Missouri COVID-19 Screening Testing for K-12 Schools Program

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES

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BACKGROUND

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Through the Epidemiology and Laboratory Capacity for Prevention and Control of Emerging Infectious Disease-Reopening Schools cooperative agreement with the Centers for Disease Control and Prevention (CDC), the Missouri Department of Health and Senior Services (DHSS) offered screening testing for Missouri's K-12 teachers, staff, and students during the 2021-2022 school year. *New applications for the Screening Testing Program are no longer being accepted.*

This document provides information about participating in the Missouri K-12 screening testing program. Testing offers an additional layer of prevention, helping schools to provide in-person learning for their students with confidence. Screening testing is just one piece of a comprehensive approach for COVID-19 mitigation in schools. Schools participating in screening testing are still advised to maintain or put in place additional layers of prevention to prevent in-school transmission as recommended by CDC and Missouri School COVID-19 Operating Guidance.

What is screening testing?
Screening testing means regularly (e.g., weekly) testing an entire population or portion of the population, without symptoms, with the goal of identifying and isolating COVID-19 positive individuals. This type of testing can help schools identify potential outbreaks early and give them the confidence needed to safely, and with precautions, provide in-person learning for their students. This approach can also help school leaders understand if mitigation efforts are working or if they need measures that are more stringent. Review CDC's information on testing in schools for more information about screening testing.

DHSS offered a screening testing program using a pooled testing approach for any public, private, or charter school.[1] The program provides resources and staffing for the entire testing process including registering individuals for testing, providing testing materials, collecting and testing samples, and reporting results. Participating schools also have access to full staffing support for testing (e.g. testing manager, testing staff) and communication resources. The program provides as much support as possible; however, there are some expectations of the school/district, which are outlined further in this document.

DHSS referenced existing science, expert public health opinion, current policies, and stakeholder input in developing the K-12 Screening Testing Program. The program is subject to change per best practices and recommendations learned from early adopters of screening testing in K-12 schools. For any questions about the K-12 Screening Testing Program, please email k12screeningtesting@health.mo.gov.

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[1] The term "schools/districts" in this document refers to a public school district; charter, private, or parochial school; or approved special education school or education collaborative that seeks to be authorized by the Missouri Department of Health and Senior Services to receive K-12 Screening Testing Services.

CONSIDERATIONS FOR SCHOOL-BASED TESTING PROGRAMS

Whether a school/district chooses to implement a screening testing program with their internal infrastructure, use the State testing vendor, or work with local partners to support the logistics of running a testing program independently, they should consider the following areas necessary for implementing a testing program:

- Meeting regulatory requirements for performing testing, such as having standing orders and a Clinical Laboratory Improvement Amendments (CLIA) certificate of waiver, depending on the type of test used.
- Having dedicated infrastructure and resources to support school-based testing including a testing coordinator, clinical AND clerical support, funding, and staff training.
- Having a mechanism to fulfill the requirement for reporting all testing results (both positive and negative) to the State.
- Obtaining written parental consent for minor students and assent/consent for the students themselves.
- Having physical space to conduct testing safely and privately.
- Maintaining confidentiality of results and protecting student privacy.

Before implementing any COVID-19 testing program, schools should consider their entire testing program. There are resources available to assist schools with this, including:

- Rockefeller Foundation's Covid-19 Testing K-12 Settings: A Playbook for Educators and Leaders
- Open and Safe Schools
- When to Test - COVID-19 Testing Impact Calculator
- CDC's Guidance for K-12 Schools

DHSS has also collaborated with Children's Mercy physicians to provide consultation services for schools that are developing a screening testing program. If you have any COVID-19 school re-entry questions or would like to request a consultation, please submit a COVID-19 School Assistance form. DHSS strongly recommends that schools/districts consult with their local health department (LHD) through program development and implementation to continue to incorporate the latest guidance and science into their school testing program, as it becomes available.

Why should my school/district implement COVID-19 screening testing?

Screening testing can help schools identify potential outbreaks early and give them the confidence needed to safely, and with precautions, offer in-person learning for their students. Because people can spread SARS-CoV-2 without any symptoms, asymptomatic testing can be especially helpful when used in situations where other strategies like masking and distancing are hard to implement, such as in some special education classes or for student athletes. 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. More specifically, screening testing can help:

- Prevent community spread by identifying asymptomatic cases;
- Establish trust and provide reassurance in efficacy of safety protocols and mitigation efforts; and

- Reduce fear and anxiety among staff, students, and families about in-person learning, leading to a more positive teaching and learning experience.

