

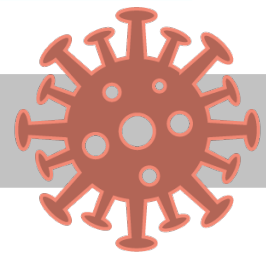


Texas Department of State
Health Services



SY 21-22 COVID-19 Testing Program

September 9, 2021

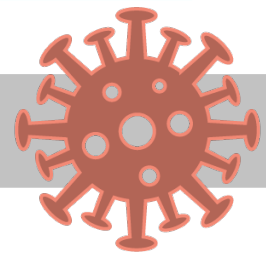


Federal Dollars to Support Schools

The U.S. Department of Health and Human Services (HHS) will invest \$10 billion from the American Rescue Plan to states to enable schools to establish COVID-19 screening testing programs to support and maintain in-person learning.

Texas received \$800 million, and the dollars flow to the state health department to administer.

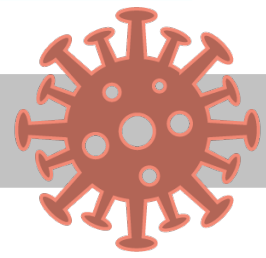
The Department of State Health Services (DSHS) and TEA have partnered together to make this resource available to public and private K-12 systems in Texas.



SY 21-22 COVID-19 Testing Program Goal

Goal of this effort

Provide needed resources to implement COVID testing programs and support for related prevention strategies in all K-12 public and private schools



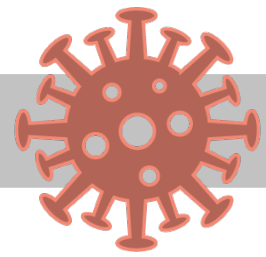
COVID-19 Testing can support school systems' efforts to reduce cases on campus

Prevent

Respond

By conducting tests on campus, school systems can:

- Use tests as an additional screening tool in some cases to prevent the virus from coming on campus
- Provide another source of testing to which the school can quickly respond by removing the individual before they can spread COVID on campus



Learn More: Webinar on the Testing Program



Friday, September 10th
9:00-10:00 a.m.

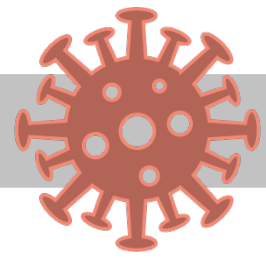
[Register to attend](#)

Tuesday, September 14th
1:00-2:00 p.m.

[Register to attend](#)

Missed the Webinars?
[Watch the recording here](#)

Types of Testing and Use Cases



Types and Categories of Testing

Categories of Testing

Surveillance

Routine, reoccurring testing of large populations

Screening

Targeted testing of certain asymptomatic populations

Diagnostic

Symptomatic or high-risk testing

Types of Testing

Antigen

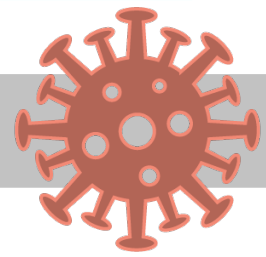
Detects proteins that are part of the coronavirus, quick results

Molecular/ PCR

Tests for the virus's genetic material, usually laboratory processed

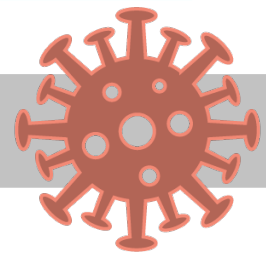
Pooled

Type of test analysis (only for molecular tests) Involving mixing several student samples together in a "batch" or pooled sample, then testing the pooled sample all together. Tells you if there are positive cases in the pool, but not who specifically is positive.



