WA State DOC COVID-19 Testing Protocol, Version 12

The purpose of this guidance document is to outline scenarios in which local Department of Corrections (DOC) COVID-19 Staff Serial Testing Teams and Health Services testing staff can perform Polymerase Chain Reaction (PCR) tests and Rapid Antigen Tests (RATs) of incarcerated individuals, residents, staff, contractors, volunteers, professional visitors, and personal visitors at the Washington State DOC.

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Changes in Version 12

Minor formatting and changes to align with already existing language in the Safe Start document

Definitions

DOC COVID-19 Staff Serial Testing Teams (Testing Teams) at prison and Work Release (WR) facilities provide professional and confidential recurrent, weekly (serial) testing based on direction from DOC’s clinical medical and Emergency Operations Center teams. In prisons, serial testing is for staff. In WR, serial testing is for staff and residents.

Testing Teams also provide rapid antigen testing per these protocols and may assist with cluster and outbreak testing orders for staff/contractors, incarcerated individuals, and residents. To ensure proper medical orders are followed and adequate testing supplies maintained, the Testing Team may only perform rapid antigen testing in situations specified in this WA State DOC COVID-19 Testing Protocol.

This protocol uses these terms and definitions:

- **Incarcerated Individual**: Person incarcerated at one of DOC’s twelve prison facilities.
- **Resident**: Person residing in one of DOC’s twelve Work Training Release (WR) facilities.
- **Staff/Contracted Staff**: Person employed by DOC directly (considered “Blue Badge” staff) or indirectly through a contracting agency (considered “Yellow Badge” staff) or through our Contracts Office. Yellow Badge staff include staff in Chemical Dependency, Libraries, and Education, for example. Also, staff from the Office of Correctional Ombud’s (OCO) and Business Representatives of 117 (union) are included in this definition.
- **Volunteer/Vendor**: Person volunteering at DOC.
  - “On-site volunteer” and “on-site contractor” includes: A volunteer or contractor who is reasonably likely or contractually obligated to engage in or in fact engages in work while physically present at a building, facility, jobsite, project site, unit, or other defined 24 areas (12 prisons and 12 work release facilities) owned, leased, occupied by, or controlled by a State Agency, an operator of an Educational Setting, or an operator of a Health Care Setting.
  - “On-site volunteer” and “on-site contractor” does not include: A volunteer, vendor or contractor who is reasonably likely or contractually obligated to engage in or in fact engages in work during which they are physically present at a site for only a short period of time and any moments of close physical proximity to others on site are fleeting. Examples include contractors delivering supplies by truck to a construction site where they remain physically distanced from others on the site or a driver for a contracted shipping and delivery service briefly entering a site to pick up parcels for shipping.
- **Professional Visitor**: Person visiting a DOC worksite for occupational reasons, such as a law enforcement employee, a lawyer, or a legislator.
- **Personal Visitor**: Person visiting an incarcerated individual in one of DOC’s twelve prison facilities, including Extended Family Visitors (EFV).
General PCR and RAT Information

1) DOC has implemented DOC COVID-19 Polymerase Chain Reaction (PCR) Serial Testing as a strategy to mitigate transmission of COVID-19 and to reduce the impact on employees, those under the department’s jurisdiction and department operations. The department requires weekly PCR testing for all staff/contractors and volunteers who work in congregate work settings, regardless of vaccination status.

2) In cluster and outbreak status, testing teams may PCR test incarcerated individuals, residents, and/or staff/contractors to limit the transmission of COVID-19, as directed by protocol or the facility ICP.

3) For Rapid Antigen Tests (RAT), DOC is using the BD Veritor & Rapid Abbot BinaxNOW COVID-19 Antigen Point of Care SARS-CoV-2 Diagnostic testing systems.
   a) Due to test shortages, DOC has two approved options for rapid testing. Use of either test requires adequate training. Reach out to the EOC Testing team if additional staff training is needed.
   b) Rapid Antigen Tests (RAT) are different than PCR tests in several ways, including:
      i) The RAT provides onsite results in minutes.
      ii) The RAT does not require a laboratory which can take multiple days to provide results.
      iii) The RAT detects specific proteins from the virus rather than viral genetic material.
      iv) The RAT may not be as sensitive for picking up virus especially in the early course of infection but is more likely to reflect persons who currently have COVID-19 infection and can spread the virus to others.

Conducting Tests

1) For incarcerated individuals and residents, the local Testing Team may assist with non-clinical tests, for example transfer testing or testing under cluster or outbreak status.
   a) For other clinical testing indications (such as pre-procedure and isolation/quarantine), please see the WA State DOC COVID-19 Screening, Testing, and Infection Control Guideline for PCR testing and RAT details.

