



COVID-19 POLICY 5.0: SURVEILLANCE AND REPORTING

GOAL

3.1 The goal of surveillance and reporting for COVID-19 is to (1) identify the emergence of clusters or outbreaks, (2) follow COVID-19 infection activity trends over time, (3) guide the implementation of control measures, and (4) to keep partners and funders informed of the status of COVID-19 in Sioux Lookout region.

POLICY STATEMENTS

3.1 SLFNHA will complete surveillance of COVID-19 for First Nations in the SLFNHA jurisdiction.

3.2 SLFNHA will create reports of COVID-19 surveillance to share with community leadership, health system partners and community members.

3.3 SLFNHA will report nominal information on cases of COVID-19 to the health unit in whose jurisdiction the case resides according to the obligations and standards outlined in the *Health Protection and Promotion Act* and Ontario Public Health Standards.

3.4 SLFNHA will report de-identified information on cases of COVID-19 to the First Nations and Inuit Health Branch (FNIHB), Indigenous Services Canada to be incorporated into the national surveillance system for COVID-19 in First Nations in Canada.

PROCEDURES

3.5 Surveillance of COVID-19 testing

3.5.1 CHN/PHNs fax the Public Health Ontario Laboratory (PHOL) requisition for all individuals undergoing testing for COVID-19 in a SLFNHA served community nursing station/health centre to the PID confidential fax line (1-877-737-2141).

3.5.2 PID team enters data from the PHOL requisition into the COVID tracker excel spreadsheet.

3.5.3 PID epidemiologist creates weekly summary of testing data.

3.6 Surveillance of COVID-19 cases and contacts

3.6.1 SLFNHA epidemiologist extracts line lists of cases and contacts from the Azure charting system to provide epidemiological summaries.

3.7 Reporting to Health Units

3.7.1 PID nurse reports immediately, new confirmed cases of COVID to the health unit who has jurisdiction for the location that the case resides.



3.7.2 PID nurse faxes a copy of the SLFNHA Case Report Form or the Azure SARI form to the health unit within 24 hours of notifying the health unit.

3.7.3 PID nurse faxes demographic details of contacts that meet the provincial case definition to the health unit who has jurisdiction for the location that the case resides.

3.8 Reporting to FNIHB

3.8.1 SLFNHA epidemiologist reports new cases of COVID to FNIHB on the day the report is received in the template provided by FNIHB-Ontario region.

APPROVALS

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