Types of Testing: Pros and Cons

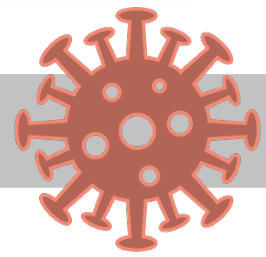
Test Type	Pros	Cons
Antigen	<ul style="list-style-type: none">• Particularly useful for identifying a person who is at or near peak infection• Less expensive• Faster results	<ul style="list-style-type: none">• Not as accurate as a molecular test; if a person is not near peak infection the tests may come back negative (though still accurate enough for most school purposes)• Negative results but still symptomatic need to be followed up with a molecular test
Molecular	<ul style="list-style-type: none">• More sensitive than antigen tests• Positive results are highly accurate	<ul style="list-style-type: none">• More expensive• Results take longer (24-48 hours) to receive• Has the potential to identify individuals that are no longer contagious but still have some viral load in their system
Pooled	<ul style="list-style-type: none">• Increases the number of individuals that can be tested using the same amount of resource so it's cheaper than stand alone molecular testing• Allows you to test a group all at once	<ul style="list-style-type: none">• Does not tell you individual results If there is a positive in the pooled batch, individual testing must occur• Results take longer (24-48 hours) to receive



Antigen vs Molecular Testing in a School Setting

Advantages of using Antigen testing

- **Allows you to quickly identify individuals in the school setting that are at peak infection**
- **Less expensive**
- **Results within minutes**
- **Non-invasive nasal swab that can be self-administered**

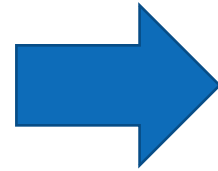


Screening Testing: What this looks like

Targeted testing of certain asymptomatic populations

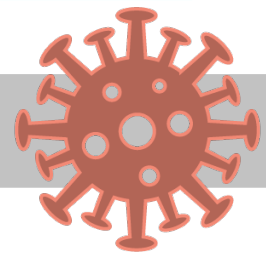
Use this type of testing for things like :

- You want to test your football team before their game
- You had an outbreak and want to test kids before they return to campus
- You want to test your 3rd grade teachers every week



Best Practice Type of Test:

Antigen or with advanced notice, molecular

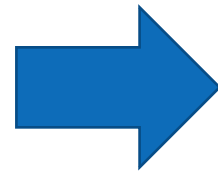


Diagnostic Testing: What this looks like

Symptomatic or high-risk testing

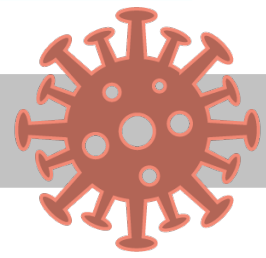
Use this type of testing for things like :

- You have a staff member or student show up to school or develop throughout the day non-typical symptoms (they do not generally have a runny nose)
- You had large number of students in a classroom turn up positive and you need to quickly identify any other positive cases



Best Practice Type of Test:

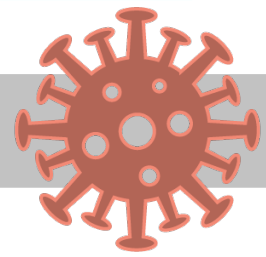
**Antigen or
Molecular**



Consider the recommended testing approaches

While school systems are encouraged to implement the recommended testing strategies, they have flexibility to use the tests to meet the needs of their local contexts. In developing the plan, we encourage you to talk your local health authority.

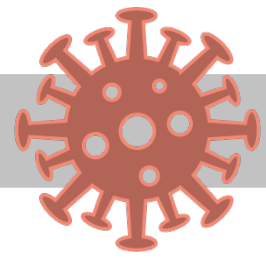
Testing Program Logistics



Notice for schools in the City of Houston

- The City of Houston received over \$30M from the federal government as part of this grant to support public and private school systems within the city boundaries.
- The City of Houston is supporting a similar testing program for some eligible school systems within their boundaries.
- Please view the [School Systems Supported by the City of Houston COVID-19 spreadsheet](#).
 - If you are listed, you will be supported by the City's testing program and NOT the state's testing program

