

FAQ**Q: If schools are reopening, why can't other businesses like restaurants and movie theaters open too?**

As we learn more about how COVID-19 behaves, we have a much better understanding of relative risk and what's driving transmission.

In March, when the Stay-At-Home order was issued, it was early in the pandemic and a broad restriction was necessary to "flatten the curve." Now that we have much more research on how COVID-19 is spread, and the risk factors involved, we can be more targeted in our mitigation measures and what types of activities are high or low risk.

There is a growing body of evidence that schools are relatively low-risk, and there is broad agreement that in-person school is significantly better for students, teachers and parents. Prioritizing school reopening while minimizing risk is a reflection of our values as a community.

It's also important to acknowledge that as schools reopen, they will look significantly different than they did before. There will be multiple health and safety protocols, and teachers and students will be asked to behave in a way that protects the community, but some the most important parts of school – the relationships with peers and teachers, and the learning experience – will be in-person.

Q: Why should I get tested?

COVID-19 testing is a critical part of breaking chains of transmission, so that we can find the virus, and contain it before it spreads to anyone else. By offering COVID-19 through schools, we can make sure that every member of our community who wants a test can get a test, for free, painlessly using a cheek swab to collect saliva that is mailed to a lab, and with results in about 36 hours. Getting tested is one thing that you can do to help protect the people in your community

It's important to use the daily symptom and exposure attestation process to make sure that people with symptoms, even mild ones, are not putting others at risk by coming to school or work. Getting tested at the first sign of symptoms or exposure means that people with a negative test can come back to school or work as soon as their symptoms improve.

Q: Why should we start up a COVID testing program now? Can we just wait for the vaccine?

Our priority is to make sure students and teachers can feel safe in the classroom as soon as possible. We are excited about the new vaccines, but we also know that production, delivery, and vaccination of everybody in our community is going to take some time. Not everybody will be vaccinated by the time school starts next fall.

Teachers and education staff are currently in Tier 2 of the state's [vaccine distribution plan](#), and under the most optimistic timelines, vaccines *might* be available to all teachers by next fall, but we don't know when vaccines will be available to students. And, it's important to remember that vaccine availability doesn't prevent disease -- *people getting vaccinated* prevents disease. We believe that protocols like symptom attestation, referring symptomatic people for testing, and prevention practices like masks and distancing will be part of school life at least through the end of this school year, and possibly into the next school year.

We don't have to delay school while we wait for people to get vaccinated. We have an opportunity right now to adapt our school practices so that we can contain and control the virus, and keep students and teachers safe and in classrooms, even if vaccines aren't yet widely available.

Q: Why is our school community participating in this pilot?

We believe that safe, in-person schooling is a priority – it's better for students, it's better for teachers, and it helps parents get back to work – and while it may be difficult, it's challenge that we can solve. We want our teachers and students to have the opportunity to do their best teaching and learning.

By participating, we are also helping the state and other districts learn how to best use testing and public health measures to support schools. Working together across schools and public health, we can all help protect each other so that we stay safe and healthy and our kids can go to school in-person.

Q: How does the testing program work? What's involved?

The program to slow the pandemic and control includes several steps: symptom attestation, COVID-19 testing, outbreak response, contact tracing, and isolation or quarantine.

Symptom attestation: In the pilot, school districts will encourage everyone, whether they are teaching and learning at home or at school, to complete a daily [symptom](#) and exposure attestation. Schools may use a paper form, text messaging or software designed for this process. Teachers, staff, students and families will be asked to report daily whether they have any symptoms of COVID-19 or have been exposed to a person with a confirmed case. People who report symptoms or exposure screen in to the free and easy testing process.

Voluntary testing: Teachers, staff, students, and members of their household who show any [symptoms](#) or have been exposed to someone with COVID-19 will be referred to a testing site that serves just your school district, where you can get a free same-day test. If the test is positive, they will be asked to isolate for at least 10 days and until symptoms have resolved. If the test is negative, they will be asked to isolate until symptoms have improved.

