Ontario

Ministry of Health

COVID-19 Guidance: Considerations for Rapid Antigen Point-of-Care Screening

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Key Updates

- Updates to 'Eligibility' section including use of rapid screening in outbreak settings (page 3)
- Update to specimen collection methods (page 3-4)
- Information on accessing a rapid, point-of-care test (page 4-6)
- Updates to 'To Conducting the test' to reflect amendments to the LSCCLA (page 6)
- Minor updates to 'Organizational Responsibilities' (page 7)
- Updates to 'Reporting Requirements' (page 7)

This document is intended for individuals or organizations conducting rapid antigen, point-of-care screening (herein referred to as rapid antigen screening) in Ontario. This guidance provides basic information only. It is not intended to take the place of medical advice, diagnosis, treatment, or legal advice.

Rapid antigen testing is used for screening purposes only and should NOT be used for diagnosis of acute COVID-19 infection. Testing does not prevent someone from getting COVID-19.

Rapid antigen screening can be thought of as an additional screening tool.

Rapid antigen screening does not replace public health measures such as symptom screening, physical distancing, masking and hand hygiene.

Rapid antigen screening does not replace requirements to protect the health and safety of workers.

Any positive results from rapid antigen screening must be confirmed with laboratory-based testing.

Please see the COVID-19 Provincial Testing Guidance for more information. Anyone who falls within the current Provincial Testing Guidance should continue to seek testing at available participating pharmacies, participating licensed community labs, and assessment centres.

In the event of any conflict between this guidance document and any applicable legislation or orders or directives issued by the Minister of Health or the Chief Medical Officer of Health (CMOH), the legislation, order or directive prevails. Please see Ontario's COVID-19 website for more general information as well as for updates to this document.

Rapid Antigen Screening in Ontario

General Overview

- Organizations should develop a COVID-19 Workplace Safety Plan to minimize the risk of COVID-19. This includes having written policies and procedures that are in alignment with any sector-specific guidance issued by the Chief Medical Officer of Health and any other specific measures recommended by public health agencies. See Resources to Prevent COVID-19 in the Workplace for more information.
- Employers are required to follow the *Occupational Health and Safety Act* (OHSA).
    - All workplace parties (e.g. employers, supervisors, workers) have statutory responsibilities related to health and safety in the workplace.
    - There are no specific requirements in the OHSA or its regulations for employers to conduct testing of workers.
- Currently, all rapid antigen screening is being conducted using the Abbott Panbio™ test. In the future, additional devices such as the BD Veritor will be used for rapid antigen screening.
- Prior to initiating screening, organizations should make their their local public health unit aware that they will be engaging in rapid screening. Organizations must have processes in place to report all positive results from antigen testing to the local public health unit.

Eligibility

- Subject to the specimen collection described below, rapid antigen screening may only be performed using a testing device that has been approved by Health Canada and is available in Ontario. Note: Although the Panbio™ specifically is currently only approved for use by Health Canada for individuals who meet COVID-19 clinical and/or epidemiological criteria, the assay is being used by the province for individuals who have no clinical or epidemiological history suggestive of COVID-19 as an additional screening tool only.
- Any individual who is currently symptomatic or a contact of a confirmed case should be directed to their healthcare provider, to an assessment centre, or participating licensed community lab to obtain a diagnostic test instead of a rapid screening test.
- In general, individuals who have previously been infected with and recovered from COVID-19 should not undergo repeat testing/antigen screening, unless otherwise directed by local public health or their health care provider as per their symptom and exposure history.
- In general, rapid antigen screening should not be conducted in an **outbreak** setting, unless:
    - It is being conducted under the guidance and direction of a local public health unit and is not replacing any measures currently in place through PHUs, and;
    - It is being conducted only in addition to, not as a replacement for, diagnostic testing of individuals within the outbreak setting, as outlined in the provincial testing guidance.

Specimen Collection

- Nasopharyngeal swab (NPS) is the specimen collection type with the highest sensitivity.
    - Nasopharyngeal swabs are controlled acts that require a specialized workforce and may limit the number of settings that are able to adopt the test.
    - Nasopharyngeal swabs may be uncomfortable, particularly where frequent testing is proposed.
- Alternate specimen collection types are also acceptable, including a combined swab of throat and both nares, a nasal swab, or a deep nasal swab.

- Specimen collection must be conducted in accordance with the type of swab included in the test kit.
    - The only exception is the use of the Abbott Panbio rapid antigen NP swab as a lower nasal swab, as this has been determined to be an acceptable alternative specimen collection modality by the MOH.
- An alternate type of specimen collection may have the advantage of:
    - Increasing the availability of testing as an option by allowing for a broad range of health professionals to collect the specimen
    - Reducing the inconvenience or discomfort due to repeated nasopharyngeal swabs
    - Improved adherence to screening programs
    - Potential for more immediate and robust uptake of this test
- Nasal and throat specimen collection may be less sensitive than nasopharyngeal specimens for the detection of COVID-19.
    - For more details of the effect of specimen collection on sensitivity, please see PHO Evidence Brief on The Use of Alternate Specimen Collection Methods for COVID-19 PCR Testing
- Frequency of specimen collection and screening:
    - For asymptomatic individuals in high prevalence areas (Yellow/Orange/Red/Grey) specimen collection and screening should be performed 2-3 times per week.
    - For low prevalence areas (Green), specimen collection and screening should be performed 1-2 times per week.

