

From: Haralds, Dave
To: Ambrus, Tim LBR:IN; Ashpole, Laraine LBR:EX; Booth, Alex LBR:EX; Borba, Brenda LBR:EX; Bressette, John LBR:EX; Buljevic, Liana LBR:IN; Burt, Tammy LBR:EX; Clucas, Win LBR:EX; Davies, Brad LBR:EX; Downton, Terri LBR:EX; Engbrecht, Allison LBR:EX; Finley, Patricia LBR:EX; Forbes, Willa LBR:EX; Fournier, Kim LBR:EX; Friesen, Felisa LBR:EX; Gill, Aaron LBR:EX; Grewal, Monica LBR:EX; Haralds, Dave LBR:EX; Henry, Ken LBR:EX; Hodgins, Steve LBR:EX; Irving, Kaitlin LBR:EX; Jobb, Daniel; Jones, Wendy LBR:EX; Kierstead, Robin LBR:EX; Kilcullen, Madeleine LBR:EX; Klein, Gary LBR:EX; XT:LeBourdais, Courtney LBR:IN; XT:Leung, Ivan LBR:EX; Mellquist-Young, Jessica LBR:EX; Morita, Frank LBR:EX; Nordling, Alan LBR:EX; Nordquist, Cheryl LBR:EX; Oh, Joon; Peters, Denise LBR:EX; Roberts, Rita LBR:EX; Sam, Megan LBR:EX; Steele, Karen LBR:EX; Wong, Caleb LBR:EX; Woodward, Deidre LBR:EX; Yen, Jordan LBR:EX; Yeung, Agnes LBR:EX
Cc: Hughes, Trevor LBR:EX; Leduc, Danine LBR:EX
Subject: EAO Friday Check In - April 24
Date: April 24, 2020 11:44:23 AM
Attachments: re COVID-19, Schedule 1 of the Workers Compensation Act .pdf
Introduction of email channel across Claims.pdf
Importance: High

Good Day Everyone,
s.22

Back to focusing on issues at the EAO....there is a lot of changes happening in the entire compensation system as a result of COVID-19. As you will see, this week's check in is quite lengthy, but it contains updates for everyone. Please take the necessary time to review and make it through to the end. Keeping up-to-date is challenging, but absolutely critical so we can all continue to survive these unusual times. Without further ado, here are the updates this week:

Day of Mourning – April 28:

Like everything else at this time, the day of mourning in-person ceremonies have been cancelled. Here is [link](#) to a few stories and thoughts on the WSN network. The post also contained the following information from WorkSafeBC: *"The Day of Mourning honours the memory of the workers we have lost, and recognizes the grief of their families and co-workers. It's also a time to acknowledge the way we all work toward achieving a British Columbia free from workplace injury, disease, and death. This year, we will be honouring the day in a different way. We will be sharing a commemorative video and encouraging a moment of silence at 10 a.m. on April 28 to remember the 140 B.C. workers who died last year from a workplace injury or disease."*

Schedule 1 – COVID-19:

On Monday, WorkSafeBC's BOD decided to move forward with an expedited process of adding COVID-19 (or potentially more broadly coronaviruses or respiratory communicable diseases depending on the review) to Schedule 1 (formerly Schedule B), **see the attached notice**. Because Schedule 1 can only be revised by BOD-approved regulation, the Regulation must be deposited with the Office of the Registrar of Regulations, and any change is only effective 90 days after the regulation is deposited with the Office. Generally this process can take at least 18-24 months. The BOD has requested the PRRD expedite the process due to the current pandemic. The PRRD anticipates the expedited process will take about 6 months. We will continue to keep you updated as this matter develops.

COVID-19 Claims Data by Industry:

WorkSafeBC has posted information on COVID-19 claims data by industry on WorkSafeBC.com at the following link: <https://www.worksafebc.com/en/about-us/covid-19-updates/claims/covid-19-claims-by-industry-sector>. The plan is for this information to be updated every Monday going forward.

