

STAY SAFE MN

Minnesota COVID-19 Testing Program for Child Care Providers

December 10, 2021

mn MINNESOTA

Meeting Expectations

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- Mute mics
- Keep video off
- Meeting will be recorded and shared at MDE: Health Resources for Schools (<https://education.mn.gov/MDE/dse/health/covid19/health/>)

Agenda

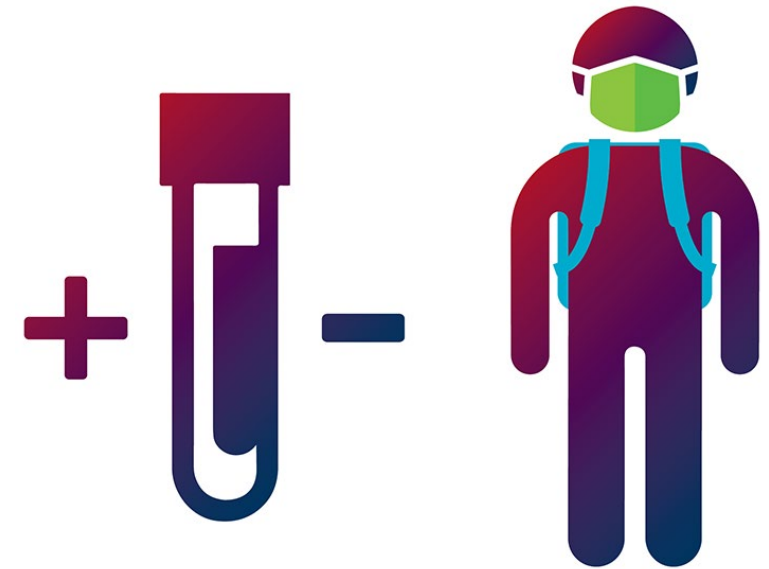
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- Why We Test
- Vault Update
- BD Veritor At-Home Tests
- Case Reporting - REDCap
- Cue Tests
- CLIA Certificate of Waiver
- Lab Reporting – RePortal
- Q & A

Why We Test

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- Regular testing can help identify new cases early, which can prevent spread in the community.
- Keeping COVID-19 spread under control can keep kids healthy and in child care settings.
- Testing in child care settings can help to ensure convenient and equitable access.



Vault Updates

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- Providers can continue to use any Vault tests they have on hand until **January 31, 2022.**
- Providers can order additional Vault test supplies (mailing bags, biohazard bags).

BD Veritor At-Home

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- Rapid antigen test
- Nasal swab
- Available for anyone over the age of 2
- Administered at home
- Two tests per test kit
 - Do not separate
 - Take 24-48 hours apart





- Download the Scanwell Health App
 - Available for iPhone, Samsung Galaxy, Google Pixel
 - Full list of compatible devices: <https://www.bdveritorathome.com/en-us/overview>
 - Apple App Store: <https://apps.apple.com/us/app/scanwell-health/id1360761030>
 - Google Play Store: https://play.google.com/store/apps/details?id=com.scanwell.and.y&hl=en_US&gl=US
- App will guide users through the testing process
- It will take about 20 minutes from start to finish

When to use BD Veritor At-Home tests?

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Screening Test

- Yes, but frequent testing or confirmatory test may be needed for negative results.
- Because of the limited supply available through the Minnesota testing program, tests are intended to be used for **symptomatic people only**.