How often should we offer screening testing?

CDC recommends taking into consideration the level of community transmission and implementation of mitigation strategies when deciding on frequency of school-based testing. Schools/districts can use CDC's Indicators for Dynamic School Decision-Making to determine which schools may provide the best settings for school-based testing based on infection risk. Table 1 presents screening testing recommendations based on community transmission.

When using screening testing as a strategy to identify cases and prevent secondary spread, CDC recommends:

- At least weekly testing of teachers and staff who are not fully vaccinated in all levels of community transmission. More frequent testing can increase effectiveness of a screening testing program.
- Weekly testing of students who are not fully vaccinated in areas with moderate (yellow), substantial (orange), and high (red) community transmission.

With COVID-19 vaccine widely available, schools may consider screening testing for certain populations, such as in elementary schools. It may also help facilitate safe participation in sports and other activities with elevated risk, (such as activities that involve singing, shouting, band, and exercise that could lead to increased exhalation). Schools can implement testing among student athletes/participants, coaches and trainers, and any other individuals (such as parent volunteers) who could come into close contact with others during these activities. CDC recommends testing participants who are not fully vaccinated at least once per week for high-risk sports and activities in low and moderate levels of community transmission and twice per week in areas with substantial transmission. Additional recommendations include:

- Testing low-and intermediate-risk sports participants who are not fully vaccinated at least once weekly in areas of moderate, substantial, and high transmission.
- Universal screening testing the day of or day before sporting events, competitions, and activities.

Table 1. Screening Testing Recommendations for K-12 Schools by Level of Community Transmission

	Low Transmission[1]	Moderate Transmission (Yellow)	Substantial Transmission (Orange)	High Transmission (Red)
Students	Do not need to screen students.	Offer screening testing for students who are not fully vaccinated at least once per week.		
Teachers and Staff	Offer screening testing for teachers and staff who are not fully vaccinated at least once per week.			
High-risk sports[2] and activities[3]	Recommend screening testing at least once per week for participants who are not fully vaccinated.		Recommend screening testing twice per week for participants who are not fully vaccinated.	Cancel or hold activities virtually to protect in-person learning, unless all participants are fully vaccinated.

Low- and intermediate-risk sports	Do not need to screen students participating in low- and intermediate-risk sports.[2]	Recommend screening testing at least once per week for participants who are not fully vaccinated.

[1] Levels of community transmission defined as total new cases per 100,000 persons in the past 7 days (low, 0-9; moderate 10-49; substantial, 50-99; high, ≥100) and percentage of positive tests in the past 7 days (low, <5%; moderate, 5-7.9%; substantial, 8-9.9%; high ≥10%).

[2] The NCAA has developed a risk stratification for sports. See https://ncaaorg.s3.amazonaws.com/ssi/COVID/SSI_ResocializationDevelopingStandardsSecondEdition.pdf. Examples of low-risk sports are diving and golf; intermediate-risk sport examples are baseball and cross country; high-risk sport examples are football and wrestling.

[3] High-risk extracurricular activities are those in which increased exhalation occurs, such as activities that involve singing, shouting, band, or exercise, especially when conducted indoors.

What makes screening testing successful?

Many factors can influence the success of a COVID-19 screening testing program. These include:

- Support and advocacy by school/district leadership and school community.
- Collaboration with local officials, including local health department and municipal leaders.
- A strong testing team that includes appropriate personnel and infrastructure (can be made up of internal and/or contracted staff):
  - **Testing Champions**: Superintendent, Director of Nursing/School Health, Director of Wellness
  - **Program Manager or Project Coordinator:** assists in all aspects of testing preparation and implementation
  - **Testing Managers**: Director of Nursing and nursing staff or outside healthcare professionals
  - **Contact Tracers**: nursing staff and/or local health department
- Transparency and two-way communication with families and the community.
- Sharing regular updates via an online COVID information hub, weekly newsletters, and/or email.
- Having a clearly articulated plan for follow-up testing and quarantine protocols.