2) For all others receiving PCR tests or RATs, testing will be coordinated through the Testing Team or designee, under direction of the Testing Branch Director. All Testing Team members must sign the COVID-19 Confidentiality Agreement form.

3) PCR and RATs may only be conducted as directed through the scenarios in this protocol or as ordered by DOC’s Occupational Nurse Consultants (ONCs) or Secondary Screener nurses, who use specific Return to Work (RTW) guidelines and clinical discretion.
   a) NOTE: Staff, contractors, or volunteers cannot refer themselves to get a PCR or RAT. A supervisor cannot refer their employees/volunteers to get a PCR or RAT either. Testing outside of explicit protocols is considered practicing medicine without a license and is strictly forbidden.
   b) NOTE: RATs are only valid if conducted on-site, by trained staff. Staff/contractors or volunteers may not administer their own RATs.

4) The Testing Branch Director will be responsible to track and ensure test team resources are available to conduct routine PCR tests as well as the RAT on all the days ordered for staff, during their regularly scheduled shift. For example, if day 3 testing falls on Sunday 1st shift, there must be a trained tester available to RAT the staff/contractor.
   a) Exceptions for a RAT may also be made for more frequent (daily) testing in especially high-risk settings, and these exceptions will be specified by the COVID-19 Medical Duty Officer or Employee Occupational Health and Wellness Medical Director.
Testing Principles

The department has implemented COVID-19 testing as a strategy to mitigate transmission of COVID-19 and to reduce the impact on employees, those under the department’s jurisdiction and department operations.

The department will continue requiring weekly COVID-19 Staff Polymerase Chain Reaction (PCR) Serial testing for staff in congregate work settings, regardless of vaccination status.

RATs may also be ordered based on the scenario. PCR and RAT testing protocols in place for congregate setting areas include:

1) **For Staff/Contractors**
   a) **Return to work from isolation for COVID positive cases:** Refer to applicable phase for accurate isolation period and return to work guidance. Upon return from isolation – return to work with a negative RAT test. Additionally, if positive:
      i) No longer will need to do serial testing after they are cleared to RTW for 30 days after a positive COVID-19 test unless they have symptoms and are screened out.
      ii) Restart serial testing by weekly RAT beginning 30 days post positive test.
      iii) Continue weekly RAT until day 90 post positive (i.e. Serial testing will be by RAT days 30-90)
      iv) Resume weekly PCR testing after 90 days from a COVID-19 positive test and stop weekly RAT serial testing (i.e. Staff should not get a COVID-19 PCR test within the 90-days from positive result).
   b) **Return to work for fully vaccinated close contacts:** follow the Return to Work Guidelines should be follow for frequency/duration of Rapid Antigen Testing (RAT).
   c) **Those traveling** to a facility or Work Release, who haven’t completed COVID-19 testing within the last seven (7) days, will be required to participate in PCR Testing before entering. If PCR Testing is unavailable at the time of the scheduled shift RAT may be performed alternatively.
   d) **Return to work for those who have used public transportation out of state:** The current Active and Passive Screening Questionnaires includes a question about non-essential travel out of state by public transportation. If staff answer yes to this and cannot quarantine or telework, they may return to work with a RAT.
   e) **Response testing for cluster and outbreak status:** DOC’s clinical leads for Health Services and Employee Occupational Health will work with worksites and ONCs and Secondary Screener Nurses on declaring Cluster and Outbreak status based on positive COVID cases among staff and incarcerated individuals/residents.

2) **For incarcerated individuals and WR residents**, see the [WA State DOC COVID-19 Screening, Testing, and Infection Control Guideline](#) for PCR and RAT testing details.

3) **Volunteers:** All volunteers Rapid Antigen Test (RAT) upon every entry to the facility or office. See also [Volunteer section](#).

4) **Professional Visitors** (such as attorneys, law enforcement, legislators, etc.): Professional visitors to facilities are required, regardless of vaccination status, to submit to an on-site, rapid antigen test, the day of the visit before entering. [See Visiting section for more information.](#)

5) **Personal Visitors:** All visitors to incarcerated individuals must submit to a Rapid Antigen Test, regardless of vaccination status. All personal visitors are given the flyer, [COVID-19 Vaccination and Testing](#).
Information for Visitors. For those participating in Extended Family Visit, they must submit an on-site, rapid antigen test prior to the visit starting and prior to departing the EFV Unit before the incarcerated individual returns to their unit. See Visiting for more information.