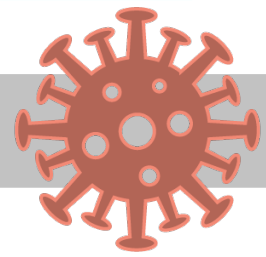
**IMPORTANT
NOTICE**



K-12 COVID-19 Testing Program

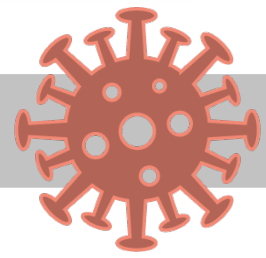
This program provides:

- 1) Access to antigen point of care testing**
- 2) Access to molecular testing**
- 3) Access to staff who can help administer tests**
- 4) Access to grant dollars to support testing and mitigation strategies**



K-12 COVID-19 Testing Opt-In Process

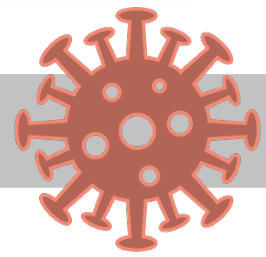
- **Public and Private School Systems that are part of the current testing program, DO NOT need to apply to participate in this program.**
- **If you continue to be part of the new testing program, you are attesting to the following things:**
 - I affirm that if we select to administer the COVID-19 tests provided by the vendor that we will adhere to all reporting requirements and that failure to do so will result in no longer having access to the testing program.
 - I have reviewed the requirements of testing program participation and the guidelines and affirm that my school system can meet these requirements.
 - Each school will need to identify one district test coordinator to serve as the point of contact for DSHS and TEA.
 - Schools will need to ensure they have the appropriate space and requirements to accommodate any type of test they opt to receive and administer at the local level.
 - As previously required, public schools must report cases via the DSHS COVID-19 Case Reporting Form. This information will be aggregated at the state and district level and publicly posted on the Department of State Health Services Texas Public Schools COVID-19 Data page.



K-12 COVID-19 Testing Project Opt-In Process

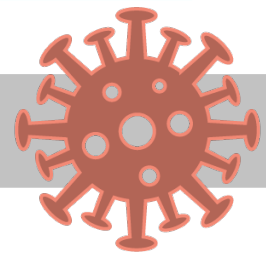
- New Public and Private School Systems that wish to participate MUST submit an application.
- Reminder, if you are in the City of Houston, please view the School Systems Supported by the City of Houston COVID-19 spreadsheet to determine which program you are eligible to opt-in to.
- Participating in the testing project is optional for Texas school

Click [here](#) for opt-in application



Allocation

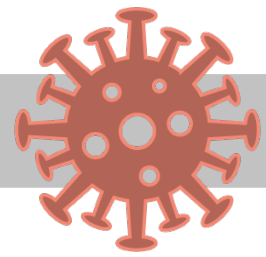
- **We have posted a list of opted in public school systems and their allocation. The private school opt in list and allocation sheet will be posted in the coming days.**
 - **We have targeted the allocation amount to be enough to do diagnostic testing and screening of some groups on a periodic basis**
 - **TEA and DSHS will evaluate test usage in January and may adjust allocations to increase support to schools that are active test users and reduce funds in school systems that are not using their allocation.**



Test Ordering and Use

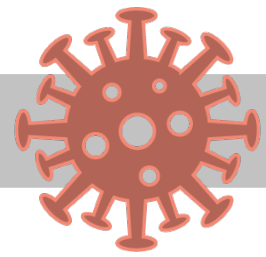
- School systems will have a dollar-value allocation for testing services. Each month, TEA will provide the school systems with an update on their expenditures and remaining balance.
- Tests provided under the K-12 COVID-19 Testing Program are designed to be used immediately, and not stocked for future use. Expenditures will be monitored to ensure that systems are not expending more than 20% of their allocated funds in any given month, except under extenuating circumstances. TEA and DSHS will also compare test reporting to test orders to monitor usage of tests ordered.