WCAT Electronic Correspondence:

Stating next week, WCAT will be sending all of its correspondence out electronically to the EAO general e-mail box (cao@cao-bc.org). As with other electronic correspondence (i.e. RD portal), the CSR's will be monitoring EAO's e-mail box and uploading all incoming WCAT correspondence. This initiative will reduce the amount of physical paper mail that we receive at each office. Be advised that this is a one way electronic transaction for outgoing WCAT correspondence, there is no ability to reply back to WCAT with this link. All incoming correspondence to WCAT will continue to be welcomed via e-mail at appeals@wcat.bc.ca or via fax at 604-664-7898.

WorkSafeBC Claims Department Introduces E-mail:

Beldon Wong, Director, Compensation Practice & Quality, forwarded me information about the Claims department's

initiative to expand the use of e-mail, **see the attached correspondence**. For those of us that have been around for a while, this is a monumental shift for the Claims department. As you will note in the correspondence, it appears that authorization for the use of e-mail on claims issues starts with the “worker providing their written consent”. I have send reply back to Beldon asking for clarification, if the worker does not provided their written consent, does this limit the employers and advisers ability to communicate with the Claims department via e-mail. Beldon is bringing this issues back to their committee, I will update as soon as I received a response.

Adviser Call Minutes:

Here are the [minutes](#) from the Adviser Conference call on April 15.

EAO Covid-19 SharePoint Resources:

Our EAO [Covid-19 SharePoint Site](#) is your one stop shop for everything Covid-19 related that you may need to assist your clients. We recommend you review these documents regularly. On our EAO SharePoint we have added the following links to the documents, “[Industry, Associations, Business Links](#),” and “[WorkSafeBC Links](#).” We have also added the following resource materials:

- [MD Guidelines and ACEOM](#)
- [Practice Directive: #C4-1 — Adjudication of Contagious Occupational Diseases](#)
- Banner on the [WorkSafeBC website](#) - has the current and up to date links from WorkSafeBC.

Please continue to let your Regional Manager know of additional Covid-19 resources as you become aware of them.

New Contact Information For Prohibited Action Team at WorkSafeBC

As of April 15, the “Discrimination (SM)” at discrimdesk@worksafebc.com will be replaced with the “Prohibited Action (SM)” at prohibitedaction@worksafebc.com.

Publications received from WorkSafeBC this week:

- Health and Safety Enews – [link](#)
- Recent work-related incidents reported to WSBC – [link](#)

EAO COVID-19 Webinars:

We have just completed 7 of our 8 scheduled “Refusal of Unsafe Work” quick hit webinars. Our last webinar is scheduled for April 29. There has been an huge response and demand for these webinars and for this information, very timely. We have also received an overwhelmingly amount of positive feedback from clients attending these webinar, great job to all those staff involved! This was a new endeavor by the EAO and it has been a huge success! We are currently working on the logistics for recording the webinar and making it available from our website, this will be another first for the EAO! One of our clients reached out to Kaitlin after participating and provided the following feedback:

“I received a call from a client that had attended Steve’s webinar yesterday. He reported that he found the Webinar to be very informative, even as a safety professional. He had also registered a few members of his HR team and JHSC for the webinar - they too indicated that they found it to be very helpful. He looks forward to attending any additional Covid webinars that we come up with.”

Next Up – COVID-19 Claims Webinar:

Kim, Frank, Jessica, and Dan are currently working on a new webinar to help employers navigate claim issues in light of the pandemic. This webinar will have three adviser panelists and a host to act as moderator. Pre-determined questions will be used to start the webinar. Questions will then be invited from participants. Kim, Frank, Jessica and Dan are generating a list of anticipated questions and answers (including FAQs on WorkSafeBC’s website) to have at the ready. Our hope is to run this webinar two or three times and then place a recording of it on our website. If you have any questions, please contact your RM.