6) For all others receiving PCR tests or RATs, the Testing Team will test the person PRIOR to entry to the worksite. Worksites should not allow staff to begin work, volunteer shift, or a visit before completing the test.

7) If a RAT is positive, there is no need to re-test or to order a PCR test for the person before they leave the worksite.

8) If a staff/contractor becomes symptomatic at any point during the return to work (RTW) period in which they’ve been ordered to RAT, they must immediately notify their supervisor and leave work. Complete the workplace denial form and follow all protocols as instructed.

   a) They may schedule a curbside PCR test with the facility by following their facility testing procedures or contact their healthcare provider for follow up. It is NOT appropriate to use a RAT curbside for symptomatic employees. It is not appropriate to use a RAT curbside for symptomatic employees.

9) Anyone regularly submitting to PCR tests who subsequently tests positive will be exempt from serial testing for 90 days but may submit to RATs as ordered.

10) Clinical guidance directs Testing Teams to utilize the date of notification of close contact as day 0 testing for RATs ordered by DOC nurses. If staff/contract staff are on leave during the period they are ordered to RAT, ensure they get a RAT on their date of return, unless it is 14 days or more passed the date of notification. (21 days for those with ongoing household contact).

11) Staff/contract staff verified close contacts with a Lab verified positive COVID-19 test within the last 90 days and who have completed their isolation period, are not quarantined/mapped out. These people can remain working but are recommended to have RAT between days 5-7 after close contact per CDC recommendations.

12) Staff/contract staff verified close contacts with a Lab verified positive COVID-19 test more than 90 days ago, can be quarantined/mapped out. These people may be returned to work using the RAT and RTW guidelines per ONCs and Secondary Screener nurses.

   a) A positive RAT result for these people will be treated as a new positive COVID-19 case.

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**Reporting Tests**

1) For incarcerated individuals and WR residents, please see the WA State DOC COVID-19 Screening, Testing, and Infection Control Guideline for PCR testing and RAT details.

2) For staff/contractor PCR results, reporting is done exclusively by the Occupational Health and Wellness Unit (OHWU). While the Testing Teams have access to the testing portal for managing lab forms and weekly PCR tests, under no circumstances are Testing Team members to search for staff test results.

   a) Test results require mandated confidentiality, if the Testing Team sees a staff test result, DO NOT take action, DO NOT reach out to a staff person or share results with anyone. If you believe there is an urgent concern and need to alert someone, please do the following in this order:

   i. Call your Mapping Team Lead or Backup (if applicable).

   ii. If your Mapping Team is not available or if you do not have a Mapping Team, call Sonja Dordal at 360-489-4400 OR email DOCOccupationalHealthandWellness@doc.wa.gov

   iii. For staff/contractor, volunteer, professional visitor, and personal visitor RAT results, the Testing Team must fill out the Washington State COVID-19 Point of Care Test Result Report Form (POC Form), https://www.doh.wa.gov/Portals/1/Documents/1600/coronavirus/POC-COVIDReportingForm.pdf completely as described in reporting requirements below in number 3.
b) If staff ask for copies of positive or negative serial test results, refer them to the established agency process. Again, DO NOT search for results. From their state issued email address, staff should send an email inquiry to doccovidstaffsertestresults@doc1.wa.gov. When staff identification is verified, test results will be emailed during regular business days, Monday-Friday, 8:00 am – 4:30 pm. No additional identification verification will be necessary when the inquiry is sent from their state issued email. If unable to access their state issued email, staff may send their request through a personal email account and, for verification, provide the following:
   i) First and Last Name
   ii) Date of Birth
   iii) Last four (4) digits of Social Security Number

3) The Testing Branch Director is responsible for reporting results based on scenario, as listed below. Utilize the email SUBJECT LINE NAMING CONVENTION to make management of positive notifications more efficient, refer to the RAT reporting flowcharts for quick reference. All email containing positive POC forms should include this disclaimer in the email signature line:

   WARNING! This email is a legal document and may contain medical information. It is confidential and privileged under the law. This document, and any documents accompanying it, may contain confidential information belonging to the sender, and which may in part or whole be protected by Title 18, United States Code, Section 3153(c)(1) and Pretrial Confidentiality Regulations. This information is intended solely for the use of the individual or entity named above. If you are not the intended recipient, you are hereby notified that any disclosure, copying, distribution, or the taking of action in reliance upon the contents of this information is prohibited. If you have received this transmission in error, please notify our office immediately by telephone to arrange for the return of the documents transmitted. Thank you for your full cooperation.

