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1. POLICY STATEMENT
	1. Community Living Glengarry (“CLG” or the “Employer”) is committed to the health and safety of its employees, staff, volunteers, contractors;, students, people supported, and visitors. This Antigen Point of Care Testing Policy (the “Policy”) has been developed and implemented in accordance with provincial legislation and government directives, in particular, the Letters of Instruction (the “Instructions”) and the Guidelines issued by the Chief Medical Officer of Ontario (“CMOH”).
	2. The objective of this policy is to prevent and reduce the spread of COVID-19 infection by reducing the rate of exposure to and transmission of COVID-19 to Employees (as defined herein), clients, residents, and visitors. Antigen Point of Care Testing (surveillance swabbing), as part of an enhanced COVID-19 screening process, for those who are not fully vaccinated, is an important infection prevention and control measure to meet the objective of this Policy.
	3. CLG will offer antigen point of care testing to its unvaccinated employees, partially vaccinated employees, and people supported living in congregate care (group homes). All stakeholders are expected to comply with this policy and procedures.
	4. This Policy is subject to the relevant requirements of the Collective Agreement (if/as applicable) and will be interpreted and applied in accordance with the Ontario *Employment Standards Act, 2000* (the “***ESA***”), Ontario *Human Rights Code* (the “***OHRC***”) and the Ontario *Occupational Health and Safety Act* (the “***OHSA***”).
	5. This Policy will be applied in accordance and in conjunction with all relevant policies, including but not limited to:
		1. Occupational Health & Safety, Personal Information Protection and Electronic Documents (PIPEDA), Confidentiality of Information, Personal Health Information Protection (PHIPA), Return to Work;
		2. the Instructions issued by the CMOH under the authority of subsection 2(2.1) of Schedule 1 of O. Reg. 364/20: Rules for Areas at Step 3 and at the Roadmap Exit Step under the *Reopening Ontario (A Flexible Response to COVID-19) Act, 2020* (the “***ROA*”**);
		3. the **Guidelines** [COVID-19: Vaccination Policy — implementation guidelines issued by the Ministry of Children, Community and Social Services | ontario.ca](https://www.ontario.ca/page/covid-19-vaccination-policy-implementation-guidelines-issued-ministry-children-community-and?_ga=2.186602985.1312193224.1632784673-911017761.1630686635); and

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* + 1. all [applicable orders, directives, memorandums, and other resources](https://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/dir_mem_res.aspx) from the Ministry of Children, Community and Social Services (“**MCCSS”),** the Ministry of Health (“**MOH**”) and/or the Ministry of Long-Term Care (“**MLTC**”), as implemented and/or amended from time to time.
	1. This Policy comes into effect as of October 7, 2021.
1. **BACKGROUND**
	1. **COVID-19** (coronavirus disease) is defined as the SARS-CoV-2 virus (severe acute respiratory syndrome coronavirus 2). As COVID-19 has spread, mutations have occurred in the virus’s genetic code, resulting in several new variants. In this Policy, COVID-19 refers to both the initial COVID-19 virus and all of its mutations/variants. Should the name of this disease and/or virus responsible change due to World Health Organization (“**WHO**”) naming conventions, this Policy shall continue to apply, with appropriate amendments as required.
	2. COVID-19 is primarily transmitted by droplets spread through coughing and sneezing and may also be transmitted through direct or indirect contact with contaminated respiratory secretions. COVID-19’s incubation period is usually five to seven days but can range from one to fourteen days. Individuals may spread COVID-19 within fourteen days of contracting the virus and may develop symptoms any time within those fourteen days. Although some people may not develop symptoms (i.e., are asymptomatic), they may still spread the virus.
	3. Common COVID-19 symptoms include the sudden onset of a high fever, chills, sore throat, fatigue, and a dry cough. These symptoms may be accompanied by other symptoms such as body aches, loss of taste and smell, and diarrhea. More serious symptoms include difficulty breathing or shortness of breath, chest pain, and loss of speech or movement. In some cases, COVID-19 can be fatal. Up-to-date details regarding the symptoms of COVID-19 can be found in the MOH’s [COVID-19 Reference Document for Symptoms.](https://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/2019_reference_doc_symptoms.pdf)
	4. Antigen point of care testing is anadditional screening method that can help stop the spread of COVID-19 in workplaces and other high-risk settings. Canadian public health authorities have confirmed that antigen point of care testing (also known as rapid antigen testing) is safe, has few side effects, and is an effective screening measure for asymptomatic individuals. Antigen POCT