Testing vaccinated individuals

CDC recommendations suggest exempting fully vaccinated people with no COVID-19-like symptoms and no known exposure from routine screening testing programs, if feasible. However, reasons why vaccinated staff and students may want to participate in COVID-19 testing include:

- While each vaccine authorized by the Food and Drug Administration (FDA) is effective at preventing symptomatic infection, no vaccine is 100% effective. Vaccinated individuals may still get COVID-19 and transmit it to others.
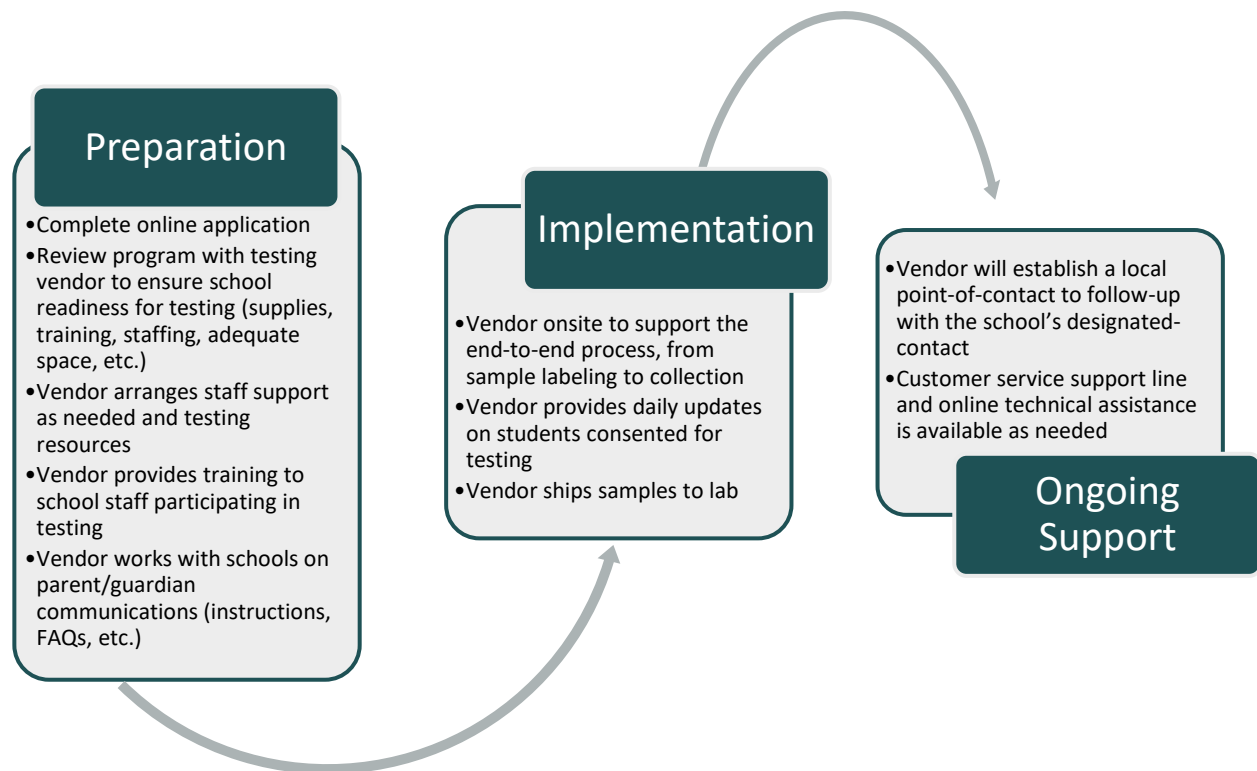- Teachers can model good practices for students to encourage participation.

When not to test

Any COVID-19 testing should be offered on a voluntary basis. It is unethical and illegal to test someone who does not want to be tested, including students whose parents or guardians do not want them to be tested. CDC recommends not retesting individuals who have previously tested positive and do not currently have symptoms for COVID-19 for up to three months from their last positive test. Data

currently suggest that some individuals test persistently positive due to residual virus material but are highly unlikely to be infectious.

PARTICIPATING IN MISSOURI'S K-12 SCREENING TESTING PROGRAM

Figure 1 provides an overview of the K-12 Screening Testing Program. More information about the application process follows.

Preparation
- Complete online application
- Review program with testing vendor to ensure school readiness for testing (supplies, training, staffing, adequate space, etc.)
- Vendor arranges staff support as needed and testing resources
- Vendor provides training to school staff participating in testing
- Vendor works with schools on parent/guardian communications (instructions, FAQs, etc.)

