



COVID-19 POLICY 3.0: CARE OF INDIVIDUALS WITH PROBABLE/CONFIRMED COVID-19

GOAL

- 3.1 The goal of public health management of Individuals with probable or confirmed COVID-19 is to (1) monitor for clinical progression of infection and (2) facilitate stopping the spread of infection through isolation of the individual and (3) timely identification and quarantine of people that may have been exposed to active, infectious COVID-19.

POLICY STATEMENTS

- 3.1 SLFNHA will receive reports of probable and confirmed COVID-19 cases for individuals residing in SLFNHA communities from health units, and/or health care providers.
- 3.2 SLFNHA will receive reports of probable and confirmed COVID-19 cases for individuals residing at the hostels managed by SLFNHA.
- 3.3 SLFNHA will undertake case management of COVID-19 cases according to the current version of *Public health management of cases and contacts of COVID-19 in Ontario*.
- 3.4 SLFNHA will ensure all necessary documentation is filed and appropriate databases are updated.

PROCEDURES

3.5 Notification

- 3.5.1 CHN/PHNs report to SLFNHA by telephone (1-866-737-4466) any Individuals with probable or confirmed COVID-19 (consistent with First Nations and Inuit Health Branch – Ontario Region Policy xx).
- 3.5.2 PID nurse, with support from the public health physician as needed, confirms that the case meets the provincial case definition for COVID-19 for either a probable or confirmed case.

3.6 Case Management of Individuals in a northern community

- 3.6.1 PID nurse follows up with the most appropriate health care provider (e.g. CHN/PHN or community physician) to begin/complete the *SLFNHA COVID-19 Report Form*.
- 3.6.2 CHN or Community Physician meets with the Individual to do a clinical assessment and provide education on COVID-19.
- 3.6.3 PID nurse guides the CHN/PHN in undertaking the case interview with appropriate supports from community health workers (CHW) as needed and using the *SLFNHA COVID-19 Activity Prompt Worksheet*.
- 3.6.4 PID nurse ensures that a plan is in place by the CHN/PHN/CHW to conduct daily monitoring of the COVID-19 case.



3.6.5 PID nurse ensures that a plan is in place by the CHN/PHN/CHW to support the case to isolate for 14 days post symptom onset or positive test result.

3.6.6 CHN/PHN/CHW conducts daily clinical monitoring of the Individual and documents this in the *Daily Clinical Update Form: Case Managed in the Community*.

3.6.7 PID nurse chairs regular teleconferences with all team members to ensure the timely follow-up and management of Individuals with COVID-19 (with administrative support from the PID administrative assistant).

3.7 Case Management of Individuals from a northern community admitted to Sioux Lookout Meno Ya Win Health Centre

3.7.1 PID nurse undertakes the case interview and provides education on COVID-19 to the Individual and any family/friends that may be present.

3.7.2 PID nurse checks in daily with the case or the assigned hospital nurse to update on clinical status while admitted to hospital.

3.7.3 PID nurse participates in discharge planning as needed to ensure that an appropriate plan to maintain isolation for 14 days is in place.

3.8 Case Management of Individuals from a northern community staying at the Jeremiah McKay Kabayshewekamik hostel

3.8.1 PID nurse undertakes the case interview and provide education on COVID-19 to the Individual and any family/friends that may be present.

3.8.2 PID nurse ensures that arrangements have been made with the hostel to ensure isolation supports for the individual with COVID-19.

3.8.3 PID nurse undertakes daily monitoring of the case while they reside at the hostel and documents in the Azure charting system.

3.8.4 PID nurse participates in discharge planning as needed to ensure that an appropriate plan to maintain isolation for 14 days is in place.

3.9 Determining outcome of the Individual

3.9.1 PID nurse will determine whether the case is classified as active, resolved or deceased according to provincial guidance.

3.10 Documentation

3.10.1 CHN/PHNs fax medical documentation (e.g. chest x-ray reports, laboratory results, etc.) regarding the Individual diagnosed with COVID-19 to SLFNHA as requested (1-866-737-2141).

3.10.2 CHN/PHN/CHWs fax weekly copies of the *Daily Clinical Update* record to SLFNHA (1-866-737-2141).



- 3.10.3 PID nurse starts a file for confirmed cases in the Azure charting system for COVID-19. The file will include the iPHIS ID number assigned by the health unit whose jurisdiction the case resides in.
- 3.10.4 PID nurse starts a file for probable cases in the Azure charting system only for those probable cases that meet the provincial case definition.
- 3.10.5 PID nurse uploads all relevant laboratory and other medical documentation into the Azure case chart.
- 3.10.6 PID nurse communicates to epidemiologist when the case is resolved so that the COVID-19 Daily Dashboard can be updated.
- 3.10.7 SLFNHA reports to the appropriate health unit all details of the Individual with COVID-19 that are required for entry into the provincial integrated Public Health Information System. This can be done by faxing a completed copy of the *SLFNHA COVID-19 Report Form*.

RESOURCES:

Management of Cases and Contacts of COVID-19 in Ontario (current version). Available at: http://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/contact_mgmt/management_cases_contacts.pdf

COVID-19 Quick Reference Public Health Guidance on Testing and Clearance (current version). Ministry of Health Current edition. Available at: http://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/2019_testing_clearing_cases_guidance.pdf

SLFNHA COVID-19 Algorithm 2: Public health management of confirmed cases of COVID-19. (available on OneHealth).

FORMS:

SLFNHA COVID-19 Report Form
SLFNHA COVID-19 Activity Prompt Worksheet
SLFNHA COVID-19 Daily Clinical Update Form: Case Managed in the Community

APPROVALS



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