



# Northern Inter-Tribal Health Authority Inc.



February 7, 2022

## Public Health Approach to COVID-19 Testing and Case Management

Following the change in the Public Health Order on January 27th, 2022, COVID-19 Testing, Case and Contact Management have changed. With most Omicron COVID-19 cases resulting in mild illness, these cases can be self-managed with self-testing and self-isolation.

COVID-19 testing and case management guideline has been updated as below.

### A. Management of cases and close contacts

#### 1. Positive Case:

- All individuals who test positive for COVID-19 either on RCR or Rapid Antigen Test are required to immediately self-isolate for 5 days regardless of vaccination status.
- If asymptomatic and test positive, self-isolate for 5 days from the date of testing.
- If symptomatic and test positive, self-isolate 5 days from the date of testing or 24 hours after fever has resolved without the aid of fever-reducing medications and all other symptoms have been improving for at least 48 hours, whichever is later.
- Positive cases should be encouraged to identify and notify their close contacts.
- Active daily monitoring by public health is not required.

#### 2. Close contacts:

- Self-isolation is not required.
- Self-monitor for symptoms consistent with COVID-19 for **10 days** following their last exposure to the case.
- Isolate immediately and seek testing if symptoms develop.
- Rapid Antigen Testing is recommended for ALL close contacts on **days 0, 3 and 5**
- If unvaccinated, make arrangements to get vaccinated as soon as possible.
- Offer medical mask to household contacts of the case especially in situations where the case is isolating with the household.

#### 3. Case Investigation:

- Case investigation and contact tracing will focus on high-risk and priority\* settings including:
  - Hospitalized cases
  - Long Term Care and Integrated facilities
  - Personal Care Homes/Group Homes/Residential Treatment Centers
  - Homeless shelters
  - Healthcare workers\*
  - Cases associated with a known outbreak\*
- Completion of case notification and case investigation worksheet by public health team is required in the above scenario regardless of mode of testing – PCR or Rapid Antigen Test.
- Reporting of Rapid Antigen Test positive result in other settings (e.g. mass gathering, place of worship, events) is not required. We encourage public health teams to keep a line list and forward to NITHA at regular intervals.

- Local public health teams can modify their approach to case investigation as their capacity permits.
- **Schools and DayCare settings:**
  - School administrators are encouraged to take the lead in notifying parents/guardians of exposures in the school setting, if they become aware.
  - Template letters have been provided.
  - Monitoring of absenteeism using the recommended tracking tool should continue.
  - Continue to implement all public health measures including masking, physical distancing, hand hygiene, staying home if sick, vaccination and improved ventilation.

#### 4. Rationale for current recommended approach to case investigation:

- We recommend that the above approach to case investigation be implemented until **February 28, 2022** based on the following rationale:
  1. Based on NITHA's current epidemiology and previous experience with COVID-19 waves, we suspect that the Omicron wave is yet to peak in the north. The north is typically 2-3weeks behind the rest of SK.
  2. NITHA COVID-19 vaccination coverage is not optimal in some community and still lagging behind the province.
  3. Maintaining above approach/measures will ensure that public health teams buy time to:
    - a. increase vaccination coverage and population herd immunity
    - b. allow for ongoing support to schools and smooth transition from health teams.

## B. Outbreak Management

- The Omicron variant of COVID-19 is more transmissible with a very short incubation period and many cases remain asymptomatic.
- The outbreak and case management protocols that were effective in previous waves of the pandemic in identifying and limiting transmission are no longer as effective with the speed of Omicron's transmissibility.
- NITHA public health will continue to investigate severe cases and shift resources to focus on outbreak management in high-settings where the risk of severe health outcomes is highest.

## C. COVID-19 Testing

- Self-administered Rapid Antigen Test is available to all NITHA residents to support both **symptomatic and asymptomatic** COVID-19 surveillance.
- **For individuals experiencing mild cold-like symptoms including cough, sore throat, sneezing without fever**, it is recommended that they stay home, use rapid antigen testing and self-isolate based on those results.
- PCR testing is reserved for **priority populations** at elevated risk for severe outcomes, which include:
  - Hospitalized patients
  - High risk populations including residents in long term care and personal care homes and congregate living facilities

- Priority symptomatic persons including health care and essential workers
- **People living or working in remote First Nation and Metis communities**
- Surgical, oncology patients
- Pregnant patients
- Newborns
- Symptomatic immunocompromised individuals
- Healthcare workers and [essential workers as defined under the current public health order](#) with negative rapid antigen results who remain symptomatic will continue to be eligible for PCR tests to protect Saskatchewan's essential services.
- Medical health officers may order PCR testing as part of outbreak investigations



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### Reference

Government of Saskatchewan

<https://www.saskatchewan.ca/government/health-care-administration-and-provider-resources/treatment-procedures-and-guidelines/emerging-public-health-issues/2019-novel-coronavirus/testing-information/where>

<https://www.saskatchewan.ca/government/news-and-media/2022/february/03/living-with-covid-transition-of-public-health-management>

SK CD Manual

<https://www.ehealthsask.ca/services/Manuals/Documents/cdc-section2.pdf#page=12>