Cheek swab tests: We're partnering with a company called [Curative](#), which uses painless oral swab test kits. People collect their own saliva sample under the observation of a trained test administrator, and the experience feels a bit like brushing your teeth. These tests are as reliable as the PCR nose swabs that you may have heard about, but they're easier to administer and they don't hurt. Curative will train people designated by the school to hand out and collect the test kits, samples are sent to their lab daily, and they guarantee results within 24 hours from arrival at the lab (36-48 hours from when you take the test).

Outbreak response: When a positive case is identified, the school will activate its outbreak mitigation testing plan, offering free and easy testing to everyone who has had contact with the COVID-19 positive person.

Contact Tracing: As usual, every positive case will be reported to the county health department for case investigation and contact tracing, in order to prevent further transmission.

Q: What kind of test will you use?

We're partnering with a company called [Curative](#), which uses painless oral swab test kits. People collect their own saliva sample under the observation of a trained test administrator, and the experience feels a bit like brushing your teeth. These tests are as reliable as the PCR nose swabs that you may have heard about, but they're easier to administer and they don't hurt.

Curative will train people designated by the school to hand out and collect the test kits, samples are sent to their lab daily by UPS or FedEx, and they guarantee results within 24 hours from arrival at the lab (36-48 hours from when you take the test).

Q: Do I have to pay for the test? Do I need to have insurance?

No, there is no out-of-pocket cost or co-pay. Curative will ask you to provide insurance information if you have it, and they will bill your insurance directly. If you do not provide insurance information, you may provide a photo of your government-issued I.D. so that Curative may bill the federal Health Resources and Services Administration (HRSA), which is covering testing not covered by insurance.

If you do not provide insurance or a government I.D., you can still get tested at no charge, because the state Department of Health will cover the cost. Only about 10% of tests fall into this category, and the state believes it's important to make sure that everybody who wants a test can get a test.

Q: Where and when will the testing take place?

COVID-19 testing locations will vary by school district. Some districts may put a test site at every school, while other districts are using a centralized site that serves several schools. Test sites may operate continually or for a set time, such as for 4 hours every morning, or Monday through Thursday.

It is important to put the test sites at a location that has a separate entrance or is otherwise separated from the regular flows of students and staff. [Health Commons](#) may be able to help you evaluate the best locations for your test sites.

Q: Who will perform these COVID-19 tests?

The Curative tests – swabbing your cheek and getting the sample ready for mailing – are self-administered and observed by a trained person. In some school districts, school staff may be able to hand out and collect the tests. In other districts, it may make more sense for local fire department medics, local medical or nursing school students, or an outside contractor to take on testing responsibilities. Our partners at Curative will train people who have testing responsibilities.

Q: What does a “test observer” for the Curative tests do?

The main function of the observer is to make sure an accurate sample is collected so we don't have to retest. We also rely on them to make sure the samples are properly scanned and logged in our system so results correspond appropriately.

Test observers are trained by Curative and there is no formal certification, but some districts may have observers sign a document saying they had watched the observer role training videos. The videos are [here](#) for the oral swab and [here](#) for the nasal swab.

Q: How will schools determine who gets tested? How often will people have to get tested?

All testing is voluntary. Free and easy COVID-19 tests will be available on demand to any teacher, staff, student, or member of a student's household who is showing any symptoms on the [CDC list](#). School districts may also choose to offer voluntary asymptomatic testing to teachers and staff either every two weeks or once per month.

Q: What are the symptoms of COVID-19

The [CDC list](#) of symptoms includes: fever (over 100.4), cough, shortness of breath or difficulty breathing, new loss of taste or smell, fatigue, headache, muscle or body aches, sore throat, congestion or runny nose, nausea or vomiting, diarrhea (2 or more loose stools in 24 hours).

Q: What happens when a member of the school community tests positive? What about a negative test result?