Implementation
- Vendor onsite to support the end-to-end process, from sample labeling to collection
- Vendor provides daily updates on students consented for testing
- Vendor ships samples to lab

Ongoing Support
- Vendor will establish a local point-of-contact to follow-up with the school's designated-contact
- Customer service support line and online technical assistance is available as needed

How pooled testing works

Pooled testing involves mixing several test samples together in a "batch" or "pool" and then testing the pooled sample with a PCR test for detection of SARS-CoV-2. Students and teachers typically test together as a classroom. Most students are easily able to self-collect a shallow nasal swab that they place into a single tube that is transported to the lab. This process allows testing of 5-25 individuals as a group and takes approximately 12 minutes of classroom time per week. Teachers are not required to play a role in administering the tests. A trained person can be available for students that need assistance with collecting their sample.

If the pool tests negative, then all of the individuals in that pool are negative. If a pool tests positive, an individual test of all members of the pool is necessary to determine who is positive. This is called reflex or follow-up testing. The positive individual(s) is then instructed to begin their isolation period. **Schools/districts using a pooled testing model are required to conduct a follow-up test for all positive pools and will choose between using a rapid antigen test or PCR test.** Appendix 1 provides more information about PCR and antigen tests. Table 2 shows the options for follow-up testing and some information to consider in choosing which type of test is best for your school/district.

If using antigen tests to follow-up on pooled testing, schools/districts are required to complete the Antigen Testing Program application process. Find more information about this program in the DHSS Rapid Antigen Test Kit Application and Resource Page.

Table 2. Pooled Testing Follow-up Options

Follow-Up Test Option	Pooled + Antigen Test	Pooled + PCR Test
Location	Onsite	Onsite swab + lab
Considerations:	• Get results faster than PCR tests • Fewer instructional hours missed • Requires additional work by school staff to do follow-up testing and reporting • Requires trained staff to collect the sample • May require additional PCR testing if no one tests positive in follow-up testing	• May require additional work by school staff to collect and send off swabs • Very accurate • Unvaccinated students and staff in positive pool may need to isolate until individual test results are received

Application Process

New applications for the Screening Testing Program are no longer being accepted. To participate in the Missouri K-12 Screening Testing Program, schools/districts needed to complete the following:

1. **Online Authorized School Application** (included as Appendix 2). The application collects detailed information about the school/district. DHSS will accept applications throughout the 2021-2022 school year, depending on availability of funding. Districts and organizations with multiple schools should fill out one application that includes each participating school in their district or agency. Districts may want to start their program with a few pilot schools and add additional schools during the school year in coordination with the testing vendor.

2. **Statement of Assurances** (included as Appendix 3). To support the effective administration of this program, as well as the safe administration of testing, schools/districts must agree to a series of assurances before DHSS authorizes access to the K-12 Screening Testing Program. The appropriate signatory must be an individual with the authority to agree to the terms outlined in the Statement of Assurances, such as the superintendent or executive director. The Statement of Assurances provides an overview of the responsibilities of schools/districts and the requirements for the K-12 Screening Testing Program. Noncompliance with the assurances may result in the termination of services. Schools/districts will upload this document as an attachment in their Authorized School application.

3. **Testing Plan Worksheet** (excel file). The testing plan worksheet asks for information describing how the school/district will implement the testing program in each participating school. For example, who will be tested, where will testing occur, and how often will testing take place?

Schools/districts may upload their plan as part of the application or wait to complete their plan with assistance from the testing vendor. Schools/districts will have the opportunity to adjust their plan as needed. If schools need assistance with developing their testing plans, they can also reach out to DHSS or Children's Mercy for consultation services.

SUPPORT AVAILABLE FOR SCHOOLS/DISTRICTS

After DHSS approve a school/district to participate in the program, the school/district will coordinate with the testing vendor to implement screening testing. The vendor will assist the school/district with onboarding tasks, testing, and the reporting process. Additional vendor supports are included in Table 3.