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is used for screening purposes only and should not be used for symptomatic individuals or individuals with known close contact with a positive COVID-19 case. Current research shows that unvaccinated individuals are at a higher risk of severe COVID-19 symptoms and adverse outcomes than vaccinated individuals. Existing protective measures will remain in effect to prevent exposure of COVID-19. The addition of antigen point of care testing for unvaccinated individuals will serve the objective of this Policy.

* 1. For more detailed information about antigen point of care testing, also known as rapid antigen testing, please see the [COVID-19 Provincial Testing Guidance Update (gov.on.ca)](https://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/2019_testing_guidance.pdf).
1. **DEFINITIONS**
	1. **Employee (or employees, as applicable)** means, for the purposes of this Policy only, all employees, staff, contractors, volunteers, and students, as well as persons who provide services in an Education and Community Partnership program (also together referred to as “**Required Individuals**” herein), where:
		1. **Staff** means a person who works at the home either (i) as an employee, (ii) pursuant to a contract or agreement, or (iii) pursuant to a contract or agreement between the Employer and an employment agency or other third party;
		2. **Volunteer** means a person who is part of an organized volunteer program and does not receive a wage or salary for the services or work provided; and
		3. **Student** means a person working for the Employer as part of a clinical placement requirement of an educational program of a college or university, who does not meet the definition of “**staff**” or “**volunteer**.”
	2. **Essential Visitor** means a person who:
		1. Performs essential services to support the ongoing operation of a service agency, including a contractor (i.e. a Contracted Service Provider, as defined below); and/or
		2. Is considered necessary to maintain the health, wellness and safety, or any applicable legal rights, of a congregate living resident per the *COVID-19 Guidance for MCCSS-funded and*

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*Licensed Congregate Living Settings* [[COVID-19 Guidance for MCCSS-funded and Licensed Congregate Living Settings | (gov.on.ca)](https://www.mcss.gov.on.ca/en/mcss/CongregateCare_Guidelines.aspx)] For the purposes of this Policy, “Essential Visitor” does not include family members.

* 1. **Non-essential Visitor** means any person who is a visitor who does not meet the definition above.
	2. **Contracted Service Provider** means a contractor for services for the operation of the business, as described in 3.2(a).
	3. **Enhanced respiratory precautions** means:
		1. Using a surgical mask and face shield/goggles;
		2. Using a fit-tested N95 mask for aerosolized medications and at an employee’s request;
		3. Using gloves and gown;
		4. Removing all PPE in proper order (discarding or sending for reprocessing, as appropriate), when exiting the room of a Resident with a suspected or confirmed COVID-19 case;
		5. Performing hand hygiene before and after caring for each Resident; and
		6. Donning a new surgical mask and sanitizing face shield and/or goggles when leaving the room of a Resident with a suspected or confirmed COVID-19 case.
	4. **Fully Vaccinated** means having received the full series of a COVID-19 vaccine or combination of COVID-19 vaccines approved by Health Canada, including any booster shots recommended, approved, and/or required from time to time (i.e., two doses of a two-dose vaccine series, or one dose of a single-dose vaccine series); and having received the final dose of the COVID-19 vaccine at least fourteen days ago. To be considered Fully Vaccinated, an employee must also have provided proof of vaccination in accordance with subsection 9.4 of the COVID-19 Vaccination Policy.
	5. **Partially Vaccinated** means having received one dose of a two-dose vaccine series approved by Health Canada. For the purposes of this Policy, Partially Vaccinated individuals are considered not Fully Vaccinated (i.e. unvaccinated) until they meet the criteria to be fully vaccinated.

