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MEMORANDUM

TO: Superintendents, Charter School Leaders, Assistant Superintendents,
Collaborative Leaders, Leaders of Approved Special Education Schools

FROM: Jeffrey C. Riley, Commissioner, Department of Elementary and Secondary
Education
Margret R. Cooke, Acting Commissioner, Department of Public Health

SUBJECT: New COVID-19 Testing Program Option for K-12 Schools

DATE: January 18, 2022

Thank you for your ongoing efforts to keep schools open and safe for our students. You have been diligent about implementing key COVID-19 mitigation strategies, such as vaccinations, mask wearing, and testing, and we commend you for your hard work. We have now had the opportunity to review available data about our testing program. We are writing to share timely information from those data and as a result offer an updated set of COVID testing options, including a weekly at-home test for participating staff and students, to optimize in-school learning.

Review of Statewide Testing Program Data in Schools

With over 2,000 schools in the state participating in some form of our current testing program this school year (i.e., symptomatic testing, routine pooled testing, and Test and Stay), we have robust data on the prevalence of COVID-19 in schools. Those data are overwhelmingly strong: Schools are safe environments for teaching and learning.

For example, the individual positivity rate in K-12 schools in the state's pooled testing data reveal case rates significantly lower than the statewide positivity rate. Last week, despite elevated K-12 positivity, the estimated individual positivity rate was still only ~1/5 of the statewide positivity rate.¹ On top of these much lower-than-average positivity rates, schools are one of the few types of settings in the state where individuals are tested on a regular basis.

Data from our Test and Stay program are equally strong about school safety. Students and staff individually identified as asymptomatic close contacts and repeatedly tested in school

¹ K-12 positivity source: CIC K-12 data from processing laboratories, published on a weekly basis on Thursdays

through the Test and Stay program test negative over 90% of the time. As of January 9, 503,312 Test and Stay tests had been conducted; 496,440 of them were negative (98.6%).

It's also helpful to look at nationwide data related to Test and Stay to examine the extent to which secondary transmission (i.e., transmission to close contacts) is occurring in schools. The evidence from California and Illinois cited by the CDC in their Test to Stay guidance noted secondary transmission rates of only 0.7-1.5%.² A pre-publication study of the first 13 weeks of the Test and Stay program across all participating Massachusetts schools found that the secondary transmission rate was 2.9%, and that tertiary transmission was very low.

As always, we are committed to using data to inform our recommendations to districts and schools. **As demonstrated above, test positivity rates in Test and Stay indicate that individuals identified as close contacts in school are very unlikely to contract or spread COVID-19.**

These data show that transmission from close contacts is a rare occurrence in schools and that, therefore, extensive contact tracing and associated Test and Stay procedures are not adding significant value as a mitigation strategy despite the demand they place on the time of school health staff and school staff at large. **As a result, we are recommending that school health personnel increase their focus on identifying symptomatic individuals, rather than monitoring in-school close contacts who are unlikely to contract or spread the virus.** The new set of testing options described below, which includes a weekly at-home test for participating staff and students, will uniquely support this shift in focus.

Other New England states, such as Connecticut and Vermont, have recently transitioned from individualized contact tracing to the use of at-home tests and focusing school health efforts on symptomatic testing.

New COVID Testing Options to Optimize In-Person Learning

To enable districts and schools to make the shift towards greater focus of school health personnel on identifying symptomatic individuals and other aspects of COVID-19 management, the Department of Elementary and Secondary Education (DESE), the Executive Office of Health and Human Services (EOHHS), and the Department of Public Health (DPH) will now provide a new option within the statewide testing program to optimize in-person learning. **Specifically, districts and schools participating in symptomatic and/or pooled testing may choose to continue those testing strategies and discontinue contact tracing and Test and Stay.**³ **As an additional resource, districts and schools that elect to make this change will be provided with rapid antigen at-home tests for all participating staff and students that can be used on a weekly basis.**

² <https://www.cdc.gov/media/releases/2021/s1217-Test-To-Stay.html>

³ Using their professional discretion, school health professionals may determine if specific situations warrant contact tracing.

DESE and DPH recommend that districts and schools select this new option, and if they choose to implement it, they must notify their local boards of health. Please note that this new option is only available to districts and schools that continue symptomatic and/or pooled testing. Districts and schools that choose to maintain Test and Stay will continue contact tracing and will not be eligible to receive rapid antigen at-home tests. As a continuation of its contract with the state, CIC will continue to provide staffing and logistical support for the testing program (both the original program and the new option), including program coordination and on-site specimen collectors as needed. CIC will also continue to manage consent and reporting processes.

DESE and EOHHS/DPH will continue to evaluate the COVID testing services we are offering throughout the remainder of the winter and early spring. The updated options will remain in place from January 31 to April 22. We will determine if any updates to the program are needed beyond April 22 and provide you with information throughout the early spring.