In short, we ask that school systems develop a plan for testing throughout the year, order each month what they believe they will use in the upcoming month, report test results thoroughly and accurately, and consistently reorder testing supplies and services as needed.



Available Testing Vendors

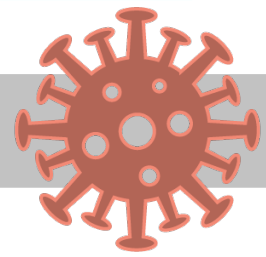
- **Public and Private School Systems can choose to work with any or all of the 5 testing vendors and reach out to them directly.**
- **School systems may select the vendor or vendors that offer services best aligned to their testing strategy**
- **Vendors will bill DSHS directly**



Vendor Resource Sheet

Vendor	SDI Labs	Achieve Health Management (AHM)	Thermo Fisher Scientific (TFS)	Quest Diagnostics	Affinity Empowering
Test Administration	Self-Administered (Rapid Antigen) or School Personnel	School Personnel or AHM Staff	School Personnel or TFS Staff	School Personnel or Quest Staff	Self-Administered or School Personnel
Scheduling for Turnkey option	N/A	Coordination with AHM	Coordination with TFS	Done through an online portal	NO
Training Provided to School Staff	YES	YES	YES	YES	YES
Reference Materials for School Personnel		YES	YES	YES	YES
Electronic Registration	YES	YES	YES	YES	YES
Electronic Form Review/Signature by Parent/Guardian	YES	YES	YES	YES	YES
Translation of Materials	"Major languages"	Spanish	Spanish (other language can be discussed)	24 different languages for paper consent form, 100 languages for electronic consent process	Spanish
Support Team Availability	YES	YES	YES	YES	NO
Reporting Dashboards	YES	YES	YES	YES	YES
Rapid Antigen Test	YES	YES	YES	YES	NO
Rapid Antigen Time to results	15 minutes	15 minutes	15 minutes	15 minutes	N/A
Rapid Antigen Test Brand	SDI Rapid Antigen: \$8.49 per test Abbott BinaxNOW: \$9.99 per test	Abbott BinaxNOW: \$7.50 per test GenBody: \$7.50 per test	Abbott BinaxNOW: \$20.00 per test Quidel Sofia: \$20.00 per test BD Veritor: \$20.00 per test	CareStart: \$19.00 per test	N/A
Rapid Antigen Test Collection Method	Anterior Nasal	Anterior Nasal for Abbott BinaxNOW; Nasopharyngeal or Anterior Nasal for GenBody	Anterior Nasal	Anterior Nasal	N/A
PCR Test	YES Real Time PCR with Mobile Lab: \$49.00 per test Individual: \$49.00 per test Pooled (up to 5): \$20.99 per tube	YES Real Time PCR: \$80.00 per test	YES Individual PCR: \$48.00 per test Pooled (up to 6): \$60.00 per tube Plus a one-time fee of \$10.00 per participant	YES Individual PCR: \$100 per test Pooled (5 to 25): \$150 per tube	YES Individual PCR: \$0 per test Pooled: \$0 per tube
PCR Time to results	24-48 hours	Within 48 hours of receipt of specimens by lab	24-48 hours	less than 48 hours; 24 hours for pooled test results	24-48 hours
PCR Collection Method	Anterior Nasal	Anterior Nasal	Anterior Nasal	Anterior Nasal	Anterior Nasal
Testing Methodology	Individual or pooled (up to 5)	Individual	Individual or pooled (up to 6)	Individual or pooled (up to 25)	Pooled (5 to 24)
NOTE	Guardian or student (of 13 years or older) needs to fill out an intake questionnaire providing current health condition, any new symptoms, and demographics the day before testing.	Requires 30 day estimate of testing volume to procure the necessary volume of materials and labor; requires mandatory kick-off meeting with school implementation leaders	Time from Initial Contact to Begin Testing is 5 to 10 days		7-10 day start-up
Additional Notes		See attachment for school requirements	On site staffing for specimen collection: \$70 per hour/per person/minimum 4 hours	On site staffing for specimen collection: \$100 per hour/per person/minimum 6 hours	Two test swabs will be collected from every individual tested. All swabs will be run through pooled testing first. If pooled testing returns a positive, then the second swab will be run to identify the positive individual(s)
Contact Information	texas@sdilabsinc.com 877-509-0376	txorders@achievehealthmanagement.com	Mackenzie Varga 412-488-2252 mackenzie.varga@thermofisher.com	https://regional.questdiagnostics.com/texas-k12	https://www.affinitytesting.com/hhs/ OperationExpandedTesting@affinityempowering.com mlrank@affinityempowering.com 844-631-0463/713-254-7640