I am extremely proud of our EAO team! Even though we face difficult times, we rise to the challenge and continue to provide exceptional service to our clients, to our co-workers, and to our team!

Stay safe and enjoy the weekend!

Dave Haralds

Executive Director

Employers’ Advisers Office | Ministry of Labour

Direct: 604-713-0301 | Toll Free : 1-800-925-2233 | Fax : 1-855-664-7993

Website: <http://www.gov.bc.ca/employersadvisers>

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Withheld pursuant to/removed as

s.14

From: Haralds, Dave
To: Hourston, Sveah LBR:EX
Subject: FW: PPCC April 29 combined materials
Date: May 29, 2020 2:13:27 PM
Attachments: [image001.gif](#)
[Combined package April 29 2020.pdf](#)

Dave Haralds

Executive Director

Employers' Advisers Office | Ministry of Labour

Direct: 604-713-0301 | Toll Free : 1-800-925-2233 | Fax : 1-855-664-7993

Website: <http://www.gov.bc.ca/employersadvisers>

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From: Fournier, Kim

Sent: Wednesday, April 29, 2020 8:45 AM

To: Haralds, Dave

Subject: FW: PPCC April 29 combined materials

Hi Dave,

s.13

My two cents.

Have a great meeting, and I look forward to your update on these issues.

Thanks,

Kim

From: Policy and Regulation Division (SM)

Sent: Friday, April 24, 2020 4:52 PM

Cc: Alviz, Candice (Leung) <Candice.Alviz@worksafebc.com>; Austin, Pamela <Pamela.Austin@worksafebc.com>; Baily, Jim <James.Baily@worksafebc.com>; Brocklehurst, Tom <Tom.Brocklehurst@worksafebc.com>; Chan Soo, Deborah <Deborah.ChanSoo@worksafebc.com>; Chanyungco, Paula <Paula.Chanyungco@worksafebc.com>; Chua, Percy (Prescillia) <percy.chua@worksafebc.com>; Clarkson, Sheena <Sheena.Clarkson@worksafebc.com>; Conway (Cleathero), Lesley <Lesley.Conway@worksafebc.com>; Dougan, Carol <Carol.Dougan@worksafebc.com>; Duplantis, Willa <Willa.Duplantis@worksafebc.com>; Fitzgerald, Aisling <Aisling.Fitzgerald@worksafebc.com>; Fournier, Kim <Kim.Fournier@eao-bc.org>; Gatzke, Nicolette <nicolette.gatzke@worksafebc.com>; Guiton, Lori <Lori.Guiton@worksafebc.com>; Heinrich, Erika <Erika.Heinrich@worksafebc.com>; Hii, Helen <Helen.Hii@worksafebc.com>;

Howarth, Alan <Alan.Howarth@worksafebc.com>; Hynes, Susan <Susan.Hynes@worksafebc.com>; Jalali, Negar <Negar.Jalali@worksafebc.com>; Jimale, Zahra <Zahra.Jimale@worksafebc.com>; Johnson, Al <Al.Johnson@worksafebc.com>; Kim, Louise <Louise.Kim@worksafebc.com>; Lepik, Elizabeth <Elizabeth.Lepik@worksafebc.com>; Levesque, Mark <Mark.Levesque@worksafebc.com>; Ly, Tom <Tom.Ly@worksafebc.com>; MacDonald, Peggy <Peggy.MacDonald@worksafebc.com>; Mallari, Eliza <Eliza.Mallari@worksafebc.com>; McCarthy, Tim <Tim.McCarthy@worksafebc.com>; Morrison, David <David.Morrison@wao-bc.org>; Murata, Chantal <Chantal.Murata@worksafebc.com>; Ng, Judy <Judy.Ng@worksafebc.com>; Nguyen, Linda <Linda.Nguyen@worksafebc.com>; Quirke, Billy <Billy.Quirke@worksafebc.com>; Rekart, Josephine <Josephine.Rekart@worksafebc.com>; Roy, Chantelle <Chantelle.Roy@worksafebc.com>; Teo, Mark <Mark.Teo@worksafebc.com>; Vojnic, Valerie <Valerie.Vojnic@worksafebc.com>; Vukelic, Michelle <Michelle.Vukelic@worksafebc.com>; Weerapura, Deepani <Deepani.Weerapura@worksafebc.com>; Wendel (Stephen), Christina <Christina.Wendel@worksafebc.com>; White, Brenda <Brenda.White@worksafebc.com>