Rapid Test

- Good to use when you need quick results, 20 minutes or less.
- Yes, especially in symptomatic people. **May need follow-up test when there is a negative test result.***

Diagnostic Test

- Good to use when a person has symptoms.
- Yes. **Negative tests in symptomatic individuals should be confirmed by a molecular test.***

- Refer to [CDC: Interim Guidance for Antigen Testing for SARS-CoV-2](https://www.cdc.gov/coronavirus/2019-ncov/lab/resources/antigen-tests-guidelines.html): <https://www.cdc.gov/coronavirus/2019-ncov/lab/resources/antigen-tests-guidelines.html>
- SOURCE: [COVID-19 Testing During the 2021-22 School Year](https://www.health.state.mn.us/diseases/coronavirus/schools/testing.html): <https://www.health.state.mn.us/diseases/coronavirus/schools/testing.html>

Reporting Positive Cases

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- Child care providers should encourage families to tell them if they receive a positive test.
- If a COVID-19 case is found in a child or staff member, providers should report using **REDCap** (<https://redcap.health.state.mn.us/redcap/surveys/?s=YLH94XW7YKD9WDE9>).
- Questions about reporting can be emailed to Health.COVID-19.Case.Intake.Team@state.mn.us.
 - Include **child care** in the subject line.

The screenshot shows the header of the form with the Minnesota Department of Health logo and title. Below the title is a subtitle and a brief instruction. The form fields are organized into a table-like structure with labels on the left and input areas on the right.

mn DEPARTMENT OF HEALTH	
COVID-19 Case Report Form for K-12 Schools, Childcares, and Youth Programming (Camps, Sports, Extracurricular Activities)	
Please complete this form for each suspected COVID-19 case in your school/childcare facility, sports program, and/or youth (day or overnight) camp.	
Today's Date	11-05-2021 M-D-Y
Reporter's Name <small>* must provide value</small>	<input type="text"/>
Reporter's Email <small>* must provide value</small>	<input type="text"/>
Reporter's Phone	<input type="text"/> <small>Please provide direct number if possible</small>

Ordering BD Veritor At-Home

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- For initial orders child care providers can request:
 - 1 test box per child over the age of 2
 - 1 test box per staff member
 - Minimum of one shipping box – which has 30 test kits
- If a provider has less than 30 children and staff, they will only be shipped one box of 30 test kits.
- Additional orders may be possible in 2022.

Communicating with Families

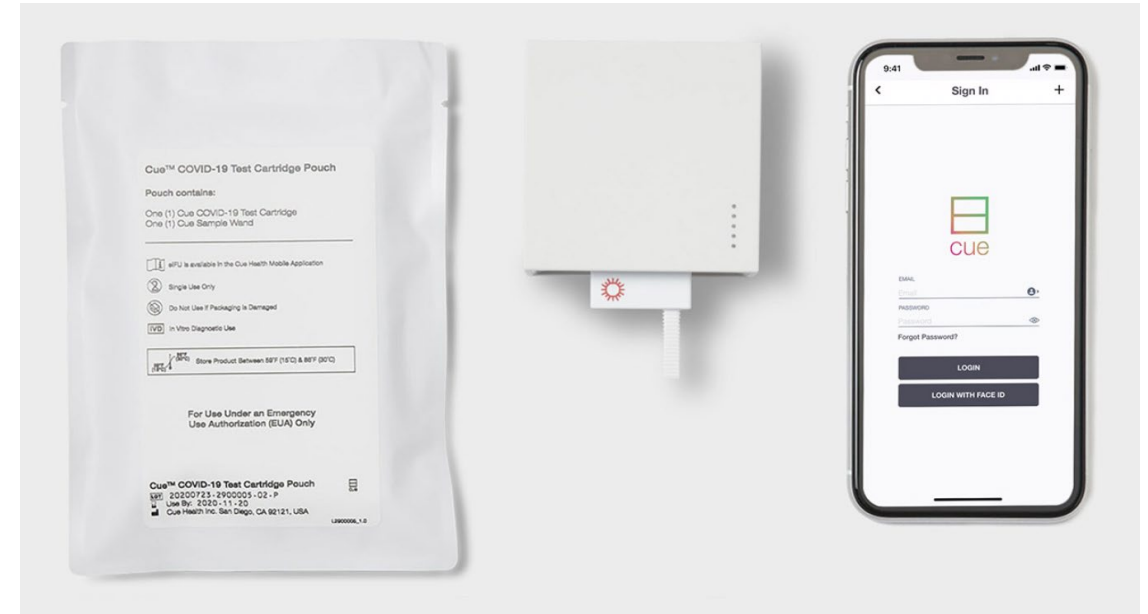
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- Template email for families and instructions to be sent home with tests <https://www.dropbox.com/sh/xoi5v2b5ue8ot1e/AADUiNSJoQ1vMK1rW-UcC9Uva?dl=0>