   a) Positive test results – please read carefully for different directions for positive reporting. Which include emailing the scanned copy of the Washington State COVID-19 Point of Care Test Result Report Form (POC Form), https://www.doh.wa.gov/Portals/1/Documents/1600/coronavirus/POC-COVIDReportingForm.pdf see scenarios below under Testing Staff and Contractors section.

   b) All test results should be retained by the Testing Branch Director. The log should only include name of patient, date, and a check box that the test was completed.

   c) Testing Team completes:
      i. Submitter name and Submitted date (at top of form)
      ii. Section 1: Testing Facility and Ordering Provider Information, using this ordering provider information: Dr. Scott Lindquist, NPI 1780611871, Address – 101 Israel Road SE, Tumwater, WA 98501
      iii. Section 3: Test Information, using this test information: Abbott BinaxNOW COVID-19 Ag CARD

   d) For staff/contract staff, volunteer, Personal/professional visitor RAT results, the Testing Team must fill out the POC Form completely and legibly.
      i.) Person getting tested fills out completely and legibly Section II: Patient Information.

4) The Testing Branch Director is responsible for retaining scanned copies of all POC Forms and shredding the hard copies. Some reporting requirements include emailing the scanned copy of the POC Form, see scenarios below.

Testing Incarcerated Individuals and Residents

1) For incarcerated individuals and work release residents, local Testing Teams may assist with non-clinical tests, for example for transfer testing or testing under cluster or outbreak status.

   a) For other testing indications (such as pre-procedure and isolation/quarantine), please see the WA State DOC COVID-19 Screening, Testing, and Infection Control Guideline for PCR testing and RAT details.
Testing Staff and Contractors

I. Testing on return to work from isolation for those COVID positive:

1) If the staff/contractor meets clinical requirements, ONCs and Secondary Screener nurses will return them after 10 days of isolation with a RAT on the date of return, in accordance with CDC and DOH guidelines.

2) ONC/Secondary Screener nurse will update Department Outbreak Tracking System (DOTS) and send notifications to the appropriate SL2S distribution list(s).
   a) If the RAT is positive, then:
      i. Instruct the employee to return home for an additional four (4) days of isolation.
         ▪ After email report of positive staff/contractor RAT (see reporting requirements), the ONC/Secondary Screener nurse will speak with the employee about isolation for the additional days, update DOTS, and send notifications.
      ii. Retest on the date of return.
      iii. If RAT remains positive, repeat this pattern until the staff/contractor gets a negative RAT.

3) Testing Team Reporting requirements for RAT on return to work from isolation for COVID positive employees
   a) Staff _who test positive on their RAT, are NOT considered a new positive, so do not report to DOH._
   b) Send an email notification with a scanned copy of _Washington State COVID-19 Point of Care Test Result Report Form (POC Form)_ of any positive result immediately to
      DOCOccupationalHealthandWellness@doc.wa.gov with the following convention for the SUBJECT LINE: RAPID RESULT – FACILITY NAME, EMPLOYEE LAST NAME, FIRST NAME., DATE OF RESULT. DO NOT FORWARD/SHARE OR SAVE.
   c) If RAT remains positive, repeat this pattern until the staff/contractor gets a negative RAT.
   d) NO LONGER REQUIRED TO REPORT NEGATIVE RESULTS.

II. Testing on return to work for fully vaccinated close contacts:

1) ONCs and Secondary Screener nurses follow the RTW guidelines for frequency/duration of RAT testing of vaccinated close contacts, at minimum days 0/3/7 after return, or 0/3/7/14/21 for those with ongoing household contact. If the employee meets the clinical requirements, ONCs and Secondary Screener nurses will return these staff immediately with a RAT.

2) After email report of positive staff/contractor RAT from testing team (see reporting requirements (described immediately below), ONC/Secondary Screener nurse will update DOTS and send notification to the appropriate SL2S distribution list(s).

3) Testing Team Reporting requirements for RAT on return for fully vaccinated close contacts
   a) Send an email notification with the _Washington State COVID-19 Point of Care Test Result Report Form (POC Form)_ , of the positive results immediately to DOCOccupationalHealthandWellness@doc.wa.gov and to the
      DOH phocis-fax@doh.wa.gov AND TO YOUR Facility Mapping Team, with the following convention for the SUBJECT LINE: RAPID RESULT - FACILITY NAME, EMPLOYEE LAST NAME, FIRST NAME, DATE OF RESULT.
   b) NO LONGER REQUIRED TO REPORT NEGATIVE RESULTS.