Table 3. Testing Vendor Services and Supports

Staff support, if requested	If desired by the school, the vendor may provide a testing manager to support the onsite management of the screening testing program and/or trained test sample collectors. The testing manager will assist with logistical arrangements, managing test inventory, and reporting. If a school/district declines staff support, they are responsible for ensuring adequate staffing to complete the testing process.
Operations and logistics of screening testing	The vendor will procure, supply, and ship the physical materials needed for testing, including swabs, pre-labeled test tubes, biohazard collection bags, and any other necessary materials.
Transportation of test samples from school to laboratory	The vendor will offer shipping service to deliver tests to the laboratory. Courier service may be available if other shipping is not available.
Software associated with pooled testing	The vendor will supply a software platform schools will use to order supplies, track test results, and centralize other necessary testing information. The platform will return test results within 24-48 hours of the lab receiving the samples.
Training	The vendor will conduct training to support schools/districts with launching their testing program. Training is based on the school's/district's needs and can include the following as applicable: how to collect, store, and label samples; using the software associated with pooled testing; overview of the program, what to do in the case of a positive or negative pool, and in the case of a positive pool, the protocols associated with follow-up testing. Training may also include the steps to obtain consent.
Technical assistance/customer support to	The vendor will provide customer service solutions for the school/district. They will work directly with the testing coordinator or other administrators at the district to troubleshoot on topics including delivery issues, sample

district/school personnel	collection, labeling tubes, transporting samples, test results, isolation and quarantine protocols, and training. Schools will also have access to a customer service support line and online tech support.
Resources for schools and parents	Schools will have access to documents and materials to support every step of the process including: • Materials and information sessions explaining pooled testing for families and school staff • Communication templates for requesting consent and notification of pooled testing results • Digital and paper consent forms in multiple languages

SCHOOL/DISTRICT STAFFING NEEDED

The Missouri K-12 Screening Testing Program will provide schools with the staff needed to implement an onsite screening testing program, if desired. However, schools/districts will need to commit some staffing support for a successful program. For example, school staff are responsible for reporting positive cases to the LHD and communicating with positive individuals about how to proceed (e.g. isolation). Staff support needed from participating schools/districts is included in Table 4. One person may be responsible for multiple roles.

Table 4. School/District Staffing Needs for Screening Testing

Points of Contact	Responsibilities
School/District Testing Coordinator	Lead the school/district team and interact with DHSS and the state's testing vendor. Many districts select the superintendent or lead nurse, given their role in health and safety for the district. Depending on this person's capacity, the school/district should consider identifying a second person to assist the coordinator.
School/District Logistics Lead	Coordinates with schools and vendors to finalize testing times and locations and to make sure all materials are transported to the right place in time for testing.
Building Testing Ambassador	One person in each building who travels with testing vendor staff from class-to-class, if necessary; available on day of testing to assist vendor with testing process.
School/District Communications Lead	Serves as the point-of-contact to answer questions and provide information for staff/students/families; also responsible for initiating the process for schools to collect consents.

Positive Cases

Districts should designate a point of contact at both the school and district level with whom LHDs will coordinate regarding COVID-19 exposures, case investigations, and contact tracing. Pursuant to 19 CSR 20-20.030(1), schools/districts should report any known COVID-19 cases or exposures to the LHD where the student resides. When there is confirmation that a person infected with COVID-19 was on school property, the school should contact the LHD immediately and follow the directions of the LHD where the school is located. Schools/districts should track information regarding cases and exposures to ensure that no staff member or student returns to school before the LHD released them to do so. For more information about positive cases, please reference the Missouri School COVID-19 Operating Guidance.

NEXT STEPS

There are a lot of variables and decision points in developing a screening testing program; and information about COVID-19 changes frequently as new science is available. It is easy to feel overwhelmed, but there are many resources available to assist schools/districts in developing a testing program. Some people to reach out to include the local health department, local hospital or health system, or a testing vendor. The list below provides additional places to look for help. Appendix 5 also provides frequently asked questions to consider.

More COVID-19 Information and Resources

Missouri Department of Education: https://dese.mo.gov/communications/coronavirus-covid-19-information

Missouri Department of Health and Senior Services: https://health.mo.gov/living/healthcondiseases/communicable/novel-coronavirus/education.php

Rockefeller Foundation: https://www.rockefellerfoundation.org/report/covid-19-testing-in-k-12-settings-a-playbook-for-educators-and-leaders/

U.S. Department of Health & Human Services: https://www.hhs.gov/coronavirus/community-based-testing-sites/index.html

For financial support and other questions about screening testing, please contact K12screeningtesting@health.mo.gov.

