

Appendix C - Modified Self-Isolation Employee Consent Template

Background

In some cases where an individual has been named as a close contact to someone with COVID-19, their employer may apply to have them exempt from the requirement to self-isolate, subject to terms and conditions, for the limited purpose of performing their employment duties. Your employer wishes to make an application on your behalf to seek approval for you to be exempted from the requirement to self-isolate, subject to the terms and conditions, to allow you to continue to carry out your employment duties ("Modified Self-Isolation").

A Medical Health Officer may exempt an individual from the requirement to self-isolate if, in the opinion of the Medical Health Officer:

- (i) The individual provides an essential service (the list of essential services is attached the Provincial Public Health Order);
- (ii) The individual's inability to provide that essential service due to self-isolation would pose a safety risk to the public; and
- (iii) The individual is partially vaccinated at the time of their exposure to COVID-19.

An exemption pursuant to this subsection is limited to the times and places necessary to provide the essential services identified pursuant to paragraph (i), and may be subject to any terms or conditions imposed by the Medical Health Officer.

Seeking Modified Self-Isolation is voluntary; you are not required to seek Modified Self-Isolation. If Modified Self-Isolation is not approved, then you are required to self-isolate for a period of 14 days from the date of your last exposure to COVID-19.

I understand that by signing this consent form, an application for Modified Self-Isolation will be made on my behalf by my employer to a Medical Health Officer.

Any personal health information collected pursuant to this consent will be used and disclosed in accordance with *The Health Information Protection Act* and *The Public Health Act, 1994*, as applicable.

Consent

Based on the above understanding, I consent to the following:

1. The workplace Occupational Health and Safety Committee will review the application for modified isolation including the dates, times and locations in which modified isolation is being requested and the mitigations in place to protect the safety of other employees in the workplace.
2. The Ministry of Health disclosing and a Medical Health Officer (or designate) using my immunization record to determine my eligibility for Modified Self-Isolation.
3. A Medical Health Officer communicating approval or rejection of the application to my employer. In this communication, the Medical Health Officer may disclose my immunization record and other COVID-19 related investigation details (such as test results).
4. For the duration of the Modified Self-Isolation period, the Saskatchewan Health Authority or First Nations Jurisdiction involved in my follow-up may disclose details related to my compliance with the terms and conditions of my Modified Self-Isolation to my employer, including whether my Modified Self-Isolation has been revoked.
5. The Saskatchewan Health Authority or First Nations Jurisdiction using and disclosing my information as it relates to Modified Self-Isolation for the purposes of investigating my compliance with the Modified Self-Isolation terms and conditions.

I acknowledge and agree that if Modified Self-Isolation is approved:

1. I must follow all requirements and restrictions outlined by the Medical Health Officer (see page 3).
2. I will be monitored by Public Health or the Employer in the workplace.
3. If I fail to follow any requirement or restriction related to Modified Self-Isolation, my Modified Self-Isolation will be revoked, and I will not be permitted to work until released from the requirement to self-isolate.

Last Name: _____ First Name: _____

Middle Name: _____ DOB: Day ____ Month ____ Year ____

Telephone number: _____ Health Services Number: _____

Home Address: _____

I understand that I can refuse to sign this consent form and am voluntarily providing consent by my signature.

Employee Signature: _____ Date: _____

Witness Name: _____ Relationship: _____

Witness Signature: _____ Date: _____

Requirements and restrictions outlined by the Medical Health Officer should modified self-isolation be approved include the following:

1. **Special Permission is granted by the Medical Health Officer to continue to work during this time, as long as you have not had any symptoms in the last week and do not develop any during this time.**
2. **Working outside of the approved site is not permitted.**
3. **You must continue to follow all Self-Isolation Guidelines when not at work, in route to and from work, and adhere to all restrictions as outlined when at work.** For more information see [Self-isolation](#)
4. **Testing during the self isolation period:**
 - PCR lab testing regardless of symptoms immediately after the exposure and again at Day 7 post exposure.
 - Antigen testing may also be completed in your workplace, but only if you are asymptomatic.
5. **Symptom monitoring twice each day** – if any symptoms, even minor, please isolate immediately. If symptoms develop after initial testing then you need to be re-tested. If you are having symptoms you should be tested 48 hours after they developed.
**** If symptoms develop, the permission to work is void, isolate immediately, and call 811 to arrange for testing. You may return to work once negative test result is received and you are 48hrs symptom free.**
6. Please continue to be vigilant with all of the COVID-19 protocols on the Ministry of Health website, <https://www.saskhealthauthority.ca/news/service-alerts-emergency-events/covid-19>
7. Follow all current Infection Prevention & Control policies and procedures for attending work ensuring that all processes to prevent transmission between the public and co-workers are optimized including:
 - Performing the [COVID-19 Self-Assessment Tool](#) prior to each shift.
 - Self-monitor for symptoms of COVID-19 (temperature twice daily).
 - Stay home if you are sick, even if your symptoms are mild. Immediately arrange for COVID-19 testing [PCR testing can be arranged by contacting 8-1-1 or attend a drive thru clinic]. Notify employer and public health if become symptomatic.
 - Continuous use of a mask at work.
 - Wearing the correct PPE when required and donning and doffing it correctly.
 - Performing hand hygiene often and effectively.
 - Maintaining physical distancing between the public and coworkers to the extent possible.
 - If possible, minimize interaction with other staff and members of the public.
 - Cohorting to the unit/site for the entirety of your self-isolation period.
 - Ensure you are taking your breaks safely:
 - Self-isolate from other staff members during your shift i.e. no sharing meals with others, no breaks with others, no shared/communal food
 - Avoid all public spaces i.e. cafeteria, break room
8. It is a requirement to be monitored by Public health and your employer throughout the isolation period.