



Education Report: Increasing access to rapid antigen tests for schools and early learning services

To	Hon Chris Hipkins, Minister of Education		
Date:	10 March 2022	Priority:	High
Security Level:	In Confidence	METIS No:	1282719
Drafter:	Richard Joblin	DDI:	9(2)(a)
Key Contact:	Helen Hurst	DDI:	9(2)(a)
Messaging seen by Communications team:	No	Round Robin:	Yes / No

Purpose of Report

1. This report seeks agreement to increase access to Rapid Antigen Tests (RATs) in schools and early learning services.

Recommendations

We recommend that you:

- a. **note** on 2 March we provided you with an report on providing access to Rapid Antigen Tests (RATs) in state and state integrated schools, kura and early learning services for your consideration [METIS 1282719, refers].

Noted

- b. **note** that your Office subsequently requested a follow up report to confirm your preferred approach;

Noted

- c. **agree** that the testing approach provides:

Provision of tests to symptomatic children, young people, and staff in early learning, schools and kura

- i. all early learning services and state and state integrated schools and kura are provided with a supply of RATs to distribute to children, young people, and staff who are symptomatic, with tests usually administered at home (by parents or caregivers for young children with symptoms);

Yes/No

Additional asymptomatic testing to support early childhood services, specialist schools, and boarding facilities

- ii. early learning staff with access to regular RATs to allow for testing twice a week to support face to face early learning to be retained when and where possible;

Yes/No
- iii. staff at specialist schools and special needs units with access to regular RATs to allow for testing twice a week in these settings; and

Yes/No
- iv. staff at boarding facilities with access to regular RATs to allow for testing twice a week in these settings;

Yes/No
- v. as the additional testing set out in Recommendations c ii-iv is intended as a short-term measure to complement those already in place (including vaccination, face masks, and ventilation) during the peak of Omicron in a region, it is limited to four weeks.

Yes/No
- d. **agree** that:
 - i. schools and early learning services covered under recommendation c ii to v above are offered the opportunity to opt in to testing and that testing is voluntary

Yes/No
- e. **note** the approach includes light touch reporting requirements for the Ministry about number of schools and early learning services that have opted in and the number of RATs provided, but requiring schools to follow processes for reporting positive cases only;

Noted
- f. **agree** that testing commences as soon as possible, and we prioritise distribution to support symptomatic testing in early learning services, schools, and kura in vulnerable communities.

Yes/No
- g. **note** that supply will be provided from the Ministry of Health's central supply with the Ministry of Education responsible for distribution to schools, kura and early learning services;

Noted
- h. **agree** that we review this approach in late March and provide advice on whether to continue to undertake additional asymptomatic staff testing in early childhood services, specialist schools, special needs units and boarding facilities, with a maximum extension of two weeks.

Yes/No

Proactive Release

- i. **agree** that the Ministry of Education release this report subject to any redactions in line with the provisions of the Official Information Act 1982.

☒ **Agree** / ☐ **Disagree**



Helen Hurst
Head of Covid Response
**Te Pae Aronui | Operations and
Integration**
10/03/2022



Hon Chris Hipkins
Minister of Education

10/3/2022

— / — / —

Background

1. Following advice from the Ministry of Health on 21 February 2022 (*COVID-19 Testing in the Education Sector*, HR20220202 refers), your Office requested additional advice from the Ministry of Education. On 25 February 2022, we provided a short note setting out options to providing additional Rapid Antigen Tests (RATs) to schools and early learning services. On 2 March, we provided a report setting out a possible testing regime for the education workforce that would complement achieving social, economic and health outcomes for New Zealand. You indicated you wished to discuss that report with colleagues before taking decisions. Your Office then requested a revised report to confirm your decisions. This report responds to that request.
2. During the last ten days of this outbreak, more than 72% of schools (89% in Auckland) and 37% of early learning services (49% in Auckland) have reported a positive case. As at 9 March, 44,983 cases had been raised by schools and services in the last ten days of which 37,454 were children and students and 4,691 were teachers. This trend is expected to continue over the next four to five weeks. The associated community, whānau, and parent impact of these high numbers has a flow on effect to workforce capacity broadly across critical workers and utility service providers. This in turn creates supply chain constraints across New Zealand in both human resource supply, manufacturing sustainability, warehousing, distribution and logistics. Notably, some absenteeism cited in reports across agencies and sectors is specific to caring and isolation requirements.
3. The supply of RATs in New Zealand is now less constrained. RATs are widely available as part of the public health response to Omicron and via retail. Supply via both models is anticipated to continue to increase. It is, therefore, timely to consider utilising RATs differently in early learning and school settings, moving beyond the Close Contact Exemption Scheme to provide access to tests for symptomatic children, young people and staff and additional proactive testing in higher risk settings.