Subject: FW: PPCC April 29 combined materials

Hi everyone,

My apologies, the combined package did not attach correctly in my previous email.

Thank you,

Amy Shafer

Policy, Regulation and Research Division | 604.244.2107

WorkSafeBC

6951 Westminster Hwy, Richmond, BC

worksafebc.com



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From: Policy and Regulation Division (SM)

Sent: Friday, April 24, 2020 4:15 PM

Cc: Alviz, Candice (Leung) <Candice.Alviz@worksafebc.com>; Austin, Pamela <Pamela.Austin@worksafebc.com>; Baily, Jim <James.Baily@worksafebc.com>; Brocklehurst, Tom <Tom.Brocklehurst@worksafebc.com>; Chan Soo, Deborah <Deborah.ChanSoo@worksafebc.com>; Chanyungco, Paula <Paula.Chanyungco@worksafebc.com>; Chua, Percy (Prescillia) <percy.chua@worksafebc.com>; Clarkson, Sheena <Sheena.Clarkson@worksafebc.com>; Conway (Cleathero), Lesley <Lesley.Conway@worksafebc.com>; Dougan, Carol <Carol.Dougan@worksafebc.com>; Duplantis, Willa <Willa.Duplantis@worksafebc.com>; Fitzgerald, Aisling <Aisling.Fitzgerald@worksafebc.com>; Guiton, Lori <Lori.Guiton@worksafebc.com>; Hii, Helen <Helen.Hii@worksafebc.com>; Howarth, Alan <Alan.Howarth@worksafebc.com>; Jalali, Negar <Negar.Jalali@worksafebc.com>; Kim, Louise <Louise.Kim@worksafebc.com>; Lepik, Elizabeth <Elizabeth.Lepik@worksafebc.com>; Levesque, Mark <Mark.Levesque@worksafebc.com>; MacDonald, Peggy <Peggy.MacDonald@worksafebc.com>; Mallari, Eliza <Eliza.Mallari@worksafebc.com>; McCarthy, Tim <Tim.McCarthy@worksafebc.com>; Morrison, David <David.Morrison@wao-bc.org>; Ng, Judy <Judy.Ng@worksafebc.com>; Murata, Chantal <Chantal.Murata@worksafebc.com>; Ng, Judy <Judy.Ng@worksafebc.com>; Nguyen, Linda <Linda.Nguyen@worksafebc.com>; Quirke, Billy <Billy.Quirke@worksafebc.com>; Rekart, Josephine <Josephine.Rekart@worksafebc.com>; Roy, Chantelle <Chantelle.Roy@worksafebc.com>; Teo, Mark

<Mark.Teo@worksafebc.com>; Vojnic, Valerie <Valerie.Vojnic@worksafebc.com>; Vukelic, Michelle
<Michelle.Vukelic@worksafebc.com>; Weerapura, Deepani
<Deepani.Weerapura@worksafebc.com>; Wendel (Stephen), Christina
<Christina.Wendel@worksafebc.com>; White, Brenda <Brenda.White@worksafebc.com>

Subject: PPCC April 29 combined materials

Hello PPCC members,

Please find the combined package for the Thursday, April 29th PPCC meeting. Please note, this meeting is scheduled to begin at **9:30am**.

Materials will be sent in a separate email due to sizing.

