



First Nations and Inuit Health Branch Directive		Healthcare Professional Self-Screening for COVID-19	
Effective	18-August-2020	Applies To	<input type="checkbox"/> Governing Body <input type="checkbox"/> Leadership & Operations <input checked="" type="checkbox"/> Programs & Services <input type="checkbox"/> Client, Family & Community
Version	1.0		
Amended Date	Not Applicable		
Approval Authority	Chief Medical Officer of Public Health, Indigenous Services Canada		
<p>1. PURPOSE</p> <p>As the COVID-19 pandemic progresses, Indigenous Services Canada (ISC) is working with the First Nations Inuit Health Branch (FNIHB) regions and partners to ensure the safety and well-being of First Nations (FN) community members, nurses, and other healthcare professionals (HCPs). Self-screening by HCPs before and during assignments into FN communities is one way to mitigate the introduction of COVID-19 into communities and decrease the burden of illness resulting from the pandemic.</p> <p>2. DIRECTIVE STATEMENT</p> <p>Until further notice, ISC FNIHB requires all employed and contracted HCPs to self-screen for COVID-19 symptoms before and during assignment into First Nations’ communities.</p> <p>3. PROCEDURES</p> <p>HCPs must self-screen for COVID-19 symptoms using the screening tool in Annex A as follows:</p> <ul style="list-style-type: none"> • Before travelling into an FN community: Self-screening must occur no later than twelve (12) hours before the time of departure. If an HCP is positive for any screening criteria, then they cannot report to work, must delay their travel, follow any applicable provincial or territorial public health guidelines, and advise their manager. • During an assignment in an FN community: Self-screening must occur daily. If an HCP is positive for any screening criteria, they cannot report to work, must self-isolate immediately, and advise their manager. <p>NOTE: HCPs who become aware of potential close contact* with a person who is presumptive positive for COVID-19 without wearing personal protective equipment (PPE) should immediately self-isolate and advise their manager.</p> <p>4. SCOPE</p> <p>Until further notice, this Directive applies to all HCPs who are either employed or contacted by ISC FNIHB and working in FN communities.</p> <p>5. ACCOUNTABILITY</p> <p>Chief Medical Officer of Public Health, ISC</p> <p>6. REVISION</p> <p>ISC FNIHB will review this Directive when recommendations from the Public Health Agency of Canada (PHAC) change substantively, or PHAC declares the pandemic as ended. ISC FNIHB will communicate changes to Directive to HCPs.</p> <p>Annex A: Healthcare Professional COVID-19 self-screening tool</p>			

Annex A: Healthcare Professional COVID-19 self-screening tool

This screening tool is for use by all HCPs before and during an assignment into an FN community.

Process

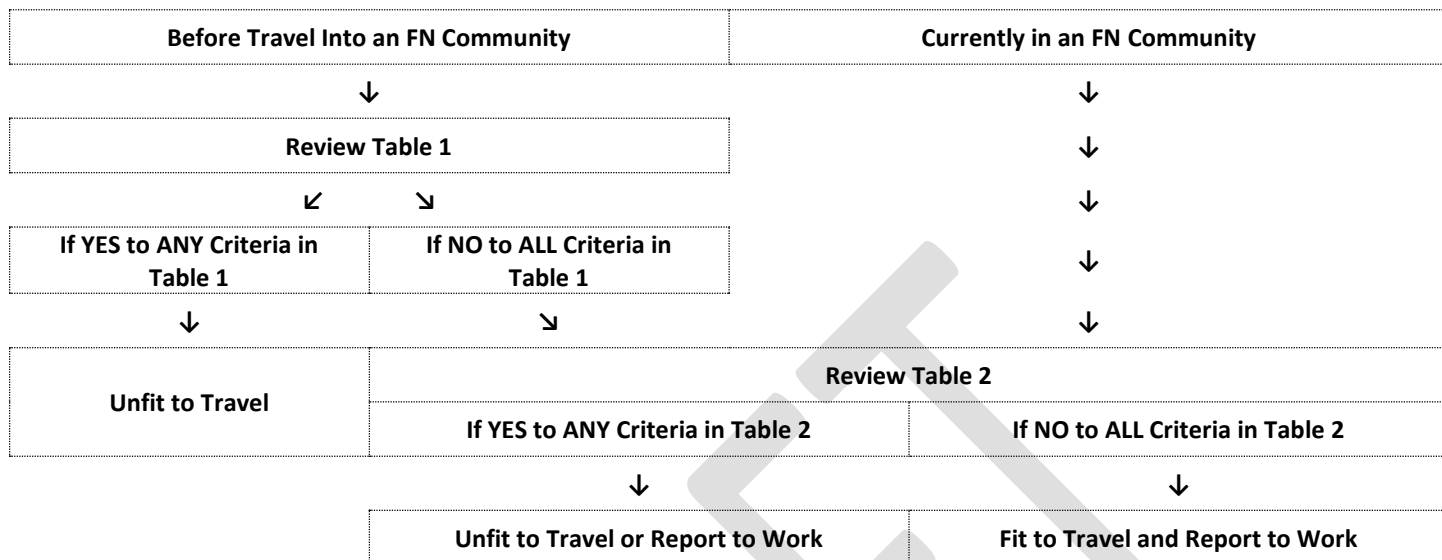


Table 1

YES	NO	Travelled to an affected area (including inside Canada) in the last 14 days
YES	NO	Had close contact* with a person with a respiratory illness who has been travelling to an affected area (including inside Canada) within 14 days before their illness onset
YES	NO	Participated in a mass gathering identified as a source of exposure (e.g. conference)
YES	NO	Had laboratory exposure to biological material (e.g. primary clinical specimens, virus culture isolates) known to contain COVID-19
YES	NO	Had close contact with a confirmed case of COVID-19 or lived in or worked in a closed facility known to be experiencing an outbreak of COVID-19 (e.g. long-term care facility)

Table 2

YES	NO	Fever > 38°C or feeling feverish or shakes or chills
YES	NO	Cough
YES	NO	Shortness of breath
YES	NO	Other symptoms such as fatigue, sore throat, headache, runny nose, muscle aches, decreased appetite, abdominal pain, diarrhea, nausea and loss of smell or taste

* A close contact is defined as a person who provided care for the patient, including healthcare workers, family members or other caregivers, or who had other similar close physical contact or who lived with or otherwise had prolonged close contact with a probable or confirmed case while the case was ill.