



September 7, 2020

Dear Family Members,

In an effort to mitigate the spread of COVID-19 in residential care facilities, Colorado Department of Public Health and Environment has implemented facility wide surveillance testing of all Assisted Living facilities. The testing will begin with baseline testing for all staff and residents in our Assisted Living program. After baseline testing is completed, on-going weekly testing of staff and residents who have left the building within the past two weeks will be tested. This testing will continue for 8 weeks. This would be modified in the event of a POSITIVE COVID test.

I am happy to announce that we have identified that our surveillance testing is scheduled to begin on **Friday September 25, 2020**. A nurse from CSU will be on campus on Friday to assist and train me to take the samples. All samples must be collected between Friday September 25 and Monday September 28<sup>th</sup>. Samples will be sent to the lab each Monday, and result will be returned later that week. All staff and residents will be tested the first week, and then each subsequent week, all staff and any resident that has left the facility will be tested again. Residents that have not left the building do not require testing. We will complete this cycle every week for 8 weeks.

Attached you will find information regarding the surveillance testing and the consent forms provided to your family members. If you have any questions about the testing process, please feel free to give me a call at 720-382-7825.

Sincerely -  
Jennifer Grant  
Director of Assisted Living

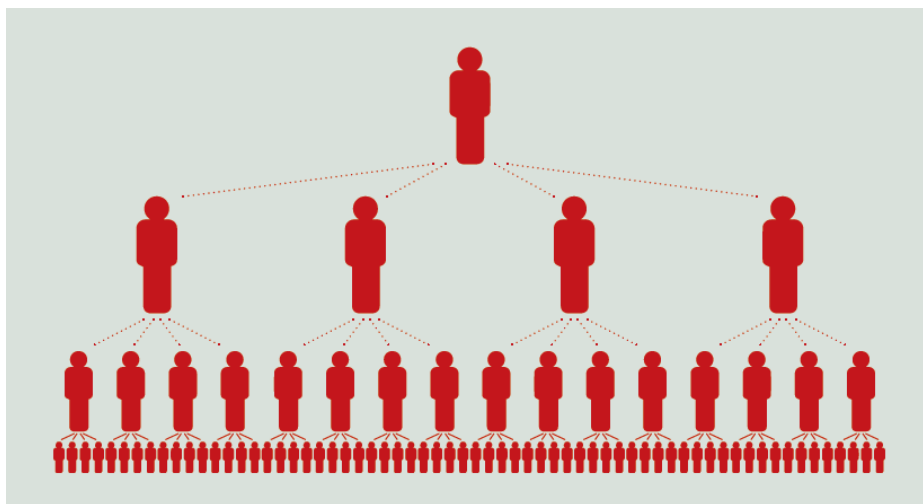


Columbine Health Systems  
Center for Healthy Aging  
COLORADO STATE UNIVERSITY

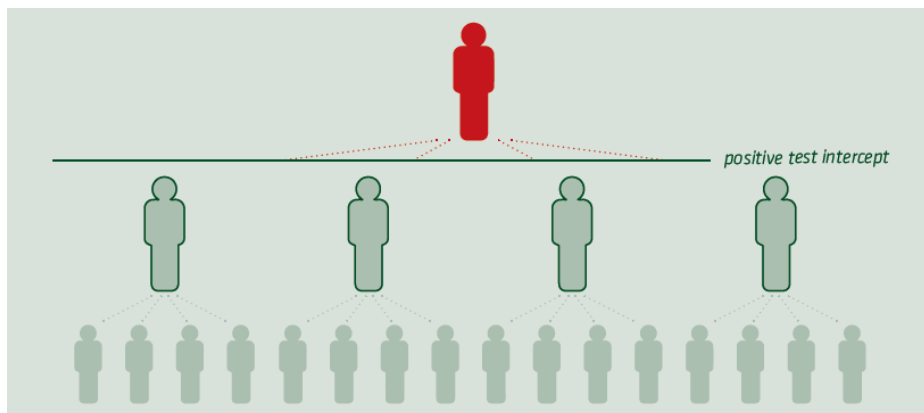
Colorado State University (CSU) COVID-19 Testing Project

## WE ARE ALL IN THIS TOGETHER: TESTING HELPS TO SAVE LIVES

Data show that one infected person, with or without COVID-19 symptoms, spreads the disease to four other people.



Testing Helps To Save Lives



You can play an active part in keeping your community safe.

Find out more on the back side! 

For more information, contact Brianna Dupre, Study Coordinator, at [bri.dupre@colostate.edu](mailto:bri.dupre@colostate.edu).

## Colorado State University (CSU) COVID-19 Testing Project

### **We Are All In This Together: Testing Helps To Save Lives**

You may have heard the saying “*It takes a village to raise a child.*” This old African saying also can be applied to skilled nursing and senior group living facilities during the coronavirus (COVID-19) pandemic: “*It takes a village to keep everyone safe.*”

Each skilled nursing and senior group living facility is like a communal village. Everyone in this community, may it be staff, residents, or families of residents, can work together to keep one another safe and well.

