



**LEARN  
TO RETURN**

# Frequently Asked Questions

about the Learn to Return program



DOH 420-375 September 2022

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# About the Learn to Return program

## Q: Who is paying for this program? Where does the money come from?

Washington State Department of Health (DOH) covers the costs for schools to conduct diagnostic and screening testing through funds received from the American Relief Package and the Centers for Disease Control and Prevention (CDC). These resources are available to all participating schools through July 2023. These federal funds are specific to COVID-19 testing offered through the Learn to Return program.

## Q: Is my child required to get tested?

No. Participation in Learn to Return is completely voluntary. Students opt-in (with parental consent) to participate in school-based testing if their school is offering it. While COVID-19 testing is voluntary, in some circumstances, like coming back to school after isolation, testing is required if a mask is not worn. See [DOH's K-12 School Requirements](#) for more information.

## Q: If the testing is free, why is insurance billed?

COVID-19 testing is free to your school community, but that doesn't mean the lab is processing it for free. Some labs can bill insurance, which means public funds can be stretched to serve more people. If a student/staff doesn't have insurance, or they refuse to give it, they can still get tested at no cost through this program.

## Q: If schools plan to provide on-site testing, how do they get tests?

Distribution for testing supplies has evolved based on supply and demand.

- If schools are enrolled through the Learn to Return program, they can reach out to their Health Commons Program Manager or Educational Service District (ESD) Coordinator with questions and next steps regarding testing supply.
- Schools that are not part of Learn to Return can order tests through the DOH School Test Request Form. These schools would check "no" to the second question on the form regarding participation in the Learn to Return program.

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

Throughout the process, all health information is kept private and confidential under the Health Insurance Portability and Accountability Act (HIPAA) and Family Educational Rights and Privacy Act (FERPA). The school district must have a signed HIPAA Authorization Form for minors on file to implement the testing program. This step is required because the school will receive personal health information (PHI) about minors (students) from the laboratory.

- A testing vendor may collect data such as demographics, parental/guardian consent, and insurance information. The vendor may provide summary reports to your school district, showing the total number of tests required, the percentage of tests completed, the positivity rate, and the total number of positives.
- A few administrators and staff at your school district (such as COVID coordinators) will be alerted if there is a positive test result. COVID-19 staff members within the district will then look up individual test results and initiate outbreak procedures.

## About the tests

### Q: What types of COVID-19 tests are offered in the Learn to Return program?

The types of tests offered through Learn to Return fall into two main categories: **PCR** and **rapid antigen** tests.

- **PCR** tests which are usually lab-based.
- **Rapid antigen** tests which are conducted onsite.
- **Over-the-counter (OTC) rapid antigen** tests can be used at home or onsite. Schools can create their own policies around OTC test use and consult their local health jurisdiction (see [DOH COVID-19 Self-testing Guidance for K-12 Schools](#) for details).

See the [menu of tests](#) for a list of the tests currently offered through Learn to Return.

[The Learn to Return Playbook](#) also has the menu with details for each test type, such as collection method, school responsibilities, and turnaround time.

### **Q: Are nasal swabs safe? Even with repeat testing?**

Yes. Nasal swabs are completely safe, even when used often, such as with weekly testing. Learn more about the [safety of nasal swabs](#), including common questions and answers.

### **Q: What is pooled testing?**

Pooled testing is a type of surveillance testing where tests from multiple people (in other words, a “pool”) are tested at the same time. Whoever is getting tested can self-administer the shallow nasal swab test and deposit it into a single collection tube, and results are returned within 12-36 hours. If a pool comes back positive, individuals in the pool are tested to identify positive cases. That is called reflex testing (see more on reflex testing below).

Many variables play into determining the size of the pool, such as community/school prevalence of COVID-19 and classroom/cohort size. See [CDC guidance on pooled testing](#) for more information.

### **Q: What is reflex testing?**

In addition to testing people who were part of a positive pool, reflex testing also refers to a situation in which a person gets tested twice to confirm the result of the first test. For example, a student who has COVID-19 symptoms but tests negative with a rapid antigen test may be referred to get a second test to make sure the result is accurate.

### **Q: How should antigen testing supplies be disposed of at school? Are they considered hazardous waste?**

No, used antigen testing supplies are not considered hazardous waste. Antigen test kits can be disposed of as regular garbage with the following caveat: make sure they are placed in a plastic-lined garbage can and that the plastic liner is tied shut prior to disposal. The garbage can should be placed where it can't be inadvertently accessed by others.

# Setting up your COVID-19 testing site

## Q: How does a diagnostic testing program work?

Teachers, staff, and students, and possibly members of their households, who show any symptoms or have been exposed to COVID-19 will be referred to a testing site (potentially on school grounds).