Cue Tests

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- Rapid molecular test
- Nasal swab
- Used for symptomatic or asymptomatic testing
- Approved for use with children ages 2 and older and staff
- Must be administered on-site by a trained staff member
- Cue Tests require a Clinical Laboratory Improvement Amendments of 1988 (CLIA) Certificate of Waiver
- Cue Testing Information (<https://www.health.state.mn.us/diseases/coronavirus/schools/cue.pdf>)



- Clinical Laboratory Improvement Amendments of 1988 (CLIA) regulations apply to all U.S. sites testing human specimens for health assessment or to diagnose disease, including COVID-19.
(<https://www.cdc.gov/clia/index.html>)
- CLIA waivers are needed for blood glucose and ketone testing.
- If you already have a waiver, you need to add Cue to the list of tests you are conducting.
 - Email health.CLIA@state.mn.us.

CLIA Waiver Options

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- Organizations needing CLIA certificate of waiver have two options:
 - Option 1: Register with CLIA program
 - Option 2: Submit a request to use the MDH statewide CLIA certificate of waiver
- **Only choose one option**

Option 1: Local CLIA Waiver

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- Providers can apply for their own CLIA Certificate of Waiver using the [CMS-116 form](https://www.cms.gov/Medicare/CMS-Forms/CMS-Forms/downloads/cms116.pdf) (<https://www.cms.gov/Medicare/CMS-Forms/CMS-Forms/downloads/cms116.pdf>).
- Once the form is completed, it should be emailed to health.CLIA@state.mn.us.
- CLIA waiver fee of \$180 every two years.

Option 2: Temporary Statewide CLIA Waiver

- To be covered by statewide CLIA Certificate of Waiver, providers enter into an agreement with MDH.
- The agreement covers general obligations, legal compliance requirements, cooperation with MDH, manufacturer's instructions, guidance, training, test administration, and reporting requirements.
- Providers complete one agreement, regardless of number of testing sites.

Option 2: Temporary Statewide CLIA Waiver

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- MDH CLIA Certificate of Waiver: <https://www.health.state.mn.us/diseases/coronavirus/hcp/clia.html>
- Page includes link to Attestation form that must be completed and returned to MDH at health.test.help@state.mn.us.
- Once approved, organizations can begin ordering tests with MDH CLIA waiver.

CLIA Certificate of Waiver Options

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Local CLIA Waiver	Statewide CLIA Waiver
\$180 fee/2 years	No Cost
All testing	ONLY COVID-19 Testing
Renewable	Temporary

Testing Questions

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Send your COVID-19 testing questions to
COVIDtesting.MDE@state.mn.us.

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Reporting COVID-19 Lab Test Results

MDH COVID-19 Case Intake & Schools/Childcare Provider Teams

12/09/2021

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**If you are conducting tests, you are
REQUIRED to report results.**

Reporting Requirements

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When testing on-site (at your childcare facility) **all results**, positive and negative, must be reported to MDH within 24 hours through RePortal.

- Reporting to MDH fulfills the [United States Health and Human Services \(HHS\) reporting guidance](#)
- Laboratory findings only need to be reported in this format for results run in-house or at your childcare facility

Important reporting reminder for childcare providers

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- The **childcare provider** is the **testing lab and provider**.
- The **child or staff** member being tested is the **patient**.



Testing_lab_name	Patient_ID	Patient_last_name	Patient_first_name	Patient_middle_name	Patient_race	Patient_DOB	Patient_gender	Patient_ethnicity	Patient_street1	Patient_s

The Reporting Spreadsheet for Testing at Childcare Providers

Filling out the Reporting Spreadsheet

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After completing a test at a childcare facility, results should be added to the MDH Reporting Spreadsheet.

