

POLICY
RHODE ISLAND SCHOOL FOR THE DEAF
BOARD OF TRUSTEES

BinaxNOW COVID-19 SENTINEL TESTING PROGRAM

Purpose

Not all who carry and shed the novel Coronavirus experience the classic symptoms. Sentinel testing is intended to proactively prevent spread of COVID-19 to the school community by periodically testing asymptomatic carriers. The priority is safety and health of all of the RISDeaf Community including that of the testing team.

BinaxNow testing information

Test kits are provided to the School by the RI Department of Health (RIDOH). Those involved in implementing this testing protocol have been trained by RIDOH teams.

BinaxNow testing is 99.98% accurate. It is an antigen test, not a PCR test. It can detect proteins from the virus that causes Covid-19. PCR tests are molecular tests which detect genetic material from the virus. Antigen tests are very specific for the virus but are not as sensitive as PCR. This means a positive result is highly accurate.

Anyone who has tested positive for Covid-19 in the last 90 days, should not be tested. This is because the viral load will probably still be high and the test will be positive, even though they are no longer contagious.

The BinaxNOW test kits are sensitive to temperatures. They must be stored and kept at a temperature higher than 35.6 degrees F and lower than 86 degrees F.

All personnel employed in this activity should use [this link](https://www.globalpointofcare.abbott/en/support/product-installation-training/navica-brand/navica-binaxnow-ag-training.html) and review Modules 1-4

Control testing should be done upon opening up each new box of test kits. Use 6 drops of reagent to perform the control testing. There is a control swab in each box. Put the date on the box when this is done if you are not using all the card tests that day.

BiNaxNow testing Place label on the outside of the card. Open the card and look for the blue line. If not present, do not use the card. Then place 6 drops of reagent onto the top hole of the card- holding the reagent bottle at 90-degree angle, ½ inch above and the bottle should not touch the card. Take the sterile swab out of the package and carefully place the swab into the nostril, not more than one inch and rotate the swab 5 times around the first naris and with the same swab, repeat sample collection in the other naris.

When the swab is completed, insert the nasal swab into the large bottom hole of the test card, firmly push upwards so that the tip is visible in the top hole. Rotate the swab 3 times clockwise. Do not remove the swab. Peel off the adhesive strip on the card and close the card securely. **Do not pick up the card**, leave flat on the table after opening the card until after reading the results. Results are read in 15 minutes and up to but no longer than 30 minutes. Do not touch the card during the 15 minutes

In a valid test, the blue line washes away and a pink to purple line appears. A single pink or purple line indicates a negative test. A positive test will show 2 pink to purple lines.

Invalid readings include the presence of a blue line or no pink or purple line.

Implementation

Prior to Testing

Testing availability will be advertised to everyone in the school community.

Students under the age of 18 years, must have consent from a parent/guardian. Those high school students who are already 18 or older may provide their own consent.

Staff and faculty are encouraged, but not required, to be tested as well.

No student will be tested without a completed consent form. The consent form will be signed once by the parent for all tests done at school this year. However, if the student refuses the test in school, that will be respected and the parent should be called to inform them. Staff and students 18 and older are not required to sign consent forms.

A list of students with consent forms should be at the testing registration table.

School personnel needed

Optimally, 4-5 people are needed for the hour or two for testing and then they can assume their other duties. The following staff will take on this responsibility:

- someone to get students with consent off the bus or call down to the gym after arrival during Period A on the designated testing days.
- a registration person to check for consent, label the test card and give appropriate card to each individual being tested.,
- a nurse to swab or supervise self-swabbing
- a person for timing and recording test results
- an ASL Interpreter

Testing Area

Testing will be conducted in an area large enough to ensure social distancing (usually in the gym) and privacy. All participants will be required to wear facial masks. The testing area/room should have good ventilation with air purifiers and/or windows or doors open.

The flow of traffic of students and staff coming to the testing table and then back to class, as much as possible, should be one-way traffic in and out of the gymnasium.

Test swab will be conducted one person at a time under the supervision of the School Nurse.

Masks are down shortly while swabbing is being done but precautions are taken as this could increase risk of viral spread.

The 8-foot testing table should have one area designated for putting the swab into the card as well as areas designated for the test cards to rest for 15-30 minutes until the results can be read.

A biohazard disposal box with the red biohazard bag must be kept in the testing area.

After the swabbing is done, students and staff return to their classes. There is no waiting in the test area for results.

If results of the test are positive, the student will be escorted to the medical waiting room. The Principal and parent will be notified immediately. Student needs to stay home from school in isolation for 10 days. The student will be informed that their parent is coming and will be given a return to school date.

The testing area should be completely sanitized after all the testing is completed.

Full PPE should be used during swabbing with gloves being changed after each swab is done.

PPE should include N 95 or KN95 mask (not a Surgical mask), gown, gloves, and a face shield or eye goggles. A gown should be worn through all the tests.

If self-swabbing is done, gloves do not need to be changed after each swab is done.

All staff and high school students will be given the choice to self-swab.

All student and staff results are entered into the RIDOH portal following testing. Positive results need to be entered by 12:00 p.m. The director or other designated member will enter all results in the portal.

Symptomatic students will not be tested. Probable cases will follow the same protocol as before and will be sent home and referred to sign up to be tested at a k-12 symptomatic test site in the community.

Virtual learners will not be tested in school unless they participate in school sports.

Due to time constraint and personnel requirements for testing, we will not be testing staff or students at any other times.

If there is a positive test, contact tracing must be done in collaboration with RIDOH, the director and school nurse asap and students will be sent home as necessary.

Disposal

A Biohazard Box with the red bag should be used to dispose of the test kits only. Each box can hold around 1000 used tests. Each box has a red biohazard bag with 2 extras bags per schools.

After testing is over for the day, the red bag should be folded over to cover the top and stored in a safe area away from students and staff. Gloves and test kit packaging can be discarded in the regular trash receptacles.

When the red bag is full (which may take a few months) a call can be made to pick it up. The red bag should be twisted and sealed and the box should be sealed with tape for pick up.

“Approved Med Waste Company” 888-388-2525 is the only biohazard waste company approved at this time. It costs approximately \$100 for each Biohazard pickup. This medical waste is considered a Category 6 waste and it is against Federal law for anyone to transport/remove the waste from the building except for the approved medical waste company.

Approved: January 21, 2021