This meeting will be held via teleconference. Please use the following instructions:

Please dial: 604-899-2339 or Toll Free 1-877-385-4099

Participant code: 8307544

Thank you in advance,

Amy Shafer

Policy, Regulation and Research Division | 604.244.2107

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From: [Haralds, Dave](#)
To: [Hourston, Sveah LBR:EX](#)
Subject: FW: PPCC: materials for Schedule 1 discussion Apr 29 2020 PPCC
Date: May 29, 2020 2:10:20 PM
Attachments: [PPPC.COVID19.Review.forApr29.2020.pdf](#)

Dave Haralds

Executive Director

Employers' Advisers Office | Ministry of Labour

Direct: 604-713-0301 | Toll Free : 1-800-925-2233 | Fax : 1-855-664-7993

Website: <http://www.gov.bc.ca/employersadvisers>

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From: Weerapura, Deepani

Sent: Tuesday, April 28, 2020 6:26 PM

To: Brad Buck - BC Public Service Agency ; Dave Earle - BC Trucking ; Haralds, Dave ; Dave Keen ; Morrison, David ; Doug Alley ; Kevin Love - Community Legal Assistance Society ; Fournier, Kim ; Larry Stoffman ; Corwin, Lucas ; Lucia Salazar ; Megan Scott ; Merrill O'Donnell ; Sam Chauhan - City of Surrey ; Sheila Moir

Cc: Guiton, Lori ; Kim, Louise ; Duplantis, Willa ; Clarkson, Sheena ; Vojnic, Valerie ; Shafer, Amy

Subject: PPCC: materials for Schedule 1 discussion Apr 29 2020 PPCC

Hello members,

Please find attached a presentation by Drs. Olivia Sampson and Geetha Raghukumar for the Schedule 1 agenda item at PPCC tomorrow.

Look forward to speaking with you tomorrow.

Deepani Weerapura

Senior Manager, Policy, Regulation and Research Division

Deepani.weerapura@WorkSafeBC.com

604-276-5165

WorkSafeBC

COVID-19 Pandemic and Public Health Management

COVID-19 Overview

Information current up to April 21, 2020

ODS prepared and reviewed by

Dr. Geetha Raghukumar MBBS, DLSHTM, MSc, CIC, CCFP, FRCPC

Dr. Olivia Sampson MD, CCFP, MPH, RCPSC

Pandemic, Epidemic, Outbreak in Facility

- **Pandemic:** an outbreak of a disease that causes serious illness or death among a high proportion of the population ***in multiple countries or continents***.
 - Pandemics are global events caused by bacteria and viruses that are highly contagious in human populations. It is the most widespread state of a disease.
 - Human populations have been affected by pandemics since ancient times. These include widespread outbreaks of plague, cholera, influenza and, more recently, H1N1 (influenza), and COVID-19.
- **Epidemic:** An increase in the number of cases of a disease, above what is usual for ***a certain area (geographical region)***. This increase is often sudden.
- **Outbreak (in a facility):** An increase in the number of cases of a disease, above what is usual ***for a certain area*** (e.g. long term care facility or specific floor of a long term care facility)

COVID 19 (the clinical disease)

Coronaviruses are a large family of viruses.

- Some cause illness in people and others cause illness in animals.
- Common human coronaviruses (4 known so far) are typically associated with mild illnesses, similar to the common cold.

Pathogen: Beta Coronavirus SARS-CoV-2 (*it causes COVID-19*)

= a new disease

- Spread from animals to humans causing a severe illness in humans.
- Other coronaviruses that spread from animals to humans and caused severe illness in humans: SARS (2002), and MERS COV (Middle Eastern Respiratory Syndrome in 2012).
- COVID19 is same subgenus as and more closely related to SARS (2002)- hence called SARS-CoV-2

Transmission/Incubation/Contagious Period

Transmission: contact and droplet, fomites

- **Close contact:** < 2 meters, on-going close contact, over 15 minutes (at once or cumulatively) (BCCDC)
- **Fomites/Environment:** Susceptible to soap/water, alcohol hand rub, hospital-grade EPA registered disinfectants
- **Incubation:** 2-14 days (average 5 days)
- **Infectious Period:** 48 hours prior to onset of symptoms to 10 days after onset of symptoms
- **Testing:** nasopharyngeal swab for active disease; or bronchial wash/lavage (lower respiratory sample)

What is Droplet or Contact Transmission?