- Choose the spreadsheet based on type of test; please use the spreadsheets we provide.
<https://www.health.state.mn.us/diseases/coronavirus/schools/testing.html#report>
 - For Cue: School Cue.xlsx
- The template may be completed in Excel and saved as a new version once complete.

Filling out the Reporting Spreadsheet, cont.



- You may submit multiple test results in one spreadsheet. Each line of the spreadsheet represents a different result.
- Please start a new spreadsheet each day to submit new results.
- If you have questions about reporting, please contact us at Health.COVID-19.Case.Intake.Team@state.mn.us
 - Include **child care** in the subject line

How to Complete the Spreadsheet

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- The spreadsheet is used to upload test results into the state system. The template is designed to be compatible with this system.
 - Yellow columns indicate required information; blue columns contain optional information and may be left blank.
 - **DO NOT** delete or rearrange any columns.
 - There are some hidden columns that you do not need to fill out.
 - You may notice that some of the columns are prefilled with information for the type of test, please do not change this information.

Childcare Provider and Child Information

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Column A: Testing lab name is the name of the childcare facility the child attends.

Column C: Patient ID. Please enter “Child” or “Staff”

A	C
Testing_lab_name	Patient_ID

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	G	
Patient_race		Pat
American Indian or Alaska N		
Asian		
Black or African American		
Native Hawaiian or Other P		
White		
Unknown		
Refused to answer		

Column H: Child date of birth MM/DD/YYYY

Child Demographics cont.

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Columns I and J collect additional, optional demographics. If unknown leave the column blank.

Column I: Child gender (dropdown menu)

Expected values: Male; Female; Other; Unknown; Ambiguous

Column J: Child ethnicity (dropdown menu)

Expected values: Hispanic; Not-Hispanic; Unknown; Refused to answer

I	J
Patient_gender	Patient_ethnicity

Student Demographics cont.

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L	M	N	O	P	Q
Patient_street1	Patient_street2	Patient_city	Patient_county	Patient_state	Patient_zip_code

Columns L-Q collect the current home address of the child. For staff, please use their personal address.

Column L: Child street address line 1

Column M: Child street address line 2

Column N: Child residence city

Column O: Child residence county

Column P: Child residence state

Column Q: Child residence five or nine-digit zip code (nnnnnn or nnnnnn-nnnn)

Child Contact Details

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Columns R-S are for the phone number of the parent/guardian. It is important to have accurate phone numbers because they will be used to reach confirmed cases for interview.

If unknown, you may leave blank.

Column R: Parent/guardian home phone number

Expected format: nnn-nnnnnnnn

Column S: Parent/guardian cell phone

Expected format: nnn-nnnnnnnn

R	S
Patient_home_phone	Patient_cell_phone

Ordering Provider Columns

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T	U	V	W	X	Y
Ordering_provider_name	Ordering_provider_street	Ordering_provider_city	Ordering_provider_state	Ordering_provider_zip_code	Ordering_provider_phone

The ordering provider columns (T-Y) should indicate who administered and/or is reporting the test.

- Column T: First and last name of the reporter
- Columns U-X: Use childcare provider's address of where the case attends/works, (not necessarily the same as the reporter).
- Column Y: Reporter's office phone number or childcare facilities office number (nnn-nnnnnnn)

Ordering Facility Column

The next column, Z, is where the test was completed. In most cases this will just be the **name of the childcare facility where the test was administered**.

Z
Ordering_facility_name

Test Description Column

Column AB refers to the type of test conducted. **This has been prefilled for you.**

Column AB: Description of test

- For Cue: SARS coronavirus 2 (COVID19) N gene [Presence] in Nose by NAA with probe detection

AB
Test_performed_description
SARS coronavirus 2 (COVID19) N gene [Presence] in Nose by NAA with probe detection

Test Result Column

Test Results can be entered in column AE. This column should be filled using the choices below.