APPENDIX 1: PCR and Antigen Tests for Diagnosing COVID-19

The table below summarizes the main types and characteristics of PCR and antigen tests used to diagnose a current SARS-COV-2 infection. CDC's SARS-CoV-2 testing pages provide additional information about testing. DHSS supports the use of any COVID-19 diagnostic device that has Emergency Use Authorization (EUA) or FDA approval.

	Viral Tests	
	Molecular Tests (PCR)	**Antigen Tests**
How is the sample taken?	Nasal (most tests) or throat swab Saliva or sputum test Sample placed in tube and sent to lab for processing. Trained staff in a CLIA-certified lab or point-of-care testing site operating under certificate of waiver must perform the test. The lab process takes just a few hours but turn-around times may be longer due to lab capacity and the time required to ship samples to the lab.	Nasal or throat swab Tests generally performed at point-of-care and results available in about 15 minutes.
What does it test?	Diagnose current SARS-CoV-2 infection by detecting viral genetic material (Nucleic acid amplification tests (NAAT)); including real time reverse-transcriptase Polymerase chain reaction (RT_PCR or PCR).	Diagnose current SARS-CoV-2 infection by detecting viral proteins.
How are the results used?	Help public health officials identify and recommend isolation for people with active infection in order to minimize COVID-19 transmission.	Help public health officials identify and recommend isolation for people with active infection in order to minimize COVID-19 transmission.
Who administers the test?	Swab can be self-collected or collected by a health professional.	Depending on test used, swab can be self-collected or trained staff associated with a CLIA-certified point-of-care testing site operating under certificate of waiver will collect the sample.
Other information	Considered the gold standard for COVID-19 detection and typically performed in a specialized lab. FDA has authorized some molecular tests for and have data supporting use in asymptomatic individuals. A CLIA certification is not required for sample collection.	May be more likely to miss a current infection than molecular tests. Continued research is being conducted to look at performance in asymptomatic people. Rapid antigen tests are also being used for symptomatic individuals who begin to exhibit symptoms during the school day.

APPENDIX 2: K-12 Screening Testing Program Online Application

Thank you for your interest in the Missouri COVID-19 Screening Testing Program for K-12 Schools. Please provide responses to the following questions to become an Authorized School.

1. **District Information**
   District or School Name:
   County:
   Person completing the application:
   Email:
   Title:

2. **Please identify your school's/district's testing program coordinator:**
   Name:
   Email:
   Title:

3. **Upload the completed, signed Statement of Assurances.**

4. **Upload the completed Testing Plan Worksheet.**

5. **What percent of students do you anticipate will participate in your screening testing program?**
   0%
   1% - 25%
   26% - 50%
   51% - 75%
   76% - 100%
   Unsure

6. **What percent of school staff do you anticipate will participate in your screening testing program?**
   0%
   1% - 25%
   26% - 50%
   51% - 75%
   76% - 100%
   Unsure

7. **What is your school's/district's preference for follow-up testing? Please refer to Table 2 Pooled Testing Follow-up Options in the Screening Testing for K-12 Schools Program Guide for more information about each follow-up option.**

   All buildings within a district are required to use the same type of follow-up test.
   a. Antigen tests

      b.   PCR

      c.   Undecided

If select antigen tests for follow-up testing:

Is your school/district already receiving tests through the state's antigen testing program?

8. **Is your school/district already implementing a COVID-19 testing program?** Yes/No

    If yes

    9. **What type of testing does your district do?**
        a.   Diagnostic for people with symptoms
        b.   Asymptomatic screening
        c.   Outbreak testing
        d.   Other

    10. **What type of tests does your district use?**
        a.   PCR
        b.   Pooled PCR
        c.   Rapid antigen, such as BinaxNOW
        d.   Other

    11. **Which of the following are included in your testing protocol?**
        a.   Teachers
        b.   All school staff
        c.   Students—elementary
        d.   Students—middle school
        e.   Students—high school
        f.   Student athletes and coaches
        g.   Vendors or contractors entering school building

12. **Please share any additional questions your school/district has about participation in the K-12 Screening Testing Program:**

APPENDIX 3. K-12 Screening Testing Program Statement of Assurances

In order to reduce transmission of COVID-19 and to support in-person classroom instruction, the Missouri Department of Health and Senior Services (DHSS) is making screening testing services available to any public school districts and private and charter schools[1] at no cost for the 2021-2022 school year, including summer school as funds allow.