III. Testing to allow traveling staff/contractors to enter:

1) The Testing Team must PCR test any DOC staff/contractor arriving to a facility or WR, who hasn’t completed COVID-19 testing within the last seven (7) days before entering the facility or Work Release, except:
   a) If the staff PCR testing area is not operating during arrival, a RAT will be conducted prior to entry, regardless of time/day of arrival.
If the staff member has been exempted from COVID-19 testing by an ONC or Medical Provider, as documented.

- Staff/contractors are only required to test once every seven (7) days and do not need to test at each facility they visit, unless otherwise determined by the medical team. For example, if Employee Smith visited Coyote Ridge Corrections Center on Monday and tested while there, then there is no need for Employee Smith to test again on Tuesday when Smith visits another facility during that same week.

- Each worksite conducting PCR testing is expected to include the specific screening questions for all non-facility staff/contractors who meet the above-mentioned criteria.

2) **Health Services Managers** in coordination with the facility Testing Branch Director are expected to schedule and ensure medical staff/contractors who are working directly with the Incarcerated Individuals are tested every seven (7) days.

3) If a staff/contractor refuses to test, the Testing Team will deny them access to the worksite, notify the Appointing Authority, Superintendent/Incident Commander, or designee. The Superintendent/Incident Commander or designee will notify the Employee’s Supervisor and local Human Resources office.

4) For details on those required to test, not required to test, and the screening questions, refer to the Updated Memo – Staff serial testing for those traveling to facilities for testing protocol for details:

5) After email report of positive staff/contractor RAT from testing team (see reporting requirements described immediately below), ONC/Secondary Screener nurse will update DOTS and send notification to the appropriate SL2S distribution list(s).

6) **Testing Team Reporting requirements for RAT on allowing traveling staff/contractors to enter**

   a) Send an email notification with Washington State COVID-19 Point of Care Test Result Report Form (POC Form) of the positive results immediately to DOCOccupationalHealthandWellness@doc.wa.gov and to phocis-fax@doh.wa.gov and to your Facility Mapping Team the following convention for the SUBJECT LINE: RAPID RESULT- FACILITY NAME, EMPLOYEE LAST NAME, FIRST NAME, DATE OF RESULT. DO NOT FORWARD/SHARE OR SAVE.

   b) YOU ARE NO LONGER REQUIRED TO REPORT NEGATIVE RESULTS.

**IV. Testing participants of Training Academies:**

1) The Testing Team must test all staff and instructors scheduled to attend/instruct in-person training occurring at a DOC training facility/Performance Center lasting more than one (1) day in duration as follows:

   a) PCR test the week before training and then weekly while in training.

   b) RAT test the first day of training and then the first day of each new week of training.

2) If a staff/contractor refuses to RAT, the Testing Team will deny them access to the training site and will notify their Appointing Authority, supervisor, and HR.

3) For details on these requirements, see the following two memos:

   a) Serial Testing Required for All Staff Attending or Instructing at Academies, 1-26-21
   

   b) Rapid Antigen Testing Required for Staff Attending/Instructing Training, 3-4-21
   

4) After email report of positive staff/contractor RAT from testing team (see reporting requirements), ONC/Secondary Screener nurse will update DOTS and send notification to the appropriate SL2S distribution list(s).
3) Testing Team reporting requirements for RAT on participating in training academies who test positive
   a) Send an email notification with Washington State COVID-19 Point of Care Test Result Report Form (POC Form) of the positive results immediately to DOCOccupationalHealthandWellness@doc.wa.gov and to phocis-fax@doh.wa.gov with the following convention for the SUBJECT LINE: RAPID RESULT - FACILITY NAME, EMPLOYEE LAST NAME, FIRST NAME, DATE OF RESULT. DO NOT FORWARD/SHARE OR SAVE.
   b) YOU ARE NO LONGER REQUIRED TO REPORT NEGATIVE RESULTS.

V. Testing on return to work for those who have used: public transportation for non-essential out of state travel
   1) The current Active and Passive Screening Questionnaires include a question about traveling out of state by public transportation. Staff/contractors are advised to return to work with a RAT if the return date is within 7 days of travel.
   2) After email report of positive staff/contractor RAT from testing team (see reporting requirements), ONC/Secondary Screener nurse will update DOTS and send notification to the appropriate SL2S distribution list(s).
   3) Testing Team reporting requirements for RAT on return to work for those who have used public transportation from out of state:
      a) Send an email notification with Washington State COVID-19 Point of Care Test Result Report Form (POC Form) of the positive results immediately to DOCOccupationalHealthandWellness@doc.wa.gov and to phocis-fax@doh.wa.gov and to your Facility Mapping Team with the following convention for the SUBJECT LINE: POSITIVE RAPID - FACILITY NAME, EMPLOYEE LAST NAME, FIRST NAME, DATE OF RESULT. DO NOT FORWARD/SHARE OR SAVE.
      b) YOU ARE NO LONGER REQUIRED TO REPORT NEGATIVE RESULTS.

