LESSONS LEARNED ABOUT COVID-19 TESTING STRATEGIES

☐ Has your school developed a comprehensive COVID-19 testing strategy based on CDC guidance (Interim Guidance for SARS-CoV-2 Testing and Screening at Institutions of Higher Education (IHEs)), to safely begin “in-person learning” for all students, faculty, and staff on campus?

☐ Does your school’s COVID-19 testing strategy include redundancies and mitigation steps to meet the CDC’s recommended “Prevention Strategy” based on the ‘Community Indicator Level’ (established from the overall positivity rate compared between the 2 subsequent weeks)?

☐ Low Transmission (Blue): Implement universal entry screening at the beginning of each term.

☐ Moderate Transmission (Yellow): Implement universal entry screening at the beginning of each term, with expanded weekly screening testing.

☐ Substantial Transmission (Orange): Implement universal entry screening at the beginning of each term, with expanded screening testing twice a week.

☐ High Transmission (Red): Implement universal entry screening at the beginning of each term, with expanded screening testing twice a week.

*Note: Current guidance is the same for both Orange and Red.*

☐ Has your school identified sources for Real-Time Polymerase Chain Reaction (RT-PCR) & Antigen Rapid Tests to establish a base-line result, and to conduct screening?

☐ Does your school currently use a CLIA-certified laboratory and does the lab have a 24–36-hour turn-around time with the ability to meet the school's capacity needs?

☐ Are both your current RT-PCR and Antigen Rapid Tests able to capture the different SARS-CoV-2 variant strains, which greatly reduces the chance of false negatives?

☐ Has your school explored RT-PCR Pool Testing as a surveillance strategy to reduce cost?

☐ Does your school have sufficient staff to accommodate fluctuations in testing volumes based on the ‘Community Indicator Level’, or is the school looking to outsource testing collection to licensed medical professionals?

☐ Does your school have sufficient staff to conduct contact tracing if an outbreak occurs, or is your school looking to outsource to Contact Tracers who have completed one of the public certification courses (i.e., Johns Hopkins)?

☐ Do your school administrators, school medical staff, and coaches have access to technology that links Antigen Rapid Tests used for screening, and RT-PCR Tests used to establish a base-line result (or as a confirmatory test) to the same individual?

☐ Is your school able to use technology to report on-site Antigen Rapid Test results used for screening to the state health department per CDC guidelines?

☐ Does your school have technology that can show all tests per athletic team, residence hall, department, etc., to immediately react to a positive result and take mitigation steps for anyone potentially exposed?
Has your school implemented a daily health assessment questionnaire to capture the real-time health status of its students, faculty, and staff as a preventative measure to identify coronavirus symptoms and take appropriate mitigation steps?

Are your test results and daily health survey linked to a Smart Badge with QR code to identify positives and/or at-risk individuals?

Does your campus monitor students, faculty, and staff at the entrance of buildings and residence halls to determine entry based on the color of your QR code? For example, green QR code for “cleared” or red QR code for “not cleared.”

Has your school secured funding from the federal government, your state government, or other private institutions to expand its testing options for in-person learning to meet the recommendations from the National Institute of Health?

Does your school consider certified diversity vendor spend as an important component when sourcing testing supplies and services?

Is your school looking to outsource its testing requirements to multiple vendors or one vendor that can streamline the entire process?

Is your school requiring proof of vaccination for students, faculty, and staff prior to facilitating in-person learning on campus?

What does your school plan to do with students that do not receive the vaccine and have paid tuition (i.e., their medical doctor recommends waiting six months to receive the vaccine after infection)?

Is testing still required as a risk mitigation strategy for both vaccinated and unvaccinated students who may be asymptomatic SARS-CoV-2 carries?

Is antibody testing important to your school to confirm students, faculty, and staff have IgG antibodies from either the vaccine or a past infection?

Does your school need both COVID-19 testing services and vaccine administration from a single source vendor?

DOWNLOAD OR PRINT THIS CHECKLIST TO SHARE WITH YOUR SCHOOL’S ADMINISTRATORS WHEN DEVELOPING YOUR SCHOOL’S COMPREHENSIVE COVID-19 PREVENTION & TESTING STRATEGY.

To receive a free, personalized COVID-19 Prevention & Testing Solutions consult, please visit our website at spartanmedspine.com/covid-19-solutions/colleges-universities to complete our brief online questionnaire with some basic information pertaining to your school’s testing requirements.