This resource sheet will help you compare testing vendors and determine which is the best fit for your school system and community. You can find a full-size copy of this page [here](#).



Learn More: Webinar for each vendor



Achieve Health Management
Monday, September 20th
1:00-2:00 p.m.

[Register to attend](#)

Thermo Fisher Scientific
Tuesday, September 21st
3:00-3:45 p.m.

[Register to attend](#)

Affinity Empowering
Wednesday, September 22nd
11:00-12:00 p.m.

[Register to attend](#)

SDI Labs

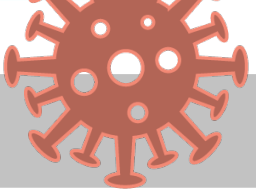
Wednesday, September 22nd
1:00-2:00 p.m.

[Register to attend](#)

Quest

Wednesday, September 22nd
10:00-11:00 a.m.

[Register to attend](#)



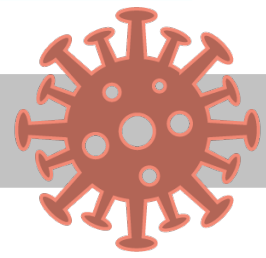
Reporting Requirements

For All Testing:

1. Each school or vendor must meet specific testing reporting requirements using a web-based portal for all test conducted. Failure to adhere to reporting requirements could result in loss of access to testing.
2. All school systems must submit a test request form within 48 hours of receiving the testing supplies or services in order to allow timely invoice payment to vendors in addition to updating the allocation spreadsheet.

For Positive Cases:

1. Campuses must notify individuals, or, in the case of a student under 18, the student's parents, in the event of a positive test.
2. Public school campuses must provide notification to their communities of positive cases within a classroom, consistent with [TEA Public Health Guidance](#) notification requirements.
3. All school systems must notify their local public health authority
4. Public school systems must report cases via the pre-existing [DSHS COVID-19 Case Reporting Form](#), which includes test counts and testing results.

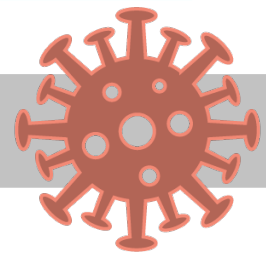


Grants to Public Schools: \$221 million

TEA will launch a grant application process to access these funds.

We will be releasing more information on this grant on Monday, September 20th via a webinar.

We anticipate the grant going live in mid-October.

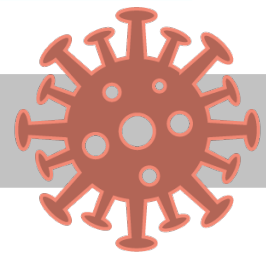


Grants to Public Schools

Allowable Expenses

Allowable expenses include:

- PPE (including but not limited to masks, gloves, gowns and face shields),
- Hygiene and cleaning supplies,
- Portable high-efficiency particulate air (HEPA) fan/filtration systems or other small items that may allow for improved air circulation,
- Public health events that include students and other community members and are aimed at providing opportunities for increased detection and prevention of COVID-19, and
- Vaccine promotion



Learn More: Webinar about the grant



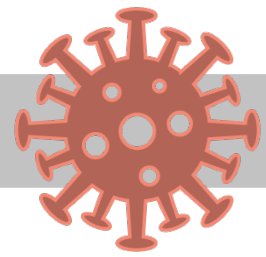
Monday, September 20th
10:00-11:00 a.m.

