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MHO position statement Oct 21, 2021

To: Honorable Paul Merriman, Saskatchewan Minister of Health,

The Medical Health Officers of Saskatchewan (MHOs) would like to express our continued and growing concern about the current state of COVID-19 in our province and the lack of effectiveness of the current public health measures to bring about the rapid reduction in cases needed to take the unprecedented pressure off our health system. As you are aware, the MHOs are designated by Minister of Health to be the Public Health Officers named in the Public Health Act to take actions necessary to control communicable diseases and other public health hazards. We continue to provide our best assessment of the public health threat posed by the COVID-19 pandemic and provide recommendations to provincial and local governments, the health authority and the public. This includes advice provided in our letter dated August 26, and the recommendations made by local MHOs to the CMHO (Dr Shahab) and those made by CMHO to the Minister of Health.

On August 26, 2021, after voicing our concerns and recommendations for many weeks, we indicated formally, in writing, the public health measures that were necessary to avoid the surge we are now experiencing. While some of these measures were ultimately adopted in recent weeks, the delay has resulted in a much larger 4th wave, which will therefore require a return to stronger restrictions to bring it under control. Mandatory masking and proof of vaccination requirements for specific professions and for access to select non-essential services is starting to slow the growth of cases and hospitalizations; however, high test positivity and low testing rates point to sustained or growing COVID-19 transmission. In our current context, reported positive cases do not tell the full story. Without further action, it is highly likely that we will face even higher rates of hospitalization in coming weeks and risk health system collapse, as well as many more preventable deaths.

The Medical Health Officers of Saskatchewan, along with many other health professionals and associations, have been asking for a more aggressive set of measures to quickly reduce community transmission. A large proportion of the population is now fully immunized, and proof of vaccination requirements have started to improve coverage rates further, but at the current speed of uptake, we are not going to reach the levels of immunity needed to stop continued growth of the pandemic for several months yet. Therefore, temporary measures are urgently needed to break the chain of transmission, as "stopgap measures". As our calls for province-wide action have not been answered, the Medical Health Officers have considered local public health orders and bylaws to cover as many of the following recommendations—and as much of the province—as possible. However, these local orders and by-laws will still require Ministerial approval, will take considerable time to develop and may result in a patchwork approach that will be confusing to the public. Therefore we request that a provincial order be developed instead, as, every day of delay will lead to further growth in cases and subsequent rises in hospitalizations, ICU admissions, and deaths due to both COVID-19 and other health conditions that are being impacted by service slowdowns.

Recommendations

In the context of our current rate of COVID-19 immunization, stopping uncontrolled community spread of COVID-19 does not require a full lockdown or school closures as was needed last year. The same impact can be realized by strengthening gathering restrictions and reducing the mixing of immunized and unimmunized people. These recommendations are more restrictive than what has been asked for by the City of Saskatoon and several MHOs in recent weeks, but the delay in implementing those measures necessitates a more restrictive approach as follows:

