

**Rapid Antigen Testing
Frequently Asked Questions
Dated March 15, 2021**

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Testing Requirements under the Minister's Directive: Long-Term Care Homes Surveillance Testing and Access to Homes

1. What is the objective of Long-Term Care Homes Surveillance Testing?

The objective of surveillance testing is to protect vulnerable Ontarians living in long-term care homes by helping to prevent the spread of COVID-19 within homes. Point-of-care rapid antigen testing ensures that individuals entering the home can be screened simply and quickly and that positive COVID-19 cases that may otherwise be missed are identified.

2. Who must be tested for COVID-19?

As per the Minister's Directive: *COVID-19: Long-Term Care Home Surveillance Testing and Access to Homes* effective March 15, 2021, all staff, student placements and volunteers working in long-term care homes must be tested regularly in accordance with the Minister's Directive, unless the exception for individuals who have previously had laboratory confirmed COVID-19 applies.

The testing requirements in the Minister's Directive include all individuals working in long-term care homes who are:

- Staff as defined in the *Long-Term Care Homes Act, 2007*
- Volunteers as defined in the *Long-Term Care Homes Act, 2007*
- Student placements, meaning any person working in the long-term care home as part of a clinical placement requirement of an educational program of a college or university, and who does not meet the definition of "staff" or "volunteer" under the *Long-Term Care Homes Act, 2007*.

The Minister's Directive also includes additional testing and documentation requirements for general visitors, caregivers and support workers.

3. What are the testing requirements for staff, caregivers, student placements and volunteers?

Homes can choose one of two options for screening and testing of staff, caregivers, students and volunteers:

- a) An Antigen Test at a frequency set out in the [Ministry of Health COVID-19 Guidance: Considerations for Antigen Point-of-Care Testing](#) effective March 5, 2021 or as amended, at a minimum (currently rapid antigen testing 2-3 times per week in yellow/orange/red/grey zones and 1-2 times per week in the green zone) **OR**
- b) One PCR Test and one Antigen Test on separate days within a seven-day period.

4. Are staff, student placements and volunteers required to come in on their day off to be tested in order to meet the minimum testing requirements?

The Minister's Directive includes provisions to ensure that staff, student placements and volunteers are not required to be tested on their day off.

5. Are staff, caregivers, student placements and volunteers required to be tested on consecutive days?

Homes using the antigen testing only model need to meet the testing frequency as outlined in the [Ministry of Health COVID-19 Guidance: Considerations for Antigen Point-of-Care Testing](#).

In instances where staff, caregivers, student placements and volunteers enter the home only two consecutive days in the week, an antigen test is only required on the first day of entry.

6. What are the testing requirements for support workers and visitors?

Support workers and (where permitted) general visitors are required to undergo a "day of" antigen test unless they were tested the previous day (i.e. an antigen test result is valid for 2 days), and a test result must be obtained before entry to the home.

Support workers who are regulated health professionals may have direct contact with residents while the antigen test results are pending so long as they are wearing appropriate personal protective equipment as per Directive #3 and following infection prevention and control practices.

7. What about homes in rural, remote, and northern communities? Are there different program requirements?

Due to the change in testing requirements for all homes in Ontario, there is no longer a need for a regional exemption for homes in rural, remote and northern communities. All homes are now following the same testing requirement guidelines.

8. What if I want to test more frequently than the Minister's Directive requires?

The updates to the program are minimum requirements and homes may choose to increase the frequency of antigen testing based on their own assessment of need in the context of their operations.

9. If an individual has been vaccinated for COVID-19, do they still need to be tested prior to visiting a long-term care home?

At this time, the testing requirements of the Minister's Directive continue to apply to individuals who have been vaccinated, in addition to continuing to follow public health measures including masking, physical distancing, hand hygiene, and symptom screening. This includes active screening on entry to the long-term care home for symptoms and exposures for COVID-19 and attesting that one is not experiencing any of the typical and atypical symptoms of COVID-19 (in accordance with Directive #3 issued by the Chief Medical Officer of Health).