[Register to attend](#)

Tuesday, September 21st
1:00-2:00 p.m.

[Register to attend](#)

Resources



Actions for Positive Students or Staff

Review TEA's [Public Health Guidance](#) to ensure you are viewing the latest version.

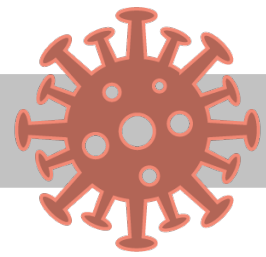
The below is current as of 9/3/21.

As provided in this [Department of State Health Services \(DSHS\) Rule](#), school systems must exclude students from attending school in person who are actively sick with COVID-19, who are suspected of being actively sick with COVID-19, or who have received a positive test result for COVID-19 and must immediately notify parents if this is determined while on campus.

Parents must ensure they do not send a child to school on campus if the child has COVID-19 symptoms or is test-confirmed with COVID-19, until the conditions for re-entry are met. See the [DSHS rule](#) for more details, including the conditions for ending the exclusion period and returning to school.

During the exclusion period, the school system may deliver remote instruction consistent with the practice of remote conferencing outlined in the proposed *Student Attendance Accounting Handbook (SAAH)* rules, as described [here](#).

To help mitigate the risk of asymptomatic individuals being on campuses, school systems may provide and/or conduct recurring COVID-19 testing using rapid tests provided by the state or other sources. Testing can be conducted with staff. With prior written permission of parents, testing can be conducted with students.



For More Information

Agency:

Type of Questions:

Contact:



- Best practices on how to use tests in a school setting
- Public Health Guidance interplay with testing program
- Test Coordinator Support
- Grant questions

COVIDCaseReport@tea.texas.gov

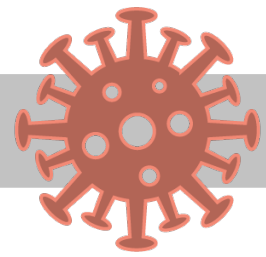


TEXAS
Health and Human Services

Texas Department of State
Health Services

- Questions or concerns about the testing vendors, including responsiveness, delivery, and reporting of results

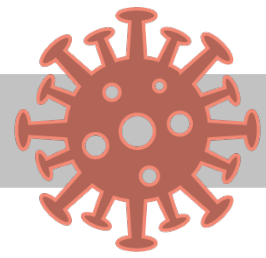
tcec@dshs.texas.gov



Available Resources & Support Materials

On TEA's [Coronavirus Website](#):

- COVID Testing Project Playbook
- Vendor Resource Sheet
- List of opted in public and private school systems and allocation amounts
- Application for new school systems to opt in
- FAQ
- Test Reporting Form – coming soon!



3rd Party Available Resources & Support Materials

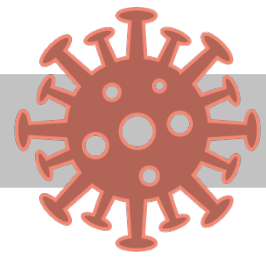
Overview/General Guidance of the ELC Grant from the federal government:

<https://www.openandsafeschools.org/>

When to Test Calculator

<https://whentotest.org/>

CDC [COVID-19 School Testing Toolkit](#)



Required Notice

This K-12 COVID-19 Testing Project is supported by the CDC of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling \$800 with 100 percent funded by CDC/HHS. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by CDC/HHS, or the U.S. Government. For more information, please visit the [Center for Disease Control Website](#).