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* 1. **Home (or homes, as applicable)** means the home(s) managed by and facilities of the Employer.
	2. **Outbreak** means a COVID-19 outbreak confirmed by the Medical Officer of Health or their designate. At a minimum, one laboratory-confirmed case of COVID-19 is required to declare an Outbreak.
	3. **Outbreak Area (or Designated Outbreak Area)** means a specific, confined, geographic area (e.g., unit, home, etc.), as determined at the time of Outbreak. The Outbreak Area can be enlarged during the course of an Outbreak, as required.
	4. **Person Supported or Resident** means a person living in one of the homes managed by the Employer or receiving services from the Employer.
	5. **Registered Nurse in the Extended Class** means a Registered Nurse who has additional education and clinical experience that allows them to practice as a Nurse Practitioner.
	6. **Antigen Point of Care Testing (Rapid Antigen Testing) for COVID-19:** is an antigen test that looks for proteins from the COVID-19 virus. It is used as an enhanced screening tool for asymptomatic individuals with no known exposure to COVID-19. It should NOT be used for diagnosing someone with symptoms of or exposure to COVID-19. Results are usually available within 15-20 minutes. It has higher rates of false negative and false positive results than a PCR test for COVID-19. All positive results need to be followed up with a PCR test to confirm a diagnosis of COVID-19.
	7. **PCR Test (Polymerase Chain Reaction Test):** A test performed to detect genetic material from a specific organism, such as a virus. The test detects the presence of a virus if you are infected at the time of the test. The test could also detect fragments of virus even after you are no longer infected. For COVID-19, a PCR test for viral infection detects the virus or a component of the virus and tells you if you have a current COVID-19 infection. This is done using a swab from your nose or throat, or in some cases a saliva sample. This test would be performed at an assessment/testing centre. For a list of assessment/testing centers, click on this link [COVID-19 Assessment and Testing Centres | EOHU | Public Health](https://eohu.ca/en/covid/covid-19-testing-assessment-centres)

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* 1. **False Negative:** A test result which incorrectly indicates that a particular condition or attribute is absent (e.g., a test indicates someone does not have COVID-19, when in fact they do).
	2. **False Positive:** A test result which incorrectly indicates that a particular condition or attribute is present (e.g., a test indicates someone has COVID-19, when in fact they do not).
1. **SCOPE OF APPLICATION**
	1. This Policy applies to all unvaccinated or partially vaccinated Required Individuals, whether unionized or not, regardless of their role, the frequency with which they attend the Employer’s premises, and the duration of any period of attendance.
	2. The Employer also strongly encourages all visitors and people supported to receive weekly antigen point of care testing.
	3. For ease of reference, this Policy will be posted on ADP, and sent by email. Employees will be advised of any changes to this Policy.
	4. This Policy will be communicated through ADP. All Employees are to acknowledge on ADP that they have read and understood this Policy. This Policy will also be communicated to all stakeholders by being posted on CLG’s website and shared via email. Future updated versions will be shared with all stakeholders.
2. RESPONSIBILITIES – ENSURING POLICY COMPLIANCE
	1. Responsibility of Employer
		1. Ensure compliance with this Policy;
		2. Ensure ample personal protective equipment (“**PPE**”) supplies for all Employees;
		3. Provide rapid antigen point of care testing information and associated forms;
		4. Recommend revisions to this Policy to determine the frequency of antigen testing in accordance with up to date information from Public Health, the CMOH, the MOHLTC, the Ministry of Children, Community and Social Services (MCCSS), and other government and health authorities.

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* + 1. Determine risk and appropriate alternative/precautionary measures in accordance with up-to-date applicable information from Public Health, CMHO, MOH, MLTC, MCCSS, and other government and health authorities.
	1. **Responsibility of Human Resources**
		1. Ensure compliance with this Policy, including by providing each Employee with a reminder of this Policy’s requirements as required and at least monthly and when required;
		2. Provide new Employees with information about this Policy during orientation;
		3. Collect and securely record the applicable antigen testing result information concerning Required Individuals as outlined in this Policy; and
		4. Notify managers regarding those Employees who have not complied with this Policy.
	2. **Responsibility of Managers**
		1. Ensure that the Antigen Point of Care Testing policy is made available to persons supported and their families/substitute decision makers/advocates, essential visitors and contractors;
		2. Ensure all Employees under their supervision comply with this Policy;
		3. Ensure that all Contracted Service Providers receive a copy of this Policy;
		4. Ensure that this Policy is made available to People Supported and their families, substitute decision makers, and advocates when the Policy is implemented;
		5. Ensure that the vaccination status of Contracted Service Providers is confirmed and that all unvaccinated or partially vaccinated Required Individuals comply with this Policy;
		6. Securely record and monitor the vaccination status of Contracted Service Providers in the program/service area for which they are responsible, in accordance with the COVID-19 Vaccination Policy, to ensure compliance with this Policy;
		7. Immediately report any non-compliance by any Required Individuals to the Executive Director.
	3. **Responsibility of Required Individuals**
		1. Notify Human Resources of vaccination status in accordance with the COVID-19 Vaccination Policy and provide supporting documentation confirming same;