When a positive case is identified, the school will activate its outbreak mitigation testing plan, offering testing to everyone who has had contact with the COVID-19 positive person.

As usual, every positive case will be reported to the county health department for case investigation and contact tracing, in order to protect the community and prevent further transmission.

Q: What supports will be available to my family if we have to isolate or quarantine?

Your school district and county health department may be able to refer you to resources that can help with paid sick leave and other services (check [Care Connect WA](#)). By staying at home and avoiding outside contact during the temporary isolation and quarantine period, you will be doing your part to protect our community and keep our schools open.

Q: What data will schools and health departments be collecting? How is my privacy protected?

School administrative staff are collecting data for the daily symptom and exposure attestation using either a paper form or an automated solution. On referral to testing, school staff will provide a link to Curative, and Curative captures demographic data, consent, and insurance information (if available). Curative also handles all the required reporting to DOH and to the person being tested.

Curative will provide reports that show the aggregate number of referrals to test, the percentage of tests completed, the positivity rate, and the total number of positives.

One designated person at your school district (probably the superintendent) will be alerted to individual positive test results so that they can help with contact tracing to prevent further transmission and protect the other teachers, staff, students and families who make up our school community. All health information is kept private and protected by federal [HIPAA](#) rules.

Q: How does this pilot relate to the IDM reports that model COVID testing in schools and other school reopening scenarios?

The Institute for Disease Modeling (IDM) at the Bill & Melinda Gates Foundation has issued a series of three reports finding that in-school countermeasures like masking, distancing, and symptom screening are effective at reducing risk.

The most recent report, Testing the Waters, acknowledged the ongoing importance of symptom screening and testing for disease detection and response, and for assessing school community

prevalence. While the value of frequent diagnostic testing goes up with the level of community transmission, it can be used to reduce the risks of COVID-19 infection in reopening schools.

Q: What about the Tacoma Pierce County school testing pilot? Is that the same thing?

The Tacoma Pierce County Health Department (TPCHD) testing pilot is not related to this state Department of Health school testing pilot. Tacoma and Pierce County decided to pursue their own testing strategy of broad antigen testing for K-5 students, teachers and staff. In contrast, the DOH pilot provides PCR testing for symptomatic or exposed teachers and staff, and we chose this route because we believe it is more implementable and sustainable.

Q: If the state and county public health guidelines conflict, which guidance should the school district follow?

Because this is a state-funded pilot, our school district will follow state public health guidance, and will work with the state and county to move towards consistency.

Q: Who's paying for this? Where does the money come from?

The pilot program will be funded by the state Department of Health, and we hope that the governor and legislature will set aside funding to expand the program to more school districts after the pilot.

Fully funding the school-based COVID testing and other in-school layers of protection would be a statement from leadership that in-person schooling and the education of our children is a top priority for our state.

Q: What happens when the pilot is over?

The pilot runs through the end of January, but testing services may continue after that point, depending on funding. We believe that regular COVID-19 testing will continue to be a vital protective measure through the end of 2021 and into 2022, and school-based COVID testing can be a model for broad community access.

Q: What role does the Gates Foundation have in this pilot?

The pilot is funded by the state Department of Health, and the Gates Foundation is providing technical assistance but no direct funding. Throughout our pandemic response, the Gates Foundation, including the Institute for Disease Modeling have been providing technical assistance to the Washington State Department of Health, such as disease modeling to plan for mitigation measures, modeling transmission and school reopening scenarios, improving strategies and processes for COVID-19 testing and contact tracing, reaching out to stakeholders and building community partnerships.

Technical assistance from the Gates Foundation includes both current and former employees, such as the team from Mesurado Cooperative and other independent consultants. Because the Gates Foundation has staff and alumni with experience supporting similar disease prevention and mitigation strategies in global health settings, they were able to offer that expertise and support to the state Department of Health.

** these are shared processes to build collective trust, and we all have a role to play

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