VI. Testing in response to cluster and outbreak status:
   1) DOC’s COVID-19 Medical Duty Officer and Employee Occupational Health Medical Director will work with worksites and the COVID19 Work Release Medical Consultant, ONCs, and Secondary Screener nurse(s) on declaring Cluster and Outbreak status based on positive COVID cases among staff and incarcerated individuals/residents. Please refer to the appropriate checklists for definitions and specific response and testing directives.
      a) Prisons Division COVID-19 Cluster and Outbreak Checklist
      b) Reentry Division COVID-19 Cluster & Outbreak Checklist
      c) CCD Division COVID-19 Cluster & Outbreak Checklist
   2) After email report of positive staff/contractor RAT from testing team (see reporting requirements), ONC/Secondary Screener nurse will update DOTS and send notification to the appropriate SL2S distribution list(s).
   3) Testing Team reporting requirements for RAT on response testing for cluster and outbreak status
      a) Send an email notification with the Washington State COVID-19 Point of Care Test Result Report Form (POC Form) of the positive results immediately to DOCOccupationalHealthandWellness@doc.wa.gov and to phocis-fax@doh.wa.gov and to your Facility Mapping Team, with the following convention for the SUBJECT LINE: POSITIVE RAPID - FACILITY NAME, EMPLOYEE LAST NAME, FIRST NAME, DATE OF RESULT.DO NOT FORWARD/SHARE OR SAVE.
      b) YOU ARE NO LONGER REQUIRED TO REPORT NEGATIVE RESULTS.
General Testing Requirements for Volunteers, Professional & Personal Visitors

General requirements for all volunteers, professional and personal visitors include:

1) Volunteer/visitor must fill out the POC form to present to the testing personnel. If the volunteer/visitor refuses, entry will be denied.

2) A Rapid Antigen Test (RAT) is required upon every daily entry to the facility. Additional tests are not required for multiple entries on same day.

3) Upon testing, volunteer/visitor will be provided a flyer, COVID-19 Vaccination and Testing Information for Visitors and Volunteers with pertinent testing information.

4) After scanning POC form to Testing Team Branch Director/designee, the staff member at the testing location will give the POC form to the volunteer/visitor or shred all POC forms regardless of test result. No POC forms are authorized to be retained at the point of testing by staff NOT associated with the Testing Team.

5) **Volunteers and Professional Visitors who test positive must be referred to the OHWU for follow up with an ONC.**

6) Designated facility personnel will maintain number of testing results ONLY for local reporting. NO Personal Identifying Information will be maintained.
   
   a) Visit sergeant/designee are required to maintain total number of personal visitors approved/denied entry due to pandemic protocols.
   
   b) Legal Liaison Office staff are required to maintain total number of professional visitors approved/denied entry due to pandemic protocols.
   
   c) Community Partnership Program Coordinators (CPPC) are required to maintain total number of volunteers approved/denied entry due to pandemic protocols.

7) After email report of positive RAT from testing team (see reporting requirements), OHWU will make proper notifications to Local Health Jurisdiction.

   **Testing Team reporting requirements for RAT**

1) After scanning the POC form to Testing Branch Director, report the positive test result to the volunteer/visitor, and give them the POC form. Inform them that they are not approved to enter, confirm their accurate phone number, tell volunteer and professional visitors a DOC nurse will follow up with them, and remind them of the “what to do” information on the flyer, COVID-19 Vaccination and Testing Information for Visitors and Volunteers.