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* + 1. Comply with alternative protective measures where vaccination is declined and/or where there is insufficient evidence that they are Fully Vaccinated;
		2. Cooperate with any accommodation procedures where vaccination is declined for protected reasons pursuant to the *OHRC*; and
		3. Read and understand this Policy and direct and concerns, questions, or requests for further information, or training to Human Resources and/or the JHSC.
		4. Unvaccinated and partially vaccinated employees must:
1. undergo weekly antigen testing, a minimum of once each seven (7) days, held on site by a trained member of the JHSC. The unvaccinated and/or partially vaccinated employee can opt to be trained in order to perform supervised self-swabbing, at the designated CLG site.
2. Must follow alternate/precautionary measures, when required, as determined

by CLG (e.g. additional PPE such as: face shield/goggles, isolation gown, etc.)

* 1. **Responsibility of Volunteers, Students**
		1. Unvaccinated and/or partially vaccinated volunteers, students will only be assigned

tasks that restrict their interactions with people supported or employees (e.g. tasks they can do at their personal home, tasks in the community etc.), if there are such tasks available, otherwise they will not be scheduled.

* + 1. Volunteers and students who have a valid medical exemption:
1. Must show proof of antigen testing and a negative result, within the previous 7

days, prior to entering the site;

1. Must follow alternate/precautionary measures as determined by CLG (e.g.

additional PPEs such as: face shield/goggles, isolation gown etc.);

1. Will be restricted from congregate care sites (group homes) where person supported’s health is fragile, placing them at a higher risk of contracting COVID-19.
	1. **Responsibility of Essential Visitors, Contractors**
		1. Unvaccinated Essential Visitors and who are considered necessary to maintain the health wellness and safety, or any applicable legal rights of a person supported and/or provide direct personal care, must:
2. show proof of antigen testing and a negative result, upon screening, from within the previous 7 days, prior to entering the site; and

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1. use alternate/precautionary measures as determined by CLG (e.g. additional

PPEs such as: face shield/goggles).

* + 1. Unvaccinated Essential Visitors who are contractors who maintain the physical properties must use alternate/precautionary measures as determined by CLG (e.g. additional PPEs such as: face shield/goggles).
1. **TRAINING**
	1. Training on conducting the Panbio antigen screening test will be provided to the JHSC members as they will be performing the testing.
	2. Unvaccinated and partially vaccinated Required Individuals will also have the option of taking the training so they can perform supervised self-swabbing.
2. EVALUATION AND REVIEW
	1. The Employer will review this Policy on a regular basis and reserves the right to modify its contents at any time, based on current available public health information and recommendations, any further legislative amendments, operational requirements, recommendations from MCCSS, MOH, MLTC, and the CMOH. The Policy will be reviewed by management and the JHSC.
3. ACKNOWLEDGE SUCCESS
	1. The Executive Director will acknowledge successes regularly using the emails, letters, memos, social media etc.
4. MAKE IMPROVEMENTS
	1. Improvements and necessary revisions will be made to the policy and procedure as new updates/recommendations are made from MCCSS, The Chief Medical Officer of Health and any other governing legislative body.