Understanding that you are part of this community has never been more important than during the COVID-19 pandemic. We are all in this together and we can help protect ourselves and each other with science-based recommended practices.

We need your help to better understand this current coronavirus and to protect our community. Therefore, we are asking you to participate in the CSU COVID-19 Testing Project—even if you are feeling healthy right now and are not having any illness symptoms.

***What is the CSU COVID-19 Testing Project?*** This is a project that was started by two CSU professors. These professors want to better understand if COVID-19 is present in skilled nursing and senior group living facilities in Colorado. The project looks for carriers of the virus who do not show any symptoms. In doing so, it helps to gain a better understanding of COVID-19 and develop ways we can keep you and our community safe and healthy.

***Why is it important to take part in this program?*** The biggest risk at this time in the COVID-19 pandemic is that a person may unknowingly carry the virus. This person may have no symptoms or have symptoms that are mistaken for something else, like seasonal allergies. If this is the case, then this person can unknowingly, and at no fault of his or her own, give the virus to someone else—even to loved ones and others he or she deeply cares about. By taking part in this program, you can prevent this from happening and keep your community safe.

***What can I do to help with this project?*** We are asking for your assistance by volunteering for COVID-19 testing once weekly for 8 weeks (8 total times). Your participation is an important step in helping to keep everyone in your community safe. Also, we are asking for your permission to safely store your test samples for further examination later on.

***What is the message here?*** Similar to the old African saying, the COVID-19 pandemic teaches us that “*It takes a village to keep everyone safe.*” You can help keep your community safe by volunteering for the CSU COVID-19 Testing Project. We are all in this together and your active participation shows that you care about your community.

We are very grateful for your participation!

# Individual Participant Consent and Authorization Form

---

Principal Investigators: Gregory Ebel (gregory.ebel@colostate.edu), Nicole Ehrhart (Nicole.ehrhart@colostate.edu)

Institution: Colorado State University

IRB No: 20-10057H

Version Date: 06-22-2020

Study Title: SARS-CoV-2 surveillance in senior care facilities

---

## Introduction

Colorado State University has been funded by the State of Colorado to provide COVID-19 testing for residents and workers in senior living communities. Your facility is one of the facilities chosen for testing. This testing is of no charge to you or your family and is part of a public health service funded by the State of CO in response to the COVID-19 pandemic.

The testing will be conducted at your senior living facility and involves putting a swab (a long Q-tip) in your nose similar to how the test for “flu” (influenza virus) is performed. The swab goes in about 2-3 cm (about one to 1.5 inches) but does not go all the way to the back of the throat, and is therefore considered by most people to be more comfortable than a nasopharyngeal swab. Your facility is participating in the testing program and will provide personnel to obtain the swabs samples to be tested. CSU’s diagnostic laboratory will test the samples for the virus that causes COVID-19.

This testing program involves testing you for COVID-19 only once, unless you test positive or if you leave the facility regularly for care or services. If you are positive or leave the care facility regularly, we will plan to test you more than once to see how your test results change over time.

There is no cost to you for this test and your test results will be returned to the designated health professional at your facility. You will be made aware of your results.

The Privacy Notice for SARS-CoV-2 testing at Colorado State University is available at: [dlab.colostate.edu/coronavirus](http://dlab.colostate.edu/coronavirus)

## **Individual Participant Consent and Authorization Form**

### **CONSENT FOR SPECIMEN ARCHIVING**

After your swab is tested for the virus that causes COVID-19, researchers at Colorado State University are requesting your consent to save your swab for future research. They want to learn more about how infection spreads in senior care facilities and how to best prevent spread. Allowing us to save your nasal swab for future research does not directly benefit you, but what we learn will help your community to better understand these diseases and prevent them. Your consent to have your nasal swab sample saved is voluntary and if decline to participate you will not lose any of the benefits or rights that correspond to you or your COVID-19 test. If you consent, we do not need to take extra swabs. We will save the same swab that is used for the COVID-19 test.

**Principal Investigators: Dr. Gregory Ebel (Gregory.Ebel@colostate.edu, Dr. Nicole Ehrhart (Nicole.ehrhart@colostate.edu)**

---

You are being asked to consent to have your nasal swab saved for future research. This form provides you with information about this process.

If you would like, a member of the research team will describe this study to you and answer all of your questions. Please read the information below and ask questions about anything you don't understand before deciding whether or not to take part.

## **Individual Participant Consent and Authorization Form**

### **Why is this research being done?**

Both workers and seniors living in community care settings can be exposed to COVID-19. This exposure can occur through contact with staff or other residents that have no COVID-19 symptoms and may never get sick. It's important that we identify which people in senior care facilities might actually be infected with the virus that causes COVID-19 so that we can all stay healthy. Not everyone infected with the virus that causes COVID-19 has symptoms (such as cough or fever), and some infected people never become sick. Its impossible to find these asymptomatic people who have COVID-19 without testing for it. We would like to understand how frequently people (with and without symptoms of COVID-19) are infected so that we can understand the disease better, advise people on how to combat the spread of coronavirus, and do a good job of keeping seniors and workers safe. We also want to use data we collectto understand why some people get sick and others don't.