Approach to testing in early learning services and schools

4. Rapid antigen testing is available to all symptomatic people and household contacts through the COVID-19 public health response. The purpose of the testing proposed in this paper is to support the detection of cases at school and early learning services to build and maintain confidence in face-to-face learning in schools and participation in early learning amongst teachers, education staff, children and young people, and parents and caregivers during the peak of the Omicron outbreak.
5. Testing is complementary to the existing measures in place (including vaccination, face masks, and ventilation) and is intended to:
 - provide an additional point of access to testing for symptomatic children and staff in early learning services and schools
 - maintain confidence and provide assurance for the education workforce to support it to continue to go to work in schools and early learning services
 - maintain confidence for learners and the workforce in higher risk environments (early learning, boarding hostels, specialist schools and special needs unit).

6. We seek your agreement to a testing approach that:
- provides students and staff at school and children and staff at early learning services who become symptomatic at their school or service with access to RATs through the school or service, with the tests (for children) administered by parents at home
 - provides early learning staff with access to RATs to allow for testing twice a week to support continued participation in early learning services (if they test negative) ¹
 - provides staff in specialist schools and special needs units with access to regular RATs to allow for testing twice a week to support face to face learning
 - provides staff in boarding facilities² with access to regular RATs to allow for testing twice a week
 - ensures testing is voluntary
 - prioritises distribution of RATs to vulnerable communities for symptomatic testing, and to specialist schools, special needs units and boarding schools.
7. The provision of additional testing to early learning services recognises that these settings are higher risk given under- fives do not have access to vaccination, cannot wear face masks, are less likely to follow public health precautions (eg not putting hands in mouth, covering coughs, etc) and may have younger siblings who are more vulnerable or a mother who is pregnant. Vaccination is available to students in specialist schools and special needs units but other mitigation measures are more difficult to maintain and some students more medically fragile. We, therefore, recommend staff in these schools are offered the opportunity to opt in to additional testing. We also recommend that staff in boarding facilities are also offered the opportunity to opt in given their living arrangements.
8. The recommended frequency of testing would be twice weekly. Staff are advised not to undertake asymptomatic testing if they have recently recovered from a COVID-19 infection (ie within the last 90 days).
9. Private schools and tertiary institutions are not included in the approach.

Duration of additional asymptomatic testing

10. The intention is to offer this additional testing capability to early learning services, specialist schools, special needs units and boarding schools for a period of four weeks. This recognises that as the Omicron wave moves beyond its peak in a region and prevalence drops, RATs become less useful.
11. Given the expected duration of the Omicron peak (as indicated in paragraph 2, four to five weeks) and that post-peak RAT testing of asymptomatic staff becomes less useful, we will be clear that there is no commitment by the Ministry of Education to additional testing beyond the initial four weeks. Any extension would be based on

¹ This includes support workers in early learning services, learning support staff, education advisors for regulatory activity, and those involved in Initial Teacher Education (ie student teachers)

² As students in these settings fall outside the definition of 'household contacts', should a fellow resident become positive, other students (unless they become symptomatic) are not eligible to be tested. That such students are not eligible for testing is anticipated to lead to increased caregiver (and student) concern, and potentially withdrawal of students from these environments, due to the perceived transmission risk of these settings.

how the outbreak is tracking in a region and would be for a maximum of two weeks. Any extension may be limited to one or more of the settings, depending on the trend in outbreaks in those settings.

Supply, distribution and prioritisation

12. The Ministry of Health has provided the Ministry of Education with 668,600 RATs for use in schools and early learning services to support the Close Contact Exemption Scheme. The Ministry of Health has indicated that it can provide further RATs as needed as more supplies are coming into the country, with the Ministry of Education responsible for distribution to schools and early childhood services. We could, therefore, use some of the RATs already provided to support the start of testing, prioritising symptomatic testing in vulnerable communities, boarding schools, specialist schools and special needs units in the first instance.
13. Schools and early learning services would be offered the opportunity to opt in and all testing would be voluntary. The Ministry will provide scenarios and advice on how this RAT capacity might be used. We will also provide guidance to support the safe use of RATs including guidance about ensuring that symptomatic younger children provided with RATs at school are collected by a parent or caregiver. This will be accompanied with very clear guidance on needing to stay at home if symptomatic and to clarify when a self-administered RAT is diagnostic (or not). All test results, both positive and negative should be recorded.
14. It is possible that this testing could find more teachers or other staff who are positive, risking increased absenteeism, but this risk is being mitigated via work on LATs and agreement with the Teaching Council on turnaround time.
15. We would not monitor the results of testing itself (though any positive cases should be reported via the normal processes and all results – both positive and negative should be entered by the individual in their My COVID-19 Record). We will collect information on the number of schools and early learning services that opt in, their locations, and the number of RATs provided. This avoids unnecessary transaction and compliance costs on schools and early learning services.
16. Taking a more 'light touch' approach will also likely encourage uptake from education providers in more vulnerable communities, who we want support to access the scheme so that their communities have confidence to return to face-to-face learning. We have received feedback from Te Kōhanga Reo National Trust that some of their members have found the use of RealMe challenging when registering for the Close Contact Exemption Scheme, and as a result some kōhanga reo have reported they are disengaging from the process.
17. We will engage with education sector peak bodies to support uptake and ensure that the rollout of the scheme meets the needs of vulnerable communities and other priority education settings groups.