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Danielle Duranceau

Executive Director

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**1. STANDARD REQUIREMENTS**

* 1. On or before October 11, 2021, Required Individuals who are not fully vaccinated must:
		1. Submit to regular antigen point of care testing for COVID-19 and demonstrate a

negative result, at intervals to be determined by CLG, which must be a minimum once every seven days;

* + 1. Provide verification of the negative test result in a manner determined by CLG that enables CLG to confirm the result at its discretion.
	1. If a Required Individual is being accommodated for a valid medical or *OHRC*-based exemption from vaccination, the Employer shall bear the costs of the antigen point of care testing. For Required Individuals who do not have a valid exemption, but are choosing not to be fully vaccinated against COVID-19, the Required Individual shall bear the costs of antigen point of care testing.
	2. Those being tested must:
		1. Be asymptomatic for COVID-19;
		2. Pass entry screening (monitoring checklists for active and passive screening);
		3. Be working in or entering areas which are **NOT** deemed in outbreak;
		4. Not have been infected with and recovered from COVID-19 within the past ninety (90) days.
1. **EXEMPTIONS TO ANTIGEN POINT OF CARE TESTING**
	1. Emergency/first responders responding to an emergency;
	2. Contracted service providers who require immediate site access due to an urgent health/support issue involving an occupant of a CLG site;
		1. Contracted service providers who require immediate CLG site access due to an urgent facility (e.g., plant, property, equipment) issue that could cause health and safety risks to all occupants if not immediately addressed;
		2. Contracted service providers who may be attending to facility (e.g., plant, property, equipment) issues while the site has been vacated of all other occupants.

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* 1. Contracted support workers who are employed by direct funding to the service recipient from MCCSS, for personal support service, respite service, or other services (e.g. Special Services at Home, Passports).
1. **FREQUENCY**
	* 1. Frequency of testing currently is once a week. Frequency may vary depending on:
			1. An individual’s role;
			2. CLG site or program;
			3. Community risk level for COVID-19; and
			4. Other factors as needed and appropriate.
2. **CONSENT**
3. All individuals undergoing rapid antigen testing must consent prior to being tested.
4. Consent forms will be completed once for each individual.
5. Signed consent forms will be kept on file with the JHSC.
6. Individuals may withdraw their consent, in writing, at any time by notifying the JHSC.
7. **CONDUCTING ANTIGEN POINT OF CARE TESTING**
8. All individuals administering a rapid antigen test must be authorized to do so and have received appropriate training on proper test administration.
9. Prior to opening or using a testing kit, prepare a clean, flat surface and sanitize the surface with an appropriate sanitizer.
10. Prior to conducting a test, persons administering a test must:
	* 1. Don full personal protective equipment (PPE) for droplet contact precautions;
			1. Gloves should be changed after each test is completed;
		2. Check any expiry dates on the testing kit and its components;
		3. Check the testing kit and components to ensure they are not damaged or tampered with.
11. Quality control testing must be done each time a new box of testing kits is opened.
	* 1. Steps for quality control are done following the manufacturer’s directions.
		2. The quality control test results must be documented in the *Antigen Rapid Test*

Results Tracker (Worksheet name: Rapid Test QC Tracker) by the tester;

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* + 1. If quality control swabs pass, proceed to using the kit for testing;
		2. If quality control swabs are invalid, reseal the box, set it aside.
			1. A new box is then opened and quality control testing occurs on the new box.
1. Prior to testing an individual, the tester must record the following information into the Antigen Rapid Test Results Tracker (Worksheet name: Rapid Test Results Tracker):
	* 1. Two identifiers are needed for each person tested;
			1. For staff members, this includes their employee identification number and birthdate;
			2. For people supported, and others, this includes their name and birthdate;
		2. The date of the test;
		3. Result of the test;
2. When the test is complete, the person administering the test must:
	* 1. Read and certify the results in accordance with the test manufacturer’s directions
		2. Convey results in a confidential manner;
		3. Dispose of used devices and materials in a biohazard container;
		4. Remove and dispose of any labels from the testing table;
		5. Record all test results in the *Antigen Rapid Test Results Tracker* and save and store the file securely.
	1. Staff may perform self-swabbing (self-testing) under the supervision of a trained JHSC member. Results will be verified and recorded by the JHSC member.
3. **COMMUNICATION RESULTS**
4. Results of rapid antigen testing must be communicated in a confidential manner and every precaution necessary must be taken to maintain confidentiality of the results.
5. If a test result is negative:
	* 1. Negative results are only applicable if the person being tested has no symptoms and no known exposures;
		2. Persons should be informed that the result is negative, and a false negative result is possible;
		3. Persons are reminded to continue to follow CLG’s infection prevention and control measures and protocols.