### **What happens if I provide consent to save my swab?**

If you consent, we will save your nasal swab for future research to better understand how COVID-19 spreads and learn more about why some people get sick and others do not.

### **What are the possible discomforts or risks?**

There is no additional discomfort or risk associated with consenting to you're your nasal swab saved for future research. We do not need to collect extra swabs to have your swab saved. We will save the same swab collected for testing.

Discomforts you may experience from nasal swabbing are mild discomfort, sneezing or tear production. These effects are usually mild and brief (<30 seconds). Occasionally this procedure causes a nosebleed which is usually self-limiting and brief. All the people who collect nasal swabs have been trained to perform nasal swabs properly to minimize these discomforts or risks.

### **What are the possible benefits of partipating?**

It is possible that there will be no direct benefit to you or your family for consenting to have your samples saved for future research.

Consenting to have your swab saved for future research is not designed to treat any illness or to improve your health. However, the results of this study may help us find better ways to combat the spread of coronavirus among the people most likely to have serious disease.

## **Individual Participant Consent and Authorization Form**

### **Who is paying for this study?**

This research is being sponsored by the Colorado State University. The COVID-19 testing program is being funded by the State of Colorado.

### **Will I be paid?**

You will not be paid to have your swab saved for future research.

### **Will I have to pay for anything?**

It will not cost you anything to have your nasal swab saved. Your COVID-19 test is free to you and your family.

### **Is my participation voluntary?**

Consenting to have your nasal swab saved is completely voluntary. You have the right to choose not to have your nasal swab saved for future research. You can change your mind at any time. If you decide to withdraw your consent later, you will not lose any benefits or rights to which you are entitled. If you choose to consent, your nasal swab will be archived for future research. Any identifiers linking you to your nasal swab will be removed. After we remove those identifiers, the swab could be used for future studies or distributed to another researcher for future studies without your permission but nothing can be linked to you and you cannot be identified.

### **Can I be removed from this study?**

A doctor may decide to stop your participation without your permission if your doctor or medical care provider thinks that being in the study may cause you harm, or for any other reason. Also, the researchers may stop the study at any time, in the interests of your health/safety.

### **Who will see my research information?**

We will do everything we can to keep your private health information confidential. All We will do everything we can to keep your private health information confidential. Your personal health information will be stored securely and not disclosed to anyone outside of the study team. To facilitate this, all data from stored nasal swabs will be coded with identifiers removed. Your sample will be given an ID number which identifies the date the sample was collected and the residence facility from which the sample was collected. The rest of the number is randomly assigned to each person and cannot be used to identify you.

The consent form signed by you may be looked at by others.

Combined Biomedical Consent and Separate Main and Optional HIPAA authorizations  
CF-151.S, Effective 10-17-18

## **Individual Participant Consent and Authorization Form**

These include:

- Federal US agencies that monitor human subject research
- People at the CSU IRB
- The group doing the study and the laboratory doing the testing
- Regulatory officials from the institution where the research is being conducted who want to make sure the research is safe

The results from the research may be shared at a meeting. The results from the research may be in published articles. Your name will be kept private when information is presented.

### **Some final points that we would like to reiterate:**

- You can be tested for COVID-19 at no cost to you and still decline to have your swab saved for future research. If you decline, this will in no way affect the results of your COVID-19 test or your ability to see your results.
  - All testing results will be reported to the Colorado Department of Public Health by the CSU Diagnostic Lab and the provider. This is a public health authority requirement and reported information will include your name and contact information.
  - Your local public health agency may get the result at the same time as your health care provider, so you may receive a call from public health before your health care provider is able to notify you of a positive result.
  - Public health follow up is imperative for providing disease control guidance both at home and at work. Feel free to ask questions and learn how to prevent further transmission.

If you have questions or concerns about your rights as to have your nasal swab saved for future research, you can contact Colorado State University IRB, a group of people who review research activities with efforts to protect participants, at [RICRO\\_IRB@mail.colostate.edu](mailto:RICRO_IRB@mail.colostate.edu).



# Individual Participant Consent and Authorization Form

## Authorization to Save Samples

CSU researchers would like to keep the nasal swab samples being collected for COVID-19 testing for future use to study new tests and to look for other causes of diseases that affect humans and animals. If you agree, we will keep these samples indefinitely. Saved samples will not have your name written, so we cannot give you the results of those tests we will do in the future. Your samples will not be used for genetic or HIV testing. If you do not want us to save your samples, we will destroy them in a very hot oven after they are tested. If you do not give us permission to save your samples, it will have no consequences and you will not lose any of the benefits or rights that apply to you.

Please sign below if you give us permission to save these samples for future testing.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Consent form explained by: \_\_\_\_\_

Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

### If consent is provided by surrogate:

Signature of Surrogate : \_\_\_\_\_

Date: \_\_\_\_\_

Print Name of Surrogate: \_\_\_\_\_

Consent form explained by: \_\_\_\_\_

Date: \_\_\_\_\_

Print Name: \_\_\_\_\_