- COVID 19 is spread by droplets
 - Very similar way that influenza (the flu) spreads
 - Droplets are small particles that can fall on surfaces or another person (face for example) within 2 meters from an individual if they sneeze or cough
 - Particles are larger and therefore do not remain suspended in air
 - Cannot enter the skin BUT if one touches one's face it can enter via nose, mouth, eyes
- ☐ Droplets can be aerosolized during airway procedures: eg intubation, bronchoscopy etc

Symptoms

Clinical symptoms of COVID-19 may be mild or severe.

- 80% - mild to moderate disease
- 13.8% had severe symptoms
- 6.1% had life-threatening

Mild symptoms may include some or all of the following: fever, chills, cough, shortness of breath, sore throat, odynophagia, rhinorrhea, nasal congestion, loss of sense of smell, headache, muscle aches, fatigue, or loss of appetite. (3)

More severe symptoms (hospitalized or ICU) may include any of the above as well as fever, shortness of breath, difficulty breathing and/or chest pain.

- Pneumonia
- ICU +/- ventilation: respiratory failure, shock, multi-organ failure
- Death

COVID Cases and Contacts

7

BCCDC Interim Guidance – COVID-19



Interim Guidance: Public Health Management of cases and contacts associated with novel coronavirus (COVID-19) in the community

April 17, 2020

CONTEXT

The British Columbia Centre for Disease Control (BCCDC) has adapted the interim guidance from the Public Health Agency of Canada (PHAC) for Regional Health Authorities (RHA) for public health management of human illness caused by the novel coronavirus (COVID-19).

This guidance is based on current available scientific evidence and expert opinion and is subject to change as new information on the clinical spectrum, transmissibility and epidemiology becomes available. This guidance builds upon relevant Canadian guidance developed for the

Reference: http://www.bccdc.ca/resource-gallery/Documents/Guidelines%20and%20Forms/Guidelines%20and%20Manuals/Epid/CD%20Manual/Chapter%201%20-%20CDC/2019-nCoV-Interim_Guidelines.pdf

Interim National Case Definition (PHAC)



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[Canada.ca](#) > [Health](#) > [Diseases and conditions](#) > [Coronavirus disease \(COVID-19\)](#) > [For health professionals](#)

Interim national case definition: Coronavirus disease (COVID-19)

Last Updated: April 2, 2020

On this page

- [Preamble](#)
- [National surveillance case definitions for COVID-19](#)
- [Exposure criteria](#)
- [Mechanism of reporting](#)

Reference:

<https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/health-professionals/national-case-definition.html>

Cases – National Case Definition

- **Confirmed Case:**
 - COVID test done and positive
- **Clinical Cases (suspect or probable):**
 - COVID –like symptoms and pattern of incubation and disease presentation



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Suspect case - National Case Definition

A person with symptoms that include two or more of:

- Fever (signs of fever)
- Cough (new or exacerbated chronic)
- Sore throat
- Runny nose
- Headache

And

- Meets the exposure criteria

Or

- Had close contact with a probable case of COVID-19

Footnote: 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 close prolonged contact with a probable or confirmed case while the case was ill.



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Probable Case - National Case Definition

1) A person (who has had a laboratory test):

- with fever (over 38 degrees Celsius) or new onset of (or exacerbation of chronic) cough

And

- who meets the COVID-19 exposure criteria and in whom a laboratory diagnosis of COVID-19 is inconclusive.