The DHSS is offering pooled testing services using PCR tests for COVID-19. Pooled testing combines, or "pools", a set of individual test samples and yields a single test result for the overall pool. The pooled test results are not intended for diagnostic or treatment purposes but are instead offered as a screening tool to increase the likelihood of identifying possible positive cases in the school population. Individual follow-up testing is required for a positive pooled test result.

No COVID-19 test is perfect, and the pooled test may produce false positives (i.e., indicate that at least one individual has COVID-19 when no one in the pooled population actually does) or false negatives (i.e., indicate that no individual in the pooled population has COVID-19 when one or more individuals actually do). Notwithstanding the results of any pooled test, [Applicant district/school] should encourage members of the school population to consult their individual health care providers if they have signs or symptoms of COVID-19, or otherwise believe they have been exposed to COVID-19. Individuals that have tested positive for COVID-19 should not be tested or included in a pool for 90 days from their positive test.

Upon approval as an authorized school, [Applicant district/school] will be assigned a point of contact through the State's contracted Testing Program Provider. The point of contact will assist the district/school with preparing for implementation of their testing program. The Testing Program Provider will provide training for onsite program implementation and a customer service support line and online chat, to provide basic on-demand technical assistance support to testing staff on topics that include, but are not limited to, delivery issues, sample collection, labeling tubes, transporting samples, test results, isolation and quarantine protocols, and training.

To support the effective administration of this program as well as the safe and effective administration of screening testing, DHSS seeks assurances from [Applicant district/school] before authorizing access to the K-12 screening testing services. Noncompliance with the below assurances may result in the termination of services. Specifically, for access to the K-12 Screening Testing program services made available by DHSS, [Applicant district/school] must agree to:

- Carefully follow all K-12 screening testing program guidance and requirements posted by DHSS.

Consent and Privacy

- Prior to test administration, collect and maintain all required consent and authorization for the administration of a COVID-19 test from students', parents/guardians, teachers, staff, and any other person participating in the K-12 testing program, using the form furnished by Testing Program Provider or other DHSS-approved form.
- Protect the privacy of individuals participating in the pooled testing program; if needed for follow-up testing, disclose personally identifiable information (PII) about students from education records with the Testing Program Provider only after parents have consented to testing and sharing results or as otherwise

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1 The term "districts and schools" in this document refers to a public school district, private school, charter school, approved special education school or education collaborative that seeks to be authorized by the Missouri Department of Health and Senior Services (acting in consultation with the Department of Elementary and Secondary Education) to receive K-12 Screening Testing Services.

permitted by the federal Family Educational Rights Privacy Act and the Missouri Student Record Regulations.[1]

- Ensure that students who cannot or refuse to participate in the K-12 Testing Program are not barred from in-person learning opportunities based on that refusal.
- Refrain from charging students, teachers, staff, or other members of the school community for any costs associated with participating in the K-12 Screening Testing Program.

Testing Protocols

- Coordinate screening testing with other testing efforts (i.e., symptomatic testing).
- Test all consenting staff and students using a pooled test on a schedule set by the authorized school and the Testing Program Provider.
- Follow protocol to follow-up on a positive test result from a pool with individualized diagnostic testing of all members in the pool.

Isolation, Quarantine, and Contact Tracing

- In addition to follow-up diagnostic testing on all individual members of the pool to determine the source(s) of the positive test result, authorized schools must also have in place appropriate protocols to ensure individuals testing positive for COVID-19 stay home from school until it is safe to return, follow other isolation and quarantine protocols, and to conduct additional contact tracing if necessary. Finally, it shall be the sole responsibility of each school to ensure that it is following any applicable order(s) issued by the state of Missouri or the local health authority.

Training and Compliance

- Communicate with teachers, staff, students, and families about this program on an ongoing basis, monitor it for compliance onsite, and ensure staff and students participate in training on the testing program as applicable (with direction from the Testing Program Provider).
- Work with the Testing Program Provider, depending on the support level needed by the authorized school, to promote an effective delivery of this program including following instructions from the Testing Program Provider.
- Monitor staff and students for compliance with PPE guidance and directives.