Samples are usually collected via a shallow nasal swab for tests available through Learn to Return, though saliva testing is also available. Shallow nasal swabs are not the “brain tickler” type, or nasopharyngeal swab. The swab only enters half-an-inch into each nostril, makes some rotations, and is placed, swab-side down, in the collection tube. The FDA maintains a list of EUA-approved antigen tests, which includes links to the appropriate instructions for use (abbreviated “IFU”).

Learn more about the types of tests and testing methods that are available on the [menu of tests](#). You can watch a [demonstration of a shallow nasal swab](#).

## Q: What is a CLIA waiver/Medical Test Site (MTS) license? Do I need one?

If your school is providing rapid antigen testing onsite, a CLIA waiver/MTS license is required. See the [Laboratory Quality Assurance page](#) for more information.

## Q: Should we offer asymptomatic (a.k.a. screening) testing? Why or why not?

Asymptomatic testing is a screening testing strategy where people are tested regularly to catch infections in people who are not showing symptoms. To be effective, this strategy needs to be done frequently (up to twice a week, depending on the level of disease in the surrounding community) and have very high participation.

CDC recommends that you consider screening testing in certain instances, such as during an outbreak, returning from school breaks, or as part of participation in high-risk indoor sports or performing arts. See [DOH COVID-19 Guidance for K-12 Schools](#) for more information on screening testing. Consult your LHJ for additional recommendations for screening testing and see [DOH COVID-19 Guidance for K-12 Schools](#) for more information.

If a school is just beginning to incorporate a COVID-19 testing program, it is recommended that you start with same-day diagnostic testing for anyone who has symptoms or may have been exposed and then scale up to screening testing.

Antigen tests, including over-the-counter tests, or pooled testing are generally best for screening because they are easily able to be delivered at scale. Antigen tests can provide results in about 20 minutes.

### Q: Where and when will the testing take place?

COVID-19 testing locations will vary by school district. Some districts put a test site at every school, while other districts use a centralized site that serves several schools. Test sites may operate continually or for a set time, such as for four hours every morning, over lunch hours, 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. Your Health Commons Program Manager can help you evaluate the best locations for your test sites.

### Q: What is Test to Stay?

Test to Stay programs are alternative to at-home quarantine for exposed individuals in an effort to keep children in school. While contact tracing and quarantine are no longer required, schools can use their existing testing program infrastructure to implement testing protocols to maximize in-person learning.

Test to Stay may be valuable in the following circumstances:

- Testing those who are exposed during outbreaks
- Testing those were exposed by someone at home
- Exposure testing of individuals who are at high risk for severe disease

## Staffing your COVID-19 testing site

### Q: Who performs the COVID-19 test?

In most cases, samples can be self-collected by the person being tested, under the supervision of a test observer. Per a [Public Readiness and Emergency Preparedness \(PREP\) Act Authorization](#), test observers do not need to be health care professionals and do not require formal certification, as long as they comply with the training requirements set forth by the Learn to Return program.

Testing vendors provide training materials for staff or other volunteers who will serve in this capacity. Trained testing observers oversee the sample collection process and, in the case of rapid antigen tests, the results. For rapid antigen tests that return results onsite, these test observers are also trained to read and report the results in the appropriate online system. This role may be filled by a nurse or trained staff and volunteers.

### **Q: What is a test observer and what do they do?**

The test observer's primary function is to make sure an accurate sample is collected so there is no need to retest. When using a lab-based test, for example, observers also confirm that the label on the sample is properly scanned and logged into the vendor's results tracking system. Test observers do not need to be healthcare professionals and can be trained using online tutorials provided by the testing vendor. There is no formal certification, but some districts may have test observers sign a document acknowledging that they viewed the training videos.

### **Q: What personal protective equipment (such as masks and gloves) do test administrators need to wear?**

When you're collecting a sample from a student, follow the [DOH guidance](#) by wearing an N95 mask or equivalent or higher-level respirator, eye protection, gloves, and a gown.

### **Q: What personal protective equipment (such as masks and gloves) do test observers need to wear?**

When you're supervising students as they self-administer sample collection, follow the [CDC guidance](#). Use a clean set of gloves when you're handing the swab to the student to self-swab. Have the student place the swab in the transport media and seal it themselves, unless they need assistance. Keep at least 6 feet of distance, because it is common for students to cough or sneeze during testing. Wear a well-fitting face mask. An N95 mask and eye protection are not necessary.

### **Q: Where can I get personal protective equipment (PPE)?**

Washington Office of Superintendent of Public Instruction (OSPI), ESDs, and school districts are eligible to order PPE through the state in extraordinary circumstances, such as when supplies are unavailable through regular supply chains, when shipping delays cause an insufficient level of PPE, and when urgent needs arise that cannot be addressed through other means.

### How to get PPE:

- Requests for PPE from ESDs and school districts should be placed through the organization's local emergency management agency.
- State agencies (such as OSPI) and federally recognized tribes may order directly through the Washington State Emergency Operations Center (SEOC).