- Column AE is the description of the test result.
- Please use the dropdown menu.

AE	
Test_result_description	Date
<div><div></div><div>Positive Presumptive Positive Not Detected Invalid</div></div>	

Test Date Columns

AH	AI
Date_result_released	Specimen_collection_date

The test date columns (AH-AI) are the date the test was performed. The same date is entered for both columns.

The expected format for these dates is MM/DD/YYYY

Specimen Type

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Column AK is collecting information on specimen type. It has been prefilled for the tests that you are using.

AK
Specimen_type_description
Nasal swab

Last Date Child Attended Childcare

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Column AM (Comments) is used to collect the last date the child attended childcare at this facility, which will help us determine whether the child was in attendance while infectious.

- If the result was positive, please enter the last date the child attended childcare (the childcare facility) using MM/DD/YYYY format.
- If negative, you do not need to enter a date.
- If presumptive/inconclusive, please enter the date.

AM
Comments
Last date the student was in school:

We also have a Quick Guide!

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Column(s)	Column Name or Summary	Description
A	Testing_lab_name	The school the student/staff member attends
C	Patient_ID	Can enter "staff" or "student" or a unique number
D to Q	Name, address, info	Student's Information
R to S	Parent/Guardian Phone	Staff/Parent/Guardian Phone
T to Z	Ordering facility information	Information for the school where the test was completed
AB	Test_performed_description	Prefilled. Do not edit
AE	Test_result_description	Enter result (positive, not detected) using dropdown menu
AH to AI	Date_Result and Specimen_Date	Are both the date of the test (will be the same day for rapid tests)
AK to AL	Test Description and Code	Prefilled. Do not edit
AM	Comments	If positive, enter the date the student last attended school
AX	Test_kit_EUA_ID	Prefilled. Do not edit

Submitting to RePortal

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Childcare providers must report **all** COVID-19 test results to MDH within 24 hours.

Save the reporting spreadsheet is that is completed with the entries and uploaded to RePortal.

One spreadsheet per day must be submitted when results are available.

- For example, if you are testing Monday to Friday, you will upload five spreadsheets per week.
- If no testing is done a particular day, there is no need to submit an empty spreadsheet.

RePortal: Upload File

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- RePortal first time registration : <https://reportal.web.health.state.mn.us/mncts/>
- RePortal sign in: <https://reportal.web.health.state.mn.us/mncts/login>

Welcome to the MDH RePortal

To upload a new spreadsheet with COVID-19 results, click this button:	Upload File ➤
To see a spreadsheet that is incomplete, click this button:	Pending Submission ➤
To see all the COVID-19 test result spreadsheets your organization has submitted, click this button:	Previous Submissions ➤

- In RePortal, select “Upload File.” From there, select “Choose file” and then “Upload.” On the review page, select “Submit File.”

RePortal Errors must be fixed Warnings do not stop submission

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Review and submit spreadsheet

Original spreadsheet

[SAMPLE_no_results2_Pot_Luck_Health_Care_COVID19_052021.xlsx](#)

Total record count

9

Skipped records

0

Clean records

7

Records with errors

2

Record errors must be fixed before successful submission

Row	Error
9	Test result is required.
Row	Error
10	Test result is required.

Example of error

Re-upload file

Cancel file submission

Request help

- How to fix errors: <https://www.youtube.com/watch?v=aKBMlokCEK4>
- How to fix warnings: <https://www.youtube.com/watch?v=OsvWOyiW7rI>

Resources

- [Minnesota Department of Health RePortal](#)
- [United States Health and Human Services \(HHS\) reporting guidance](#)

**For any questions, comments, or concerns regarding reporting
please email the MDH COVID Case Intake Team at
Health.COVID-19.Case.Intake.Team@state.mn.us.**

Include child care in the subject line



Thank you!

MDH COVID Case Intake Team

Health.COVID-19.Case.Intake.Team@state.mn.us