



Removal of Public Health Order – July 11, 2021 at 12:01 A.M.

Information for Surveillance, Testing, Immunization, Case and Contact Management, Outbreak Management and Health Promotion Teams

As of July 11, 2021 at 12:01 a.m. the Government of Saskatchewan's Public Health Order has been rescinded and the Communicable Disease Manual updated to include new information and definitions that are crucial to the work of Public Health teams.

The following is a brief overview of items that are changing. Please refer to the latest Work Standards for more detailed information.

Case Definitions and Case Management

- The suspect case definition has been removed.
- The probable case definition has been amended. A symptomatic individual with high risk exposure will meet criteria for investigation and reporting as a probable case.
- All cases must self-isolate in a suitable environment for 10 days post symptom onset or date of test if asymptomatic (20 days for severe illness or severely immunocompromised).
- Provide education to cases to self-monitor for new or worsening symptoms and know what to do if that occurs.
- Provide education on isolating in the home or co-living setting; environmental cleaning; reducing exposures to others including distancing, wearing a mask, respiratory etiquette and hand hygiene.
- Public Health will follow up with anyone who tests positive in order to conduct an investigation and provide counselling.
- There will be no requirement for daily monitoring during the isolation period, however public health will follow up at the end of the isolation period to answer questions and complete a further assessment to determine if the patient has recovered and is no longer considered infectious.
- If a person is determined to be at high risk of clinical decompensation and without necessary supports (e.g. elderly with comorbidities who lives alone), the case should be encouraged to arrange for family/friends/community organizations to provide daily check-ins.
- The SHA will identify those at high risk of clinical decompensation and without necessary supports and offer referrals to supports and daily monitoring.
- When it comes to self-isolation and travel Visit the Government of Canada website <https://travel.gc.ca/travel-covid> for information and rules around international travel, including exemptions for fully vaccinated* travelers.

Contact Tracing

- Contact tracing will continue to be a part of a COVID-19 case investigation to identify close and non-close contacts.
- Public Health will follow up with contacts to inform them of their exposure and provide counselling.
- Contacts will be assessed based on their vaccination history (immunization record) to determine if they are at risk of contracting COVID-19.
- Close contacts who are not fully vaccinated will be required by Public Health to seek testing as soon as possible following exposure and at day 10 after the exposure, and to self-isolate for at least 14 days from the date of last exposure to the case.



COVID-19



- Contacts who are fully vaccinated will generally be required to seek testing only if COVID-19 symptoms develop and do not need to self-isolate unless symptomatic.
- All contacts who develop symptoms are required to isolate and seek testing immediately.

Close contacts include:

- Anyone **who is not fully vaccinated** and lives with a case, has direct physical contact with a case, or is exposed to their infectious body fluids, including the case's caregiver, intimate partner, child receiving care from the case, etc.;
- Anyone **who is not fully vaccinated** and has shared an indoor space (e.g., same room) with a case for a prolonged period of time including closed spaces and crowded places, (e.g., social gatherings, workplaces, etc.), without adhering to appropriate individual-level and setting-specific risk mitigation measures; and
- Anyone **who is not fully vaccinated** and has had a close-range conversation with a case or has been in settings where a case engaged in singing, shouting, or heavy breathing (e.g., exercise), without adhering to appropriate individual-level and setting-specific risk mitigation measures.

Non-close contacts include:

- Anyone (**regardless of vaccination status**) who has shared an indoor space (e.g., same room) with a case, including closed spaces and crowded places (e.g., social gatherings, workplaces, etc.), with adherence to appropriate individual-level and setting-specific risk mitigation measures (e.g. wearing a mask, practicing social distancing);
- Anyone (**regardless of vaccination status**) who has had a close-range conversation with a case or has been in settings where a case engaged in singing, shouting, or heavy breathing (e.g., exercise), with adherence to appropriate individual-level and setting-specific risk mitigation measures (e.g. wearing a mask, practicing social distancing); and,
- **Fully vaccinated individuals** would be considered to have a low risk exposure and be managed accordingly.

Additional Information

- With a few exceptions, anyone who is 14 days past their second dose of the COVID-19 vaccine at time of exposure and is asymptomatic does not need to self-isolate when named as a close contact of a COVID-19 positive person.
- ANY contact with symptoms must self isolate.
- Anyone who is unvaccinated or has received only one dose of the COVID-19 vaccine must still self-isolate as directed by Public Health if they are identified as close contacts.
- Public Health may require fully vaccinated close contacts to isolate if they are considered at higher risk of serious illness or for increased transmission, or they live in settings at risk of outbreaks. Self-isolation of fully vaccinated close contacts may also be required in health care settings, including long-term and personal care homes, and congregate living settings like group homes and corrections facilities.
- There is still a requirement for health care workers and employees/residents at facilities including long-term and personal care homes, corrections facilities and other congregate living settings to be tested, if they are deemed close contacts of someone who is COVID-19 positive.
- When a case's self-isolation period is over, Public Health will follow up with them at the end of their self-isolation period.
- When a contact's self-isolation period is over, if they do not have COVID-19 symptoms, their risk of infecting



others with COVID-19 is low and they can return to work or school. However, if they have had another exposure during the initial 14 day period (ie. from a family member that became ill), the self-isolation must extend for 14 days from the last exposure.

- We strongly recommend that everyone who is eligible gets both doses of a two-dose COVID-19 vaccine series. If they are eligible but not fully vaccinated, they are able to **get vaccinated** once they are no longer self-isolating.

Exceptions to Self-isolation

Any exception to self-isolation for close contacts must be authorized by Public Health as follows:

- Modified Self-Isolation
 - Applies to partially vaccinated asymptomatic close contacts providing essential services. It allows them to continue working at approved locations and times with additional mitigations in place. These individuals must continue to self-isolate when they are not at work.

*Fully vaccinated: if at the time of exposure, it has been 14 days or more after the second dose of a two dose COVID-19 immunization series or 14 days or more after the first dose of a one dose COVID-19 immunization series.

Partially vaccinated: if at the time of exposure, it has been 14 days or more after the first dose of COVID-19 vaccine OR up to 14 days after receiving the second dose of the two dose COVID-19 immunizations series.