- 1) Gathering restrictions: move back to a similar stage as step one in the Saskatchewan Re-Open strategy for a 28-day period (with some modifications for the fully immunized population) as has been shown to be effective in recent modelling:
 - Private indoor gatherings:
 - The unvaccinated and partially vaccinated should not gather beyond their own household
 - Vaccinated households can gather indoors with up to one other household, (including children under 12 who are not yet eligible for immunization)
 - Venues (for weddings, funerals etc.): reduce to 25% capacity, with no indoor dining if they are
 only requiring mandatory masks but not a proof of vaccination for the event. If they require
 proof of vaccination these restrictions would not apply
 - Places of worship that do not require proof of vaccination should still require mask wearing and reduce in-person attendance to 25% capacity (or 150 max, whichever is less)
 - No further restrictions are required for other venues previously mentioned in the Re-Open strategy Step One, as proof of vaccination is required in those places (Gyms, restaurants, bars, etc.)
- 2) Proof of vaccination should be required in more venues, and more locations should consider not accepting proof of a negative test as an option for entry. A negative test should not be a substitute for vaccination while we try to reduce community transmission as they can miss people with lower levels of viral shedding.
 - In order to keep schools open, we need to make them safer. Proof of vaccination should be required for accessing in-person learning for children 12 years and older, and for households of those under 12 who cannot be immunized yet. It should also be required for teachers and staff in all schools and day care facilities.
 - Facilities hosting youth sports/extracurricular activities for school aged children should also require proof of vaccination for eligible participants, spectators, coaches, and volunteer staff
- 3) The Medical Health Officers of Saskatchewan recommend that government messages clearly communicate the seriousness of the current situation. The MHOs would like the population of our province to know:
 - It is important for everyone to decrease the number of people we see and places we go to over the next 28 days. If most people reduced the number of contacts and trips they made by even 50% in the next while, this would have a huge impact. Limit or avoid travel outside your home community. Reduce or cancel activities that require contact with others for the next month. Organizers of events that result in large groups gathering should consider cancelling them this month. Work from home if you have the option. Everything we can do to decrease the amount of interaction and mixing that we do will help interrupt the chain of transmission and speed up the process of health system recovery while we wait for increased immunization coverage to increase our population level immunity.

- Despite requests to allow for documented proof of previous infection to be allowed as an equivalent to proof of vaccination, until we have more data this should not be allowed at this point. The strength and longevity of natural immunity is not yet well established compared to vaccine immunity, and the safety and effectiveness of the vaccine in previously infected patients has been well established. This can be revisited as the evidence becomes clearer.
- Continue to stress the importance of getting fully vaccinated. People should be encouraged to seek out credible sources of health information and discuss COVID-19 vaccination with their primary care provider.
- Risk communication from government should stress the legitimacy and rationale for stronger public health measures along with judicious enforcement as necessary to:
 - Prevent excess mortality due to health care system pressures and delayed access to healthcare services; and
 - Protect the security and safety of healthcare, public health and front-line workers. This
 is an Occupational Health and Safety issue and all these staff are entitled to safe
 working conditions.
- 4) Recommendations from our August 26 letter that have not yet been adopted that would still have an impact include:
 - a. Testing and contact tracing capacity has not been able to keep up with demand, and has been less effective given the number of contacts people have. This will become more important as the other restrictions come into effect, and capacity will need to be increased by expanding the numbers of contact tracers that take various roles in this important work.
 - b. Public reporting of COVID-19 information has been better with discussion of modeling data, and reporting of cases and hospitalizations by immunization status, but more detailed reporting of our cases and progress on immunization uptake in various age groups needs to happen at small-area geography, communities and neighborhoods in our larger cities for people to understand where we need to improve. The Saskatchewan Health Authority and Ministry of Health need to agree on how to best report on this information
 - c. Better access to linked data so epidemiologists can give better advice to our public health teams about the evolving pandemic and the effectiveness of current measures including immunization rates in sub populations.

We understand that returning to these restrictions is not what our population wants, or what our leaders want to contemplate, but with the health system in crisis, the alternatives are much worse. Modeling throughout the spring, summer, and fall of 2021 was very accurate in predicting the state we would be in this fall if restrictions were lifted too soon. As has been recently reported, current models are now showing how much worse it will get if no further action is taken. However, modeling also shows that if the above measures are adopted quickly, case rates and system pressures will improve well before winter holidays. If there are further delays in implementing these measures though, it is highly likely that even these recommendations will not be enough, and further restrictions will be required, such as a return to the lockdowns and school closures we endured in the spring of 2020. Therefore, we recommend that public health measures such as mandatory masking and proof of vaccination be in place until at least the New Year, and their removal should be tied to achieving targets for provincial and local vaccination coverage of at least 85% of the population fully immunized and evidence of pandemic control and health system stabilization.

We urge rapid and decisive action to speed health system recovery and buy time for vaccine immunity levels to eventually bring this crisis under control and we look forward to your response to our recommendations.

Sincerely,

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Cc: Dr Shahab, CMHO, Saskatchewan Health