masks or respirators, improving ventilation (for example moving school activities outdoors, opening windows and doors, using air filters), screening testing, and case investigation and contact tracing.** Early identification of cases to ensure that they stay home and isolate is a critical component of outbreak response. Schools programs may also consider **suspending high-risk activities to control a school- or program-associated outbreak.**

- Multiple cases among students/teachers/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 can 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/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 can 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/teachers/staff returning from isolation should consider wearing a well-fitting mask while around others for 10 full days after their last close contact with someone with COVID-19. During times in the school day when students/teachers/staff 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/teachers/staff 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.

Accommodations may be necessary for exposed people who cannot wear a mask or have difficulty wearing a well-fitting mask. School testing programs can consider recommending masking and/or testing for a classroom in which a student was recently exposed who is unable to wear a mask consistently and correctly.

Additional Resources

- [CDC Schools and Childcare Programs](#)
- [CDC Operational Guidance for K-12 Schools and Early Care and Education Programs to Support Safe In-Person Learning](#)
- [CDC Isolation and Precautions for People with COVID-19](#)
- [CDC Overview of COVID-19 Isolation for K-12 Schools](#)
- [Summary of Guidance for Minimizing the Impact of COVID-19 on Individual Persons, Communities, and Health Care Systems — United States, August 2022 | MMWR \(cdc.gov\)](#)
- [CDC Understanding Exposure Risks](#)
- [CDC's Communication Toolkit for Schools: Letters, FAQs, social media posts, posters, and flyers to reach parents and educators](#)
- [CDC Science Brief: Indicators for Monitoring COVID-19 Community Levels and Making Public Health Recommendations](#)
- [CDC Indicators for Monitoring COVID-19 Community Levels and Implementing Prevention Strategies: Overview and Rationale](#)
- [CDC COVID-19 by County](#)
- [CDC How to Protect Yourself & Others](#)