Or

2) A person (who has not had a laboratory test):

- With fever (over 38 degrees Celsius) or new onset of (or exacerbation of chronic) cough

And

- 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, prison)



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Exposure Criteria (Apr2/20)

In the 14 days before onset of illness, a person who:

- Traveled to an affected area (including inside Canada)

Or

- Had close contact with a person with acute respiratory illness who traveled to an affected area (including inside Canada) within 14 days prior to their onset of illness

Or

- Participated in a mass gathering identified as a source of exposure (e.g., conference)*

Or

- Had laboratory exposure to biological material (e.g. primary clinical specimens, virus culture isolates) known to contain COVID-19.

*Other exposure scenarios not specifically mentioned here may arise and may be considered at jurisdictional discretion.



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What is a high-risk Contact?

A high-risk close contact is defined as a person who:

- **provided care for the case**, including healthcare workers, family members or other caregivers, or who had other similar close physical contact (e.g., intimate partner) without consistent and appropriate use of personal protective equipment

OR

- **lived with or otherwise had close face to face contact** (within 2 metres) with a probable or confirmed case for more than 15 minutes (may be cumulative, i.e., multiple interactions)

OR

- **had direct contact with infectious body fluids of a probable or confirmed case** (e.g., was coughed or sneezed on) while not wearing recommended PPE

OR

- **has been identified by the local MHO (public health) as a possible contact**

Cases (with or without a test)

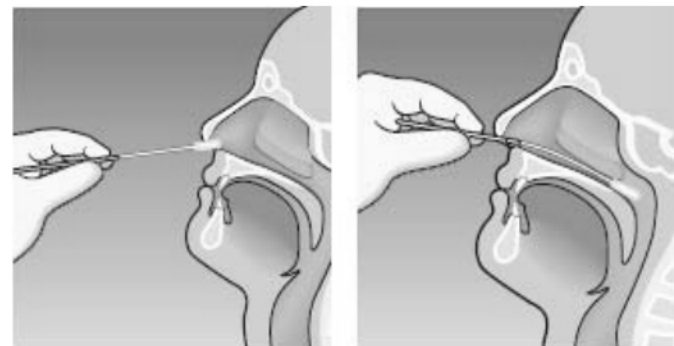
Expanded Testing (mid April 2020)

- Testing is recommended for patients with cold, influenza or COVID-19-like symptoms, however mild.
- Symptoms may include: fever, chills, cough, shortness of breath, sore throat, odynophagia (painful swallowing), rhinorrhea (runny nose), nasal congestion (stuffy nose), loss of sense of smell, headache, muscle aches, fatigue, or loss of appetite.

Who does not need to be tested for COVID-19?

If an individual has no symptoms, even if they are a contact of a confirmed case or a returning traveler and self-isolating at home, they do not require a test.

- Individuals with symptoms can find a collection centre where they can be assessed and tested by:
- Using the [B.C. COVID-19 Collection Centre finder](#)
- [BC COVID-19 Self-Assessment Tool](#)



Who follows up on positive COVID19 tests?

- Public Health will follow up on all positive tests
- Public health will follow up on all contacts (e.g. people who were in close contact (less than 2 meters) and for 15 minutes) and inform them that they were in contact with someone who tested positive for COVID19, and are then informed to self-isolate for 14 days AND to monitor themselves for symptoms.
- These contacts are now informed to go for testing IF they develop symptoms
 - *Note: prior to expanded testing, contacts would be informed to remain at home even if symptoms develop, but to call 811 for guidance and to seek medical care if their symptoms became worse.*

Clinical COVID



Coronavirus COVID-19
BC Centre for Disease Control | BC Ministry of Health

HOW YOU CAN SLOW THE SPREAD OF COVID-19

Take care of others by taking care of yourself.
Wash your hands, don't touch your face, and stay home if you are sick.

Stay at Home and Physically Distance
Stay at home whenever you can. Maintain 2 meters distance from those outside of your household.