Feasibility and distribution

18. Although a significant number of RATs are likely to be required based on the expectation that most specialist schools and early learning services will opt in, we consider that the approach is feasible.
19. Early learning, specialist school, special need unit and boarding school workforce and boarding school student numbers are shown in the table below. We consider it is likely that, if all early learning services are given the ability to opt in, a large proportion will do so.
20. We have estimated the number of tests that students would access through their school or early learning service, rather than through some other means although these estimates are difficult to validate. We have included provision of a test for other household members in these estimates.

Table One: Workforce numbers in schooling and early childhood education and maximum estimated number of RATs required over four weeks³

Number of people	Count	Estimated Total
Symptomatic Testing		
Schools and kura	826,572	413,286
Early Learning Services	208,483	104,241
Additional Testing		
Early Learning staff ⁴	44,000	303,200
Education support workers, learning support staff and staff completing licensing activities	500 ⁵	4,000
Specialist School and Special Needs Unit staff ⁶	2,625 ⁷	21,000
Boarding Hostel staff	2,000	16,000
Total		861,727

21. As noted, the Ministry will centrally administer the testing scheme building off existing distribution systems (e.g., the system for ordering and distributing masks). It is possible to extend ordering functionality currently used by schools to order masks to enable ordering of RATs; however, we are currently giving consideration as to whether this is the most expedient way to handle ordering. For example, distribution of RATs to schools and kura may be simpler using a formula based off the number of students enrolled (and an assumption of a proportion who may come to school with symptoms).

³ These estimates have not been reduced to allow for those who do not require additional testing because they have had a COVID-19 infection in the last 90 days

⁴ This number is based off an estimation of teaching positions (using information from the 2021 Early Learning Census) and includes a 15% buffer for non-teaching positions. Note numbers are likely to be less accurate than for schooling.

⁵ Estimated

⁶ All enrolments in this school type and therefore is likely an overestimate

⁷ Average of February and March 2022 payroll information for specialist schools, plus estimation of staff in special needs units

22. While the ordering functionality largely exists already, it should be noted that actual delivery of RATs may be an issue, as distribution networks come under growing pressure. Medical supplies (including masks and RATs) are prioritised for delivery; however, it is difficult to determine what quantity of RATs will be feasible to deliver each week over the coming weeks and therefore how quickly supplies will get out. Although the approach outlined in this paper is an opt in scheme, it would potentially provide a supply of RATs to every school, kura and early learning service in the country (excluding private schools). We are considering options that could help to streamline distribution, but it is likely some schools, kura and early learning services will face delays in receiving their RATs.
23. Once approved, access to tests for symptomatic learners and the surveillance testing would be rolled as quickly as possible. However, given the pressures on distribution and the vast number of schools, kura and early learning services, we will need to prioritise distribution. The immediate priority (in order) is:
- increasing access to testing for symptomatic children and young people and staff in schools and early learning services (with a focus on vulnerable communities)
 - additional testing of asymptomatic early learning staff in vulnerable communities, staff in specialist schools and special needs units
 - additional testing of asymptomatic early learning staff (those outside of vulnerable communities)
 - additional testing of staff in boarding facilities
24. Ideally, we would make kits for symptomatic testing available across the country as soon as possible. If necessary, within regions we could prioritise the supply of tests to:
- Kōhanga reo and kura kaupapa
 - Pacific early learning services
 - Refugee and migrant early learning services
 - Rural/Isolated schools and early learning services defined as:
 - Schools with fewer than 3 teachers
 - Schools that are more than 30 minutes' drive to an urban centre
 - Schools with high numbers (> 60%) of students compromised
 - Low decile schools
 - Bilingual provision.

Supply of RATs

25. RATs for the testing proposed in this paper will be centrally provided from the Ministry of Health (at no charge to the Ministry of Education). As noted in paragraph 12, the Ministry of Health has already provided 668,600 RATs to the Ministry of Education for use in the Close Contact Exemption Scheme. Some of these RATs can be repurposed for the additional testing proposed in this paper, and the Ministry of Health has agreed more RATs can be provided as needed.