10. Why does a person that has been vaccinated still need to be tested at the same rates as a non-vaccinated individual?

The government will continue to consider available evidence regarding the impact of vaccination on reducing the risk of infection and transmission and make changes to requirements and public health measures based on advice of the Office of the Chief Medical Officer of Health. At this time, the testing requirements of the Minister's Directive continue to apply to individuals who have been vaccinated.

11. Do individuals who test positive on the rapid antigen test need to be confirmed with lab-based PCR testing?

A positive test result on the rapid antigen test should be considered a preliminary positive and requires a confirmatory laboratory-based PCR test. The following actions should be taken:

1. Counsel individual that the result is preliminary positive and PCR confirmation is required.
2. Issue guidance to return home and self-isolate until receipt of confirmatory laboratory PCR test result.
3. Ensure confirmatory laboratory-based PCR testing is performed within 24 hours.
4. Report the preliminary positive result to the local Public Health unit as soon as possible.

12. Does the confirmatory PCR test following a positive rapid antigen test need to be performed onsite?

A confirmatory PCR test can be performed at an assessment centre or onsite if the LTC Home has the capacity to do so.

13. Does a preliminary positive result on the Panbio™ COVID-19 Ag Rapid Test mean the long-term care home is in outbreak?

The individual with a positive screening result is required to have a confirmatory PCR test. Local Public Health Units (PHUs) remain the authoritative body on the declaration of a COVID-19 outbreak and may determine a suspected outbreak where circumstances warrant.

Homes must report the preliminary positive result to the local Public Health Unit as soon as possible.

14. Does the Minister's Directive apply to inspectors?

The Minister's Directive does not apply to individuals with a statutory right of entry (e.g. government inspectors). The Ministries of Long-Term Care (MLTC) and Labour, Training and Skills Development (MLSTD) inspectors have separate and specific testing protocols that have been established within their ministries. Inspectors must confirm that they have received a COVID-19 test and must verbally attest to not subsequently having tested positive to their manager. Inspectors must keep an official record of all negative or positive tests and verbally attest to a negative test upon entering a home. **Note: MLTSD inspectors have the options of verbally attesting upon entry to a home or requesting to have a rapid antigen test completed at the home.**

In addition, MLTC inspectors and MLTSD inspectors (who regularly attend to LTC homes) have been included as part of the phase one priority list for vaccinations.

15. Are sales representatives or maintenance workers subject to the Minister's Directive?

A sales representative is considered a general visitor under the COVID-19 Visiting Policy and is subject to the same requirements that apply to general visitors under the Minister's Directive.

It is the discretion of the long-term care home to determine if the maintenance worker is considered a "staff" member for the purposes of the *Long-Term Care Homes Act, 2007* or if they would be accessing the home as a visitor. If the long-term care home determines that the maintenance worker is a visitor, the individual would be considered a support worker and the home must follow the testing related requirements for support workers under the Minister's Directive. Alternatively, if the maintenance worker is a staff member, the long-term care home must follow the testing related requirements for staff under the Minister's Directive.

16. Can homes ask a person visiting a palliative resident to demonstrate that they have received a negative PCR test result or take an antigen test?

The testing requirements do not apply in a palliative situation. Homes have the discretion to request testing in these situations.

17. What are the requirements for residents who leave the long-term care home for extended periods of time?

The mandatory rapid antigen screening program does not apply to residents. Long-term care homes may choose to test returning residents using a PCR test or a rapid antigen test

at their own discretion. For further information on requirements for testing and screening of residents, please refer to [Directive #3](#).

18. Is a dedicated person for third party oversight required 24 hours a day, seven days a week?

The intent of third-party oversight is to support a rigorous approach to screening. Homes are best placed to determine how this oversight role is operationalized, including where and when the oversight function is present to best support an effective screening process.