   a. Testing Branch Director/designee will contact the appropriate designee based on volunteer/visitor type:
      
      i. Volunteer Shift Commander/designee & CPPC
      ii. Professional visitor Legal Liaison/designee
      iii. Personal visitor Visit Sergeant/designee

   b. Testing Branch Director/designee will report **ONLY** the following information to the appropriate designee:
      
      i. Reason for denied entry: “Pandemic Protocols”
      ii. Volunteer/visitor full name
      iii. Professional visitor agency/organization/affiliation
      iv. Date of denial

   c. Immediately scan the POC form and email notification **ONLY** to DOCOccupationalHealthandWellness@doc.wa.gov with the following convention for the SUBJECT LINE: VOLUNTEER/VISITOR RAPID RESULT - FACILITY NAME, VOLUNTEER/VISITOR LAST NAME, VOLUNTEER/VISITOR FIRST NAME, DATE OF RESULT-DO NOT FORWARD/SHARE OR SAVE. Timely reporting is crucial. Include confirmed phone number in the email if different from, or illegible, on the form.
i. **DO NOT SEND POC with personal health information to any other individual or group distribution lists at the facility or at Headquarters.**

ii. **Before end of day, report number and date of all entry denials to facility ICP and Correctional Program Manager.**

d. **The Testing Team Branch Director/designee will record the test on the worksite RAT log. The log should only include name of patient, date, and a check box that the test was completed.**

e. **The OHWU will:**

   i. Reach out to the Volunteer or Professional Visitor to gather potential DOC close contact information and map as necessary.

   ii. Notify the appropriate Local Health Jurisdiction (LHJ) within 24 hours.

f. **Refer to the flow charts for quick reference of RAT Reporting Requirements**

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**Serial PCR Testing Procedures**

Serial PCR testing refers to the screening of asymptomatic staff/contractors with a COVID-19 test. Testing Teams should follow these guidelines for administering a PCR Test. Testing Teams member will follow all safety and sanitation guidelines established in the PPE Matrix.
Polymerase chain reaction (PCR) testing for COVID-19:

a) Someone who receives an inconclusive COVID-19 PCR test result, should be isolated by themselves and presumed positive until repeat testing is completed. Please review the following nasopharyngeal swab sample collection guidance:

(i) Use a flocked tapered swab. Insert swab less than one inch (about 2 cm) into nostril until resistance is met. Rotate the swab 5 rotations against nasal wall and repeat in other nostril using the same swab.

b) There are currently two laboratory options for COVID-19 testing:

(i) Interpath Laboratory:

(ii) Northwest Pathology or Atlas Genomics Lab:

(1) Enter the Northwest Pathology/Atlas Genomics online portal, TestDirectly, to enter a testing order.

(a) Health Services staff must have pre-authorization to access this site. Contact Docdlcovid19testing@doc1.wa.gov to request site access.

(b) Create or locate the patient profile, create an electronic order, and print the requisition and/or barcode label from the portal.

(2) Collect COVID-19 specimen per Northwest Pathology test collection guidance.

(3) Northwest Pathology specimens are validated for 7 days at room temperature; Atlas Genomics specimens are validated for 5 days at room temperature.

(4) Ship test sample via FedEx. Pre-paid labels and shipping containers can be ordered in advance from the Washington Department of Health. COVID-19 viral test kits should be ordered through the facility Logistics Section Chief.

TEST Results:

1) Communicate with staff about test results in general:

2) Staff are contacted directly if positive or inconclusive by the OHWU ONC or Secondary Screener Nurse.

3) Demobilized staff are contacted directly once test results are received (both positive and negative) Confidentiality: Ensure any staff who have access to another staff members test result has signed DOC form 14-003 Confidentiality Statement

4) Ensure the Resource Unit Leader/ Demobilization Unit Leader for deployed staff have access to the identified lab portal.

5) Work with HR and the Testing Team to ensure that anyone who tested positive before the serial testing began is NOT re-tested.

6) Ensure the Testing Team, the Mapping Team, the Resource Unit Leader/ Demobilization Unit Leader for deployed staff, and the Occupational Health and Wellness Unit (OHWU) are in communication about the test result process.

7) On test days, ensure staff have access to the calling card with the toll-free number on it.

8) Ensure the Mapping Team knows how to work with OHWU on positive or presumed positive (inconclusive) results (the employee and any close contacts identified).
RAT Testing Procedures

Testing Teams should follow these instructions for Abbott BinaxNOW COVID-19 Ag CARD tests:

1) Testing Teams will need a timer or a stopwatch in addition to the test kit.
2) Watch Module 1-4 instructional videos on the webpage prior to performing the BinaxNOW COVID-19 Ag Card test on this webpage (Press yes when prompted to proceed. Scroll down to the videos below; Module 5 does not need to be viewed).
   a) Module 1: Getting Started
   b) Module 2: Quality Control
   c) Module 3: Specimen Collection & Handling
   d) Module 4: Patient Test
3) Prior to using a swab from a new box on a staff member, perform a negative and positive control test as instructions in the box or the Module 2 video above.
4) Provide the staff member with an informational fact sheet about RAT included in the test kit box.
5) Conduct the antigen test on the staff member according to the package insert:
   a) Obtaining the specimen
      - Carefully insert the swab into the nostril
      - Using gentle rotation, push the swab until resistance is met, less than one inch into the nostril
      - Rotate the swab 5 times or more against the nasal wall then slowly remove from the nostril
      - Using the same swab, repeat sample collection in the other nostril
      - Test direct nasal swab as soon as possible after collection
   b) Using the test card
      - Remove cared from its pouch just before use and lay flat (opened)
      - Hovering ½ inch above the top hole, slowly add 6 drops of reagent to the top hole of the swab well (do not touch the card with the dropper tip while dispensing)
      - Insert sample swab into bottom hole
      - Firmly push upward so that the swab tip is visible in the top hole
      - Rotate swab shaft 3 times clockwise (Do NOT remove swab)
      - Peel off adhesive liner from right edge of the test card and close and securely seal the card
      - Set timer for 15 minutes
      - Read the result in the window 15 minutes after closing the card (it is important to read the result promptly at 15 minutes and NOT before)
   c) Interpret the results at 15 minutes:
      - Negative: One pink line at the level of the control
      - Positive: Two pink lines at the level of the control and the sample
      - Invalid:
        - One line at the level of the sample, but the control line is missing
        - No lines at all
        - A blue line at the level of the control
6) Dispose of used test kit after reading the result in a Bio-Hazard red bag.
7) Any invalid tests should be immediately repeated using another test kit.
8) Testing Teams should follow these instructions for Abbott BinaxNOW COVID-19 Ag CARD tests:

Testing Teams should follow these instructions for BD Veritor Plus Rapid Antigen testing for COVID-19:

1) Training will be arranged for facilities that will be using this test brand.
a) Prior to using a swab from a new box on a patient, perform a negative and positive control test as per instructions in the box. Each new operator should also first run a positive and negative control test before testing patients.

2) Conduct the antigen test on the patient according to the package insert
   (a) Obtaining the specimen: Carefully insert the swab into the nostril
   (b) Using gentle rotation, push the swab until resistance is met, less than one inch into the nostril
      i) Rotate the swab 5 times or more against the nasal wall then slowly remove from the nostril
      ii) Using the same swab, repeat sample collection in the other nostril
      iii) Test direct nasal swab as soon as possible after collection
   iv) Prepare specimen for the analyzer
   v) Remove one extraction reagent tube/tip and one BD Veritor System test device from the foil pouch right before using (must be used within 5 minutes of opening)
   vi) Label one extraction reagent tube and one test device if doing multiple tests at once and place tube in rack.
   vii) Remove and discard the cap from the extraction reagent tube
   viii) Insert the swab into the tube and plunge the swab up and down in the fluid for at least 15 seconds (take care not to splash liquid out of tube)
   ix) Remove the swab while squeezing the sides of the tube to extract the liquid from the swab
   x) Press the attached tip firmly only the extraction reagent tube containing the processed sample and mix thoroughly by swirling or flicking the tube
   xi) Invert the extraction reagent tube and hover 1 inch above the test device sample well
   xii) Gently squeeze the ridged body of the tube, dispensing 3 drops of the processed specimen into the sample well
   xiii) After adding the sample, allow the test to run for 15 minutes (NOT longer than 20 minutes) before inserting the test device into the analyzer (Timing is critical for accurate results)
   xiv) While waiting for the test to run, turn the BD Veritor Plus Analyzer on by pressing the blue power button once
   xv) After the self-test is completed, the window should display “Insert test device or double-click button for walk away mode.”
   xvi) Insert the test device once the 15 minutes in step ix above is completed
   xvii) Follow the on-screen prompts to complete the procedure. Do not touch the instrument or remove the test device until the result appears
   xviii) When complete, the test result will appear in the display window. Record the results, BEFORE removing the test device. The following are the result options:
   (1) Positive test result = CoV2: +
   (2) Negative test result = CoV2: -
   (3) Invalid test result – CONTROL INVALID
   a) Dispose of used test kit after reading the result in a biohazard red bag
   b) If the test result was invalid, you can repeat the test starting at step vii above or if more than one hour has passed since specimen collection, then collect a new sample
1/13/2022

- Updated requirements for testing and reporting for Volunteers & Personal/Professional Visitors, including a new reporting spreadsheet.
- Return to work (RTW) post travel
- Removal of DSA process
- Resumption of serial testing upon return from isolation