Platform Terms and Conditions

Additionally, [Applicant district/school] acknowledges the requirement, for itself and its authorized users, to comply with the following Terms and Conditions of engagement with the Testing Program Provider under the State's K-12 Screening Testing Program:

I. **Access; Restrictions.** The School stated above will access and use the Testing Program Provider's online portal and any related software (collectively, the "Platform") solely for the school's internal, non-commercial purposes. The School will not permit any third party to, directly or indirectly (a) reverse engineer the Platform or attempt to discover or disclose any underlying ideas, algorithms or source code (except to the extent such restriction is prohibited by law); (b) publish, modify, reproduce or create derivative works based on the Platform or any data contained therein; (c) sell, offer for sale, rent, lease, license, sublicense, or redistribute any or all of the Platform or any data contained therein; (d) circumvent, remove, deactivate or thwart any protections or security measures in the Platform; or (e) otherwise access

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[1] For more information about districts responsibilities to protect privacy in connection with Covid-19 testing, the United States Department of Education has issued the following guidance: https://studentprivacy.ed.gov/resources/ferpa-and-coronavirus-disease-2019-covid-19

or use the Platform or any data or information received through the software in a manner inconsistent with this Statement of Assurances (including these Terms and Conditions) or applicable laws, rules and regulations.

II. **Confidentiality.** The School stated above will hold the Platform and any data or information, including personally identifiable information, received through the Platform in strict confidence and will protect the same with at least the same degree of care with which School protects its own similar confidential information, which protections shall be in compliance with applicable laws, rules and regulations, including, without limitation, those related to privacy and personal information.

III. **Representation/Warranty.** The School stated above represents, warrants, and covenants that it has and will have the legal authority and all rights and consents necessary to provide the data and information it provides under these Terms and Conditions for the purposes described therein, including, without limitation, any consents as required under this Statement of Assurances.

IV. **Third Party Beneficiary.** The assigned Testing Program Provider (as communicated to the School) is an intended third-party beneficiary of this Statement of Assurances (including these Terms and Conditions) and is entitled to rely upon the rights and benefits hereunder and may directly enforce the provisions hereof as if it were a party hereto. Any oversight, monitoring or evaluation of the activities of the School by the assigned Testing Provider shall not diminish or relieve in any way the liability of the School for any of its duties and responsibilities under this Agreement.

Superintendents, charter school leaders, and executive directors: please complete the information and sign below to affirm that you make the above-listed assurances.

_____

Name of District or School

_____

Superintendent/Executive Director Name

_____

Phone Number

_____

Date

_____

Signature

If you are submitting as a district or an organization with multiple schools, please list all individual schools on behalf of which you are submitting this Statement of Assurances:

1.
2.
3.
4.

(Please continue if necessary)

Appendix 4   Frequently Asked Questions

Why are schools doing COVID-19 screening testing?

Screening testing can provide another layer of prevention to protect students, teachers, and staff and slow the spread of SARS-CoV-2, the virus that causes Coronavirus Disease 2019 (COVID-19). While it is critical for schools to remain open for academic, social, and emotional benefits, it is equally important to do so safely (see: https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/operation-strategy.html). Screening testing is one of many strategies that help schools safely and confidently continue in-person learning. K-12 schools can access to COVID-19 tests through the Reopening Schools Screening Testing Program.

With vaccines now available, is testing still necessary?

Yes. Because some students and staff are not able to get the vaccine, COVID-19 testing is an important way to protect the school community.

Which schools are eligible for this program?

A district or school, including local education agencies (districts, charter or private schools, approved special education schools and education collaborative), providing any type of in-person instruction is invited to participate in this initiative. There is no minimum number of participants required at a school site.

Does the entire district or school need to participate?

Schools and districts are strongly encouraged to involve all students and staff in screening testing, excluding any individuals who may opt out. However, districts or schools may choose to launch this program with a smaller subset of schools or grades, and students or staff, and scale up to a school-wide or district-wide model, as desired.

What kind of COVID-19 test do schools use?

Schools/districts participating in the K-12 Screening Testing Program will use a pooled PCR test. The type of tests used will depend on the testing plan schools design. DHSS is offering both antigen and PCR tests, depending on the plan design.

What are the costs to the school district for this program?

DHSS is providing as much financial support as possible for implementing a screening testing program; however, there are roles for school district staff. Depending on how schools choose to implement screening testing, they may have to provide some staff support to oversee the testing program. For example, they will need an onsite testing coordinator to assist with assuring consent forms are collected and to push out communication about the program. DHSS has made additional funding available to support these staff.