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Time to open, test and trace

by TOM CLARIDGE

DESPITE CALLS by local public health units for an ability to have the anti-COVID-19 rules reflect actual conditions, the Ontario legislature has voted to extend the state of emergency to the end of this month.

What this means is that the same rules will apply everywhere in this province of 14 million, where roughly 400 new cases of the coronavirus are detected each day along with a significant number of deaths.

We long ago heard that public health authorities had recommended, and the Ford government accepted, that the virtual lockdown of the province should continue until there had been at least 14 days of declines in both new cases and deaths.

The problem has been that clearly you cannot safely return to having theatres, sporting events and exhibitions open anywhere there is real evidence of ?community spread' of this highly contagious virus which has taken more than 380,000 lives worldwide, 108,000 of them in the United States and 7,400 in Canada.

Even in Ontario, the death toll has reached nearly 3000. However, about 80 per cent of those who died were in long-term-care facilities and roughly the same percentage were in the Golden Horseshoe, Windsor and Ottawa.

Even in our local public health unit, covering the city of Guelph and counties of Dufferin and Wellington, the death toll has been relatively miniscule, at 35, and the number of new cases plummeted in May. Although there have been outbreaks in Shelburne Residence, Dufferin Oaks and one Guelph facility, all the outbreaks have been declared over.

We strongly suspect that if the Province permitted local public health units to determine when and to what extent the local economy should be freed from continuing restrictions, even WDG Public Health would see no continuing need to bar theatres and barber shops from re-opening, so long as staffs and customers wore masks and didn't use the facilities if they had a fever or sniffles.

And if that's the case here, what about farther north, where Grey and Bruce counties have had no COVID-19 deaths, or Northern Ontario, where the Sudbury District has had just 64 cases and two deaths, with no new cases for weeks?

As we see it, the Province ought to allow all local public health units to set rules that reflect their local conditions rather than the situation in places like the GTA.

The idea would be to allow what amounts to a pre-COVID normality in any area where the universal wearing of masks and social distancing accompanied by widespread testing and tracing would leave us in a situation where hospitals could easily deal with an outbreak of the sort witnessed in northern New Brunswick, where one doctor failed to self-isolate for 14 days after making a social visit to hard-hit Quebec and managed to infect literally hundreds of his patients in both nursing homes and a hospital.

Had there been immediate testing of the physician, the outbreak could have been dealt with effectively, without forcing a return to localized lockdowns and threatening to cause the province's first COVID-related death.

As is already being witnessed in many U.S. states, it will be pointless to invite the general public to resume their old shopping habits if there is reasonable suspicion that the virus is still present in the local community. After all, it is invisible and the best way you'll get folks into stores is through a combination of testing the local populace and tracing each and every outbreak.

Were this the approach adopted by Queen's Park, we might well see a safe return of both sports and arts activities in most of the province, and tougher moves in the remaining ?hot spots' aimed at securing an economic revival.

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Meanwhile, a top priority for the government will be to secure a speedy conclusion of the planned investigation into the causes behind the huge death toll in long-term-care facilities, which must be accompanied by procurement of enough personal protective equipment to cope with the expected new wave of COVID-19 next fall.