More information on PPE requests can be found on the [DOH PPE webpage](#) or by emailing [ppe@doh.wa.gov](mailto:ppe@doh.wa.gov).

## Managing COVID-19

### Q: What results do I need to report? Who do I report them to?

- Rapid antigen tests: Positive results from rapid antigen tests conducted at school must be reported into SimpleReport.
- Take-home tests: If a school is made aware of a positive result from a student or staff member who tested at home, the school must notify the LHJ of that case.
- PCR tests: Schools do not need to report positive results from PCR tests. Those results are shared to the DOH by the testing vendor.

All cases, outbreaks, and suspected outbreaks in the school community must be reported to your local health jurisdiction in accordance with Washington State law (WAC 246-101). Schools are encouraged to work with their local health jurisdiction to support COVID-19 mitigation strategies.

### Q: What are requirements versus recommendations in school guidance?

In the last update of the [DOH COVID-19 Guidance for K-12 Schools](#), which went into effect on August 5, 2022, some requirements were dropped or modified while others have become recommendations. See a breakdown in the [COVID-19 K-12 Guidance Brief for Schools](#).

### Q: What are the symptoms of COVID-19?

The [CDC list of symptoms](#) includes fever (over 100.4° F), 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, or diarrhea (2 or more loose stools in 24 hours.)

## Q: What if a student or staff member shows up to school with symptoms?

To mitigate potential risk of spreading the virus to others at school, a student or staff member who comes to school with COVID-19 symptoms should be asked to isolate at home. Schools can use the [COVID-19 Flowchart for Schools and Child Care](#) to guide next steps, including how to handle exposure situations.

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

Every positive case, outbreak, or suspected outbreaks will be reported to your local health jurisdiction, and case investigation and contact tracing may be initiated to protect the community and prevent further transmission. There may be circumstances where contact tracing is required, such as during an outbreak. Talk to your local health jurisdiction for more details.

Your school district and local health jurisdiction may be able to refer you to resources that can help with paid sick leave, temporary unemployment insurance, grocery delivery, mental health support, and other services during isolation and quarantine. Check [Care Connect Washington](#) for more information.

# Take-Home Tests

**NOTE:** Take-home tests are also known as over-the-counter tests or OTC tests.

## Q: How can families access take-home tests?

There are several ways families may be able to access take-home tests.

- Schools that have take-home tests may provide them to students.
- Say Yes! COVID Test, a statewide resource, can provide 2 sets of 5 tests (10 total) per month at [sayescovidhometest.org](https://sayescovidhometest.org).

## Q: How should take-home tests be used in schools?

Schools and child care providers may use and/or provide COVID-19 self-tests in a [variety of ways](#), depending on whether the facility has a Medical Test Site/CLIA license. Take home tests can be used in the following ways:

- Diagnostic testing
- Screening testing (athletics, performing arts)
- For those who have been exposed
- Testing onsite or sent home with families for true at-home testing, which can be useful for returning to school after break, for example
- For more information visit the [DOH COVID-19 Self-testing Guidance for K-12 Schools](#). See this [instructional video for using iHealth](#), an OTC test provided by the Learn to Return program.

## Q: Do schools need to report results for take-home tests?

OTC tests administered by schools, under a Medical Test Site/CLIA license, are considered point-of-care (POC) tests and should be reported as such through SimpleReport. Schools should not use SimpleReport to report OTC test results from students or staff who independently self-test at home. **They should have the student, parent, or guardian follow the [DOH COVID-19 Self-testing Guidance](#), which includes next steps after testing positive and options to report the result.** Regardless of whether the test was conducted on site or at home, schools must report all cases and suspected cases/outbreaks to their local health jurisdiction. For example, if a school is made aware of a positive result from a student's at-home test, they must report that to the local health jurisdiction.

The “**Reporting**” section of the [Self-testing Guidance for K-12 Schools and Child Care](#) (pages 4-5) and the [DOH POC Test Reporting](#) page have more information. Any questions from test sites, or schools that are submitting data, should be directed to the Surveillance Outreach Unit at [doh-surv@doh.wa.gov](mailto:doh-surv@doh.wa.gov). If your school is participating in [Learn to Return](#), you may also contact your Health Commons program manager for assistance.

### **Q: How should take-home tests be stored? Is there a temperature requirement?**

Tests should be stored indoors in normal temperatures around 59-86 °F. If a test is delivered in freezing temperatures, leave it unopened at room temperature for two or more hours before use. Visit FDA’s [At-home COVID-19 Diagnostic Tests: FAQ](#) for more information.

### **Q: Can schools use expired rapid antigen tests?**

All rapid antigen tests have been approved for use after expiration if the built-in quality controls (QC) are intact and from the test passes the QC test. Look up the revised expiration date for your test [Rapid Antigen Test Date Extensions document](#).