19. Do support workers and general visitors who attend to multiple homes in the same day need to be tested at each home?

Support workers and general visitors are required to be tested once per day and the test is valid for that day and the next day. If visiting multiple homes, support workers and general visitors can show proof of a valid negative antigen test to gain entry without the need to be retested.

20. How can proof of a negative antigen test be demonstrated?

Homes may choose to use the optional COVID-19 Antigen Test template released February 24th on LTCHomes.net or another method of proof (e.g., verbal attestation). Regardless of the accepted form of proof, the home should keep a record, including a notation of the proof provided.

21. What is the exception for certain homes?

The Ministry is working in partnership with two homes to collect information on a proof-of-concept regarding uptake in vaccination rates of staff, caregivers, student placements and volunteers when there is a decrease in testing frequencies.

Under this exception, staff, caregivers, student placements and volunteers who have received at minimum the first dose of an mRNA vaccine for COVID-19 and have waited 14 days since the first dose was administered will only require 1 PCR test a week. All other individuals who enter the home will follow the testing frequency as required in the Minister's Directive.

When Homes are in Outbreak

22. What if a home is in outbreak?

Long-term care homes that went into outbreak before March 15th should transition to rapid antigen testing within three weeks of an outbreak being resolved. Homes that go into outbreak on or after March 15th should return to rapid antigen testing as soon as the outbreak is resolved.

23. If a long-term care home is in outbreak, should the home switch back to using solely PCR testing?

The rapid antigen testing program is suspended in an outbreak as all staff and residents must be tested using (diagnostic) PCR tests. Homes should work with their local Public Health Unit if they wish to continue using antigen tests for specific purposes during an outbreak (e.g., for caregivers).

24. Can an essential caregiver visit a home if it is in outbreak?

A caregiver is considered an essential visitor according to Directive 3 and the LTC Home visitor policy document [COVID-19:visiting long-term care homes](#). Essential visitors are the only type of visitors allowed when a resident is self-isolating or symptomatic or when the LTC Home is in an outbreak.

Rapid Antigen Testing Questions

25. Why are long-term care homes being asked to use antigen tests for surveillance testing?

The Panbio™ COVID-19 Ag Rapid Test is a screening tool that is used for point-of-care testing to detect COVID-19 within 15 to 20 minutes of taking the test, making it simpler and faster to identify potential COVID-19 positive cases that otherwise may be missed.

26. Who can perform the Panbio™ test?

The collection of throat, nasal, and deep nasal specimens no longer need to be performed by a health professional and can be performed by anyone with appropriate training. Supervised self-swabbing is also permitted as a voluntary specimen collection option.

27. What are acceptable methods of specimen collection for rapid antigen testing?

The Panbio™ test kit swab can be used to collect a specimen via a combined swab of throat and both nares, a shallow (anterior) nasal swab, and a deep nasal swab (i.e., not just a nasopharyngeal swab).

Please note that the nasopharyngeal swab is a controlled act that requires a specialized workforce. Combined swab of throat and both nares, shallow (anterior) nasal swab, and deep nasal swab can be performed by anyone with appropriate training and are reported to be less invasive and more comfortable for persons especially with higher testing frequency.

28. Does the specimen collection need to be conducted in accordance with the type of swab included in the test kit?

Yes, specimen collection must be conducted in accordance with the type of swab included in the test kit. The only exception is the use of the Abbott Panbio™ rapid antigen NP swab as a lower nasal swab, as this has been determined to be an acceptable alternative specimen collection modality by the Ministry of Health.

29. What are the advantages of doing an alternate type of specimen collection?

An alternate type of specimen collection, specifically a combined swab of throat and both nares or a shallow (anterior) nasal swab, has the advantage of:

- Increasing the availability of testing as an option by allowing for a broad range of health professionals to collect the specimen
- Reducing the inconvenience or discomfort due to repeated nasopharyngeal swabs.