Accessing a Rapid, Point-of-Care Test

- The Province of Ontario has expanded the ways in which a person may access a point-of-care antigen test for COVID-19.
- All point-of-care tests for COVID-19 must be performed in a specimen collection centre or a licensed laboratory, unless an exemption under the *Laboratory and Specimen Collection Centre Licensing Act* (LSCCLA) applies. Specimen collection centres and licensed laboratories may be fixed or mobile.
- These exemptions fall into three categories:

1. A physician who performs a point-of-care antigen test for COVID-19 for the exclusive purpose of screening his or her own patients in the course of his or her medical practice.
2. A list of specified health professionals who can perform point-of-care tests for COVID-19.
    - A physician, nurse practitioner, registered nurse, registered practical nurse, dentist, pharmacist, paramedic or community paramedicine practitioner.
3. A person or organization enrolled by agreement as a participant in the Provincial Antigen Screening Program or a person acting on behalf of the participant.
    - The Program agreement is with the Province of Ontario or an agent of the Province and participation in the Program is subject to the conditions that the participant will,
        - ensure that COVID-19 antigen testing by point-of-care testing is used only for the purposes of the Program,
        - submit data in the form and manner requested by the Province of Ontario,
        - comply with the quality assurance requirements that are applicable to the Program, and
        - meet any other requirements set out in the Program agreement.
    - The Program may allow for additional health professionals or other trained individuals to collect specimens or perform a point-of-care antigen test for COVID-19, so long as they have the knowledge, skills, training and judgment to do so. Health professionals may include both regulated health professionals, as well as non-regulated health professionals.
    - Examples of health professionals that can perform rapid antigen screening as part of the Provincial Antigen Screening Program include, but are not restricted to:
        - Health professions regulated in Ontario:
            - Audiology and Speech-Language Pathology; Chiropody and Podiatry; Chiropractic; Dental Hygiene; Dental Technology; Dentistry; Denturism; Dietetics;

Homeopathy; Kinesiology; Massage Therapy; Medical Laboratory Technology; Medical Radiation Technology; Medicine; Midwifery; Naturopathy; Nursing; Occupational Therapy; Opticianry; Optometry; Pharmacy; Physiotherapy; Psychology; Psychotherapy; Respiratory Therapy; Traditional Chinese Medicine and Acupuncture.

- Non-regulated health professionals:
  - E.g., Personal support workers, Physician assistants, Physiotherapy assistants, Speech language therapists, Osteopaths, etc.

- Specific information on the exemptions is set out in Regulations 682 (Laboratories) and 683 (Specimen Collection Centres) under the LSCCLA.

Conducting the Test

- Sites that have entered into an agreement with the Ministry of Health to participate in the Provincial Antigen Screening Program are exempt from certain aspects of the LSCCLA.
  - Under this exemption (regulation 682, 13.3) a person can perform COVID-19 antigen point of care testing if they are participating in the Provincial Antigen Screening Program and are in compliance with the program's conditions.
- Health professionals are responsible for satisfying all applicable legislative and regulatory requirements, including those under the LSCCLA, *Health Protection and Promotion Act* (HPPA), *Personal Health Information Protection Act* (PHIPA), *Health Care Consent Act* (HCCA), *Regulated Health Professions Act* (RHPA).
  A positive result on a rapid antigen screening test is considered a preliminary positive and should be followed up with a laboratory-PCR test to act as a confirmatory test, as per Provincial Testing Guidance.
  - Health professionals must ensure that all personal and health information will be collected, used, disclosed in accordance with relevant legislation, including the PHIPA.
  - Appropriate biosafety precautions must be taken when using the Panbio test kits. See the PHO Document: Abbott Panbio™ COVID-19 Antigen Rapid Test: Biosafety Considerations

Organizational Responsibilities

Organizations that conduct rapid antigen screening are responsible for:

- Retaining existing public health measures such as symptom screening, appropriate distancing, using personal protective equipment and hand-hygiene activities. Rapid antigen screening is not a replacement for any of these measures.
- Following all public health guidance for managing an individual with a preliminary positive result and requiring that the individual receive a laboratory PCR test within 24 hours.
- Ensuring compliance with any applicable legislation related to the collection of personal health information, including PHIPA
- Cooperating with their local public health unit in the event of a potential workplace exposure of COVID-19 or an outbreak investigation.

Reporting Requirements

- Organizations should have a systematic procedure in place to provide follow up on results.
- Organizations should have plans in place to respond should any individuals be exposed to or diagnosed with COVID-19.
- All preliminary positive COVID-19 tests performed on a rapid antigen device must be reported to the local public health unit in accordance with the HPPA by the health professional or the organization participating in the program.
- If you are advised that one of your workers has tested positive for COVID-19 due to exposure at the workplace, or that a claim has been filed with the Workplace Safety and Insurance Board (WSIB), you must give notice in writing within four days to:
    - The Ministry of Labour, Training and Skills Development
    - The workplace's joint health and safety committee or health and safety representative
    - The worker's trade union (if applicable)
    - Additionally, you must report any occupationally acquired illnesses to the WSIB within three days of receiving notification of the illness.
    - You do not need to determine where a case was acquired. If it's reported to you as an occupational illness, you must report the case.