

Testing and Clearance Guidance for Individuals in Service

Objective of this guidance is to protect our most vulnerable, highest risk individuals, and ensure they receive the greatest possible care, and to avoid unnecessary burden on our health system by reducing the number of PCR laboratory tests we complete.

Summary of guidance:

- This guidance focuses on the use of **Rapid Antigen testing (RAT)**. RAT results do NOT need confirmation with a PCR laboratory test. PCR testing will be used on the recommendation of a healthcare provider, or to help direct therapeutic intervention
- 5 common scenarios in which testing or surveillance is required are outlined in this document:
 - o 1. Positive (and/or symptomatic) individual result
 - o 2. Individual as close contact with a positive case
 - o 3. Individual leaves on an overnight absence from their home
 - o 4. Individual utilising day program supports
 - o 5. Example situations for multiple individuals testing positive

Before testing an individual, ensure you as the staff are RAT test trained, and that the individuals who require a RAT test have a consent form signed by their parent, guardian, or PGT.

Symptoms to monitor:

Common Symptoms of COVID-19:

- Fever (temperature greater than 37.8°C)
- Shortness of breath
- Muscle aches or pain
- Extreme fatigue or lethargy
- Headache
- New or worsening cough
- Decrease/loss of sense of taste or smell
- Nausea, vomiting, diarrhea
- Sore throat

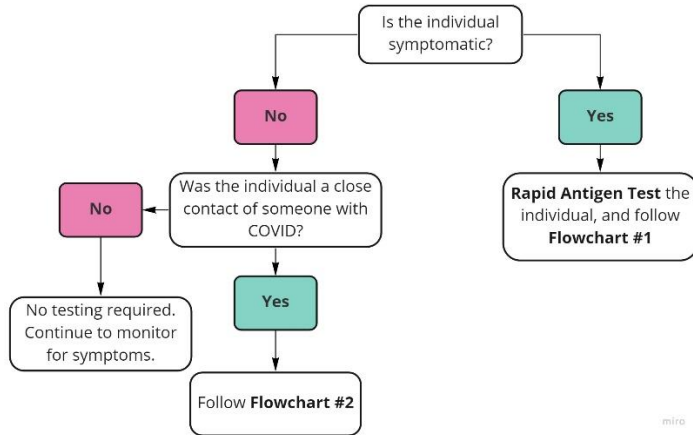
Monitoring Individuals with COVID-19 symptoms (or with confirmed COVID-19 infection):

- Monitor all individuals for severe COVID symptoms and report any changing or worsening symptoms to the family MD or most responsible physician.
- Monitor for uncommon COVID symptoms: more tired than usual, delirium, falls, declining rapidly, or worsening of chronic conditions (ie. Diabetes)
- Call 911 in the case of an urgent symptom presentation
 - o **Urgent symptoms:** shortness of breath, blue lips or fingertips, fever that does not break despite treatment with fever-reducing medication (eg. Tylenol), severe intestinal symptoms (persistent diarrhea or vomiting that do not stop over several days), or other severe symptoms that are abnormal for the individual.

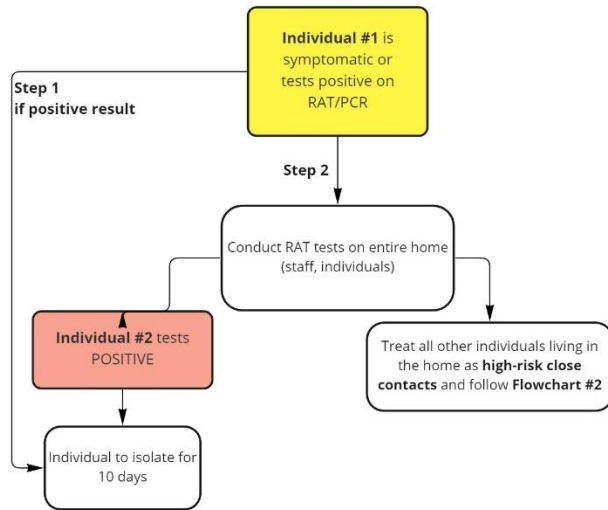


Scenarios and flow charts:

Testing Criteria: Begin Here.



Flowchart #1: Symptomatic or positive individuals:

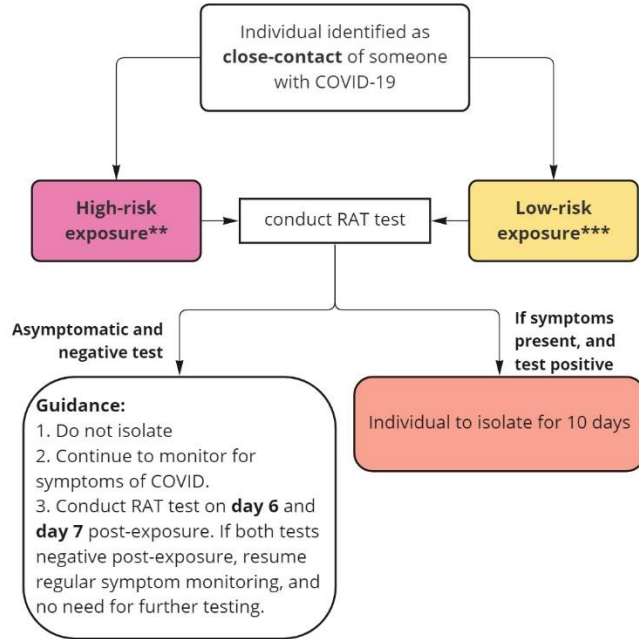


Guidelines for isolation:

- Isolate for 10 days from symptom onset or positive test result.
- Provide support during isolation where possible.
- Staff to wear N95 masks when caring for COVID-positive individuals.
- **Stop isolation if:** symptoms markedly improve for at least 24 hours prior to end of isolation, and no GI symptoms for 48 hours before return to work (vomiting or diarrhea).
- Attempts should be made, if immunocompromised individuals live in the home and are negative/asymptomatic, to isolate them from the positive individual for the duration of the isolation period.