30. Can a nursing student or a student in a health care professional program perform the test?

Any individual can perform rapid antigen screening (with the exception of the nasopharyngeal swab which is a controlled act) so long as they have the knowledge, skills, training and judgment to do so. It is up to the discretion of the home to determine whether an individual is qualified to perform the test.

31. Is self-swabbing an acceptable method of specimen collection?

Yes. According to updated [Ministry of Health guidelines](#), supervised self-swabbing is now permitted as an optional and voluntary swabbing method. You can learn more about how to perform self-swabbing by watching [this](#) instructional video and following [this](#) Ontario Health guidance document.

32. How many Panbio™ COVID-19 Ag Rapid Tests should long-term care homes order?

Long-term care homes should place orders with Ontario Health 7-14 days in advance, to ensure timely delivery. Homes are encouraged to pre-order testing kits for multiple rounds of testing (e.g., bulk order). Ontario Health recommends that long-term care homes order approximately one month's supply of testing kits at a time.

- For large orders: There are 800 tests per case. Please place your order in multiples of 800 (i.e. 800, 1600, 2400, etc.), to ensure timely delivery.
- If your site requires fewer than 400 tests, you may continue to order in multiples of 25 (25 tests per box).

Where possible, Ontario Health encourages head offices to place and receive orders for multiple homes by contacting covid19testing@ontariohealth.ca.

33. The waste generated from the testing is considered microbiological waste. Do the materials need to be autoclaved or incinerated? Are the costs of the waste disposal covered in the Prevention and Containment Fund?

Upper respiratory swabs and Panbio™ waste are considered microbiological waste. The Ministry of the Environment, Conservation and Parks ([MECP](#)) and [PIDAC](#) provide guidance on how to dispose of microbiological waste. According to PIDAC, incineration is not required for microbiological waste and if the treatment (such as autoclave) is capable of inactivating spores, then disposal in a landfill is permitted. This expense is eligible for Prevention and Containment Funding.

34. Do individuals need to provide consent every time they are tested?

The person administering the COVID-19 test must obtain the consent of the individual in accordance with the *Health Care Consent Act, 1996*. An individual must consent to a COVID-19 test before it can be administered— this includes staff, caregivers, student placements, volunteers, support workers and general visitors.

35. How is consent given?

Consent must be obtained in accordance with the *Health Care Consent Act, 1996*. Long-term care homes should determine the best approach to get consent from an individual being tested.

36. What happens if individuals refuse to be tested?

The health and safety of individuals in long-term care homes is a top concern. Testing results help protect individuals in the home (e.g., staff, student placement, volunteers, residents) from exposure to infectious diseases. As provided in the Minister's Directive, every licensee of a

long-term care home must ensure that no staff, caregivers, student placements, volunteers, support workers or general visitors enter the long-term care home unless the requirements contained in the Minister's Directive for testing have been met.

37. Does the Panbio™ COVID-19 Ag Rapid Test detect variants of concern?

Abbott (the manufacturer of the test) confirmed that the test detects the nucleocapsid protein rather than the spike protein (where the mutation exists).

38. I have questions regarding the Health Data Collection Services portal. Who can I contact?

For questions regarding data collection and the Health Data Collection Services Portal please contact askhealthdata@ontario.ca.

39. How can I learn about the rapid antigen testing implementation experiences of other long-term care homes?

Ontario Health in partnership with the Ministry of Long-Term Care have been holding webinar-based Community of Practice (CoP) sessions for homes to share their successes, concerns, problems, knowledge and expertise with using rapid antigen tests. Upcoming sessions will be announced on LTCHomes.net.

40. Who can I contact if I have any issues?

Please send any issues to MLTCpandemicresponse@ontario.ca or to covid19testing@ontariohealth.ca (or your Ontario Health primary contact) with a description of your concern.