Implementation Details

The chart below describes the components of each option now available to all districts and schools in the state including local education agencies, charter schools, education collaboratives, approved special education schools and private schools:

	Updated K-12 Testing Options (effective 1/31) Discontinue contact tracing and Test and Stay <strongly recommended>	Original K-12 Testing Options Maintain contact tracing and Test and Stay
Symptomatic testing and/or routine pooled testing	Yes	Yes
Test and Stay	No	Yes
Individualized contact tracing for in-school exposures	Not required	Yes
Weekly at-home antigen testing (students and staff)	Yes, with initial shipment for participating staff during the week of January 24; initial shipment of at-home tests for participating students during the week of January 31	No

Additional Information Regarding At-Home Antigen Tests

Districts and schools can elect to switch to the updated testing program between January 21 and April 1, 2022 by responding to this [brief survey](#). Those that respond affirmatively by January 21 will be prioritized to start the updated testing program. The at-home antigen tests will be provided on a staggered basis with delivery of tests for staff and students occurring in alternate weeks. Districts that respond by January 21 will begin receiving tests for staff during the week of January 24 and tests for students during the week of January 31.

Districts and schools that select the updated testing program will receive at-home antigen tests for all staff members who choose to participate and all students whose parents/guardians signify interest in participating by completing a brief opt-in form. DESE will provide an optional template opt-in form for this purpose. Schools and districts can distribute at-home tests to all participating staff and students regardless of vaccination status. The tests will be shipped to the district for internal distribution, and they are packaged in kits containing two tests per kit. Participating staff and students will receive one kit every two weeks so that they can test themselves weekly. Districts and schools should maximize the use of the at-home tests by determining which day of the week they recommend participating staff and students take the tests. For example, a school that conducts weekly routine pooled testing on Mondays would likely recommend students and staff to undertake at-home tests on Thursdays. When an individual tests positive on an at-home antigen test, they will be asked to inform their school of the positive result. DESE will provide an optional template response form for this purpose. At this time, the school will not be required to report the results of at-home tests to DPH, but districts and schools will continue to include positive at-home tests in their weekly testing reports to DESE.

Districts and schools that select the updated testing program will receive the materials and supports (including necessary translations) they need to launch at-home tests, including the following:

- Optional template letter to staff
- Optional template letter to families with link to opt-in form, training materials, and positive test result notification
- Training for at-home tests (video & paper)
- Test distribution tracking sheet for districts
- Test result response form for parents/guardians to report positive results to schools
- Updated CIC ordering form for at-home tests

Update to Quarantine Guidelines

As stated above, districts and schools that select the new testing program will discontinue individualized contact tracing. As such, for these districts and schools, there is no longer the expectation that close contacts will be identified, and therefore, any potential contacts do not need to quarantine. Instead, schools should shift their focus to monitoring symptomatic

individuals. DESE and DPH will soon update the “Protocols for Responding to COVID-19 Scenarios” guidance to reflect these changes.

Summary of Next Steps

Districts and schools may elect to switch to the updated testing program between January 21 and April 1, 2022 by responding to this [brief survey](#). Those that respond affirmatively by January 21 will be prioritized to start the new program.

Recommended timeline (for districts and schools that wish to begin the new program on its 1/31 start date):

- By January 21, interested districts and schools submit [brief survey](#) to DESE.
 - Between January 18-21, districts and schools determine how many staff will participate in the at-home antigen test option. The district or school will send this information to DESE in the survey.
- During the week of January 24, districts that respond affirmatively to the survey will begin to receive tests for participating staff.
- By January 28, districts will collect opt-in forms from interested families.
 - By January 28, districts will report to DESE the number of participating students by ordering the requisite number of tests through the CIC ordering portal.
- During the week of January 31, districts will begin to receive tests for participating students.

Once the district or school distributes these tests, it will discontinue contact tracing and Test and Stay.
- After January 31, districts will order additional at-home tests on an as needed basis using the CIC ordering portal.

As a reminder, districts and schools may elect to switch to the new testing options by responding to the DESE survey anytime between January 21 and April 1, 2022. Because at-home tests for staff members and students will be provided in alternating weeks, DESE and EOHHS/DPH will incorporate districts and schools that opt into the updated testing program after January 21 into the existing distribution schedule.

Vaccine Clinics

As a reminder, vaccines continue to be the best way to protect our residents against the effects of COVID. Please encourage students and staff to get vaccinated. We strongly encourage districts and schools to host [mobile vaccination clinics](#) to continue to provide access to vaccines and boosters for staff and students.

Conclusion

We began our statewide testing services in the fall of 2020 with mobile testing clinics and symptomatic testing. Always looking to strengthen our response and supports, we added routine pooled testing about one year ago and during the summer of 2021 we introduced Test and Stay. A strength of our statewide approach is its adaptability to meet the needs of our schools based upon their current conditions. We have now adapted our program to further optimize in-person learning. We look forward to your feedback as we implement this new program.