See **Example scenario** to learn *how to deal with multiple individuals testing positive in the home.*

Flowchart #2: Individual as close contact



Guidelines for isolation:

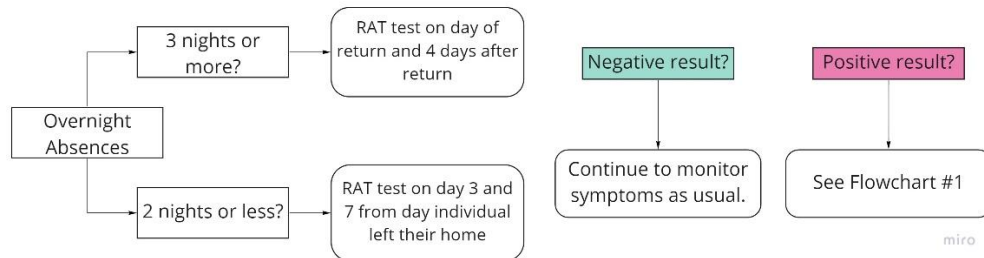
- Isolate for 10 days from symptom onset or positive test result.
- Provide support during isolation where possible.
- Staff to wear N95 masks when caring for COVID-positive individuals.
- **Stop isolation if:** symptoms markedly improve for at least 24 hours prior to end of isolation, and no GI symptoms for 48 hours before return to work (vomiting or diarrhea).
- Attempts should be made, if immunocompromised individuals live in the home and are negative/asymptomatic, to isolate them from the positive individual for the duration of the isolation period.

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Legend for Flowchart #2:

- ** High-risk exposure:** direct contact with infectious body fluids of a positive individual (coughed on, sneezed on), or contact with a positive individual while both parties are not wearing PPE.
- Examples of high-risk exposures for individuals:
 - o Home visit with family, where they subsequently learn that a family member has tested positive
 - o Another positive individual living in the home with them.
 - o Close contact with a COVID-positive staff member where PPE was not worn
- *** Low-risk exposure:** consistent and appropriate PPE worn for the duration of the interaction
- Examples of low-risk exposures for individuals:
 - o Close contact with a COVID-positive staff member where proper PPE was worn

3. Individual leaves on an overnight absence from their home



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4. Individual utilising day program supports

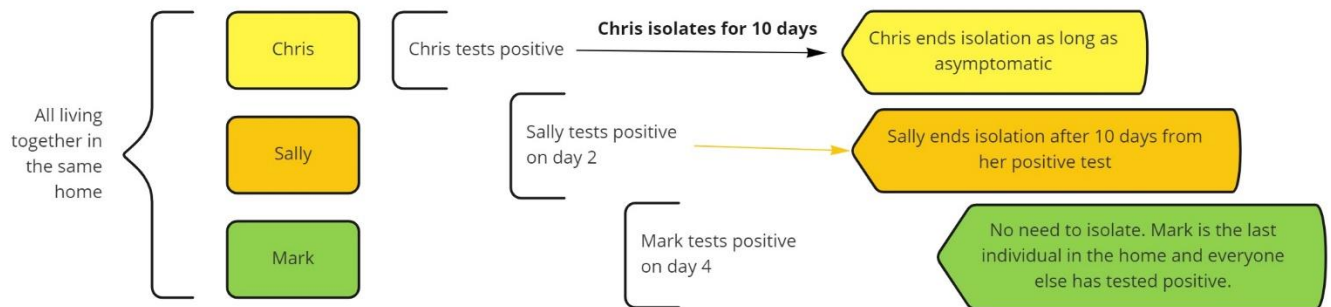
The individual will be tested **once per week**.

A negative test at least once a week is required for admission to the day program. The individual's family may conduct the test at home and share the result with staff.

Example Situation in Group Home Individuals living with someone who tests positive

How to read this scenario:

You are **staff** seeking to understand **how to care for a positive individual**. In this example, Chris, Sally, and Mark are all individuals living in the group home.



- Individuals who test positive, and complete their isolation, and are asymptomatic do not have to isolate **for at least 90 days**.
- The first individual to test positive in the home or an individual who was previously positive and recovered from COVID-19, does not have to extend isolation if others in the home test positive, nor do they have to isolate if they were previously positive and recovered within last 90 days as long **as they remain asymptomatic**.
 - If they develop symptoms within the 90 days from their case, they are to isolate until their symptoms markedly improve for at least 24 hours (ie. No symptoms listed above in "Common symptoms of COVID-19").
- Testing is not required for **90 days from a positive test**.

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For any clarification, please contact Nurse Nicole Martindale-Coke, CLTO Lead Nurse Care Coordinator: nmartindalecoke@cltoronto.ca, or Dr. Jesse Ropat, CLTO Health Team Lead: Jesse.ropat@cltoronto.ca