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1. If a test result is positive:
	* 1. A positive rapid antigen test is considered a **preliminary positive result**;
		2. Human Resources must be notified of a preliminary positive result for Required Individuals.
		3. Any staff receiving a preliminary positive result must notify their immediate

manager that they have not passed the enhanced COVID-19 screening protocol.

* + 1. Anyone who tests positive is instructed to self-isolate and arrange for PCR

testing at their closest assessment/testing centre. (Cornwall number 343-475-0160; Hawkesbury number 632-1111 ext. 53800) For a listing of assessment/testing centers click on the link [COVID-19 Assessment and Testing Centres | EOHU | Public Health](https://eohu.ca/en/covid/covid-19-testing-assessment-centres);

* + - * 1. They are **NOT** to enter CLG sites;
				2. PCR must be completed within 24 hours;
				3. Person should continue self-isolation until they are contacted by Public Health and provided with further direction.
		1. Any staff member who tests positive before returning to work must have a

confirmed negative PCR test and/or be cleared by their local Public Health Unit. A copy of the negative PCR test results is to be submitted to Human Resources.

1. For people supported who receive a preliminary positive result, the manager of

that program will be notified;

* + 1. The person supported is to self-isolate and program staff and/or manager is to arrange for PCR testing;
		2. As per agency protocol staff will notify the person’s guardian (if applicable) and are to wear full droplet precaution PPE until the individual receives a negative test result and is cleared by the Public Health Unit.
1. The testing area is to be cleaned and disinfected by the person conducting the test between individuals.
2. **DOCUMENTATION**
3. The JHSC is accountable for maintaining and updating the Antigen Rapid Test Results Tracker Sheet.

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| **SECTION**Health & Safety | **SUBJECT**Antigen Point of Care Testing Procedures 2021 | **PAGE** 5 of 5**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****ADOPTED: DAY MONTH YEAR** 07 10 2021 |
| P:\10 - HEALTH & SAFETY\Health & Safety, Antigen Point of Care Testing Policy 2021.docx | **REVISED:**  |  |

**RESOURCES**

***COVID-19***

* [Government of Canada – Coronavirus disease (COVID-19)](https://www.canada.ca/en/public-health/services/diseases/coronavirus-disease-covid-19.html)
* [Public Health Ontario – Coronavirus Disease 2019 (COVID-19)](https://www.publichealthontario.ca/en/diseases-and-conditions/infectious-diseases/respiratory-diseases/novel-coronavirus)
* [World Health Organization – Coronavirus](https://www.who.int/health-topics/coronavirus#tab=tab_1)
* [Centres for Disease Control and Prevention – About COVID-19](https://www.cdc.gov/coronavirus/2019-ncov/your-health/about-covid-19.html)
* [Ministry of Health – COVID-19 Reference Document for Symptoms](https://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/2019_reference_doc_symptoms.pdf)

***Immunization***

* [Government of Canada’s *Canadian Immunization Guide*](https://www.canada.ca/en/public-health/services/canadian-immunization-guide.html)
* [Government of Canada’s *National Advisory Committee on Immunization (Statements & Publications)*](https://www.canada.ca/en/public-health/services/immunization/national-advisory-committee-on-immunization-naci.html)
* [Government of Canada’s *Vaccine Safety in Canada*](https://www.canada.ca/content/dam/phac-aspc/documents/services/publications/healthy-living/immunization-vaccine/vaccine-safety-poster-eng.pdf)
* [Government of Canada’s *Approved COVID-19 Vaccines*](https://www.canada.ca/en/health-canada/services/drugs-health-products/covid19-industry/drugs-vaccines-treatments/vaccines.html)
* [Ottawa Public Health’s *COVID-19 Vaccination in Ottawa*](https://www.ottawapublichealth.ca/en/public-health-topics/covid-19-vaccine.aspx)

***Antigen Point of Care Testing***

* [*COVID-19 Antigen POCT Guidance - English (gov.on.ca)*](https://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/Antigen_Screening_Guidance_2021-03-5.pdf)
* [*Panbio COVID-19 Ag Rapid Test Device | Abbott Point of Care Testing (globalpointofcare.abbott)*](https://www.globalpointofcare.abbott/en/product-details/panbio-covid-19-ag-antigen-test.html)