Outpatient Management of Suspected and Confirmed COVID-19 Cases
April 14, 2020

Most patients with confirmed COVID-19 will have mild to moderate symptoms (e.g., cough, sore throat, and rhinorrhea) and

(Clinical COVID) Patients who have symptoms compatible with COVID-19 and are not tested for COVID must self-isolate at home until:

- At least 10 days have passed since the onset of symptoms; AND
- Fever has resolved without the use of fever-reducing medication; AND
- Symptoms (respiratory, gastrointestinal, and systemic) have improved.

COVID symptoms: negative and positive swab test

For patients who have symptoms compatible with COVID-19 and/or have a risk of COVID-19 exposure are eligible for testing according to BCCDC criteria

People with a positive COVID test, must self-isolate at home until:

- At least 10 days have passed since the onset of symptoms; AND
- Fever has resolved without the use of fever-reducing medication; AND
- Symptoms (respiratory, gastrointestinal, and systemic) have improved.

People with a negative COVID test, must self-isolate at home until:

- Fever has resolved without the use of fever-reducing medication; AND
- Symptoms (respiratory, gastrointestinal, and systemic) have improved.

Reference: http://www.bccdc.ca/Health-Professionals-Site/Documents/BC_COVID_outpatient_mgmt.pdf

Recovery & Ending Isolation

Recovery and ending isolation

You are required to stay home and isolate for a minimum of 10 days from the onset of any symptoms. You may return to your regular activities if:

- *At least 10 days have passed since the start of your symptoms, AND*
- *Your fever is gone without the use of fever-reducing medications (e.g. Tylenol, ibuprofen), AND*
- *You are feeling better (e.g. improvement in cough, runny nose, sore throat, nausea, vomiting, diarrhea, fatigue).*
- Coughing may persist for several weeks, so coughing alone does not require you to continue to isolate. If you are experiencing your usual symptoms of seasonal allergies, you do not need to self-isolate.
- Sometimes people with COVID have mild illness, but their symptoms may suddenly worsen in a few days. If your symptoms worsen or you become short of breath, call your family physician or nurse practitioner for immediate medical attention. If you are unable to reach your regular care provider, seek care in a COVID-19 Assessment and Treatment Centre, Urgent & Primary Care Centre (UPCC) or Emergency Department.



Ministry of
Health



BC Centre for Disease Control

**If you have fever, a new cough, or are
having difficulty breathing, call 8-1-1.**



Current ODS-Medical Advisor claim review process

Step 1

- Claim comes to ODS
- Case Managers obtain worker history and medical records if available

Step 2

- COVID swab test positive, clear exposure criteria met – CM adjudicates
- COVID swab test negative/ no test and/or exposure unclear from history - Team Meeting*
- COVID swab test positive and exposure unclear from history - Team Meeting
- No confirmed exposure at work – Team Meeting

Step 3

- Team discusses clinical presentation and reviews exposure, and exposure criteria laid out by the national and provincial expert guidelines on COVID19
- MAs provide opinion on whether clinical presentation meets BCCDC and Public Health Agency of Canada (PHAC) National Case Definition for suspect/ probable or confirmed case of COVID-19

References/Sources

1. BCCDC Interim Guidance http://www.bccdc.ca/resource-gallery/Documents/Guidelines%20and%20Forms/Guidelines%20and%20Manuals/Epid/CD%20Manual/Chapter%201%20-%20CDC/2019-nCoV-Interim_Guidelines.pdf
2. Interim National Case Definition <https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/health-professionals/national-case-definition.html>
3. Criteria for lab testing (BCCDC April 23) http://www.bccdc.ca/Health-Professionals-Site/Documents/BCCDC_PHL_Updated_nCoV_Lab_Guidance.pdf
4. Outpatient Management COVID19 (BCCDC April 14) http://www.bccdc.ca/Health-Professionals-Site/Documents/BC_COVID_outpatient_mgmt.pdf
5. How to Isolate (BCCDC April 15) <http://www.bccdc.ca/Health-Info-Site/Documents/Self-isolation.pdf>

Thank you
and Questions