COVID-19 +

Epidemiologic Analysis

April 30, 2021

This report is developed by the Regina-area Medical Health Officers (MHO) to provide epidemiologic analysis and context for area school divisions of the current COVID-19 trends. Both Regina Public and Regina Catholic School Divisions will return to in-class learning on Monday, May 3. The following report provides context for that decision.

The MHOs perform an advisory role only in support of the school division decision-making process.

Case analysis and recommendations

From January to now, the Regina area had 1,134 cases that were identified as related to schools. Figure 1 shows the case trends for the Regina area. This data shows cases peaked between March 28 to April 3, and a decline had begun the week of April 4 to 10. The decline in school-related cases has continued into the current week as we have so far only identified 25 cases in persons of school age.

We should also note the cases seen represent exposures in the preceding week to fourteen days, i.e. incubation period of COVID-19. Considering this, the decline observed in the week of April 4 to 10 represents exposures that occurred while students were still learning in the classroom.

In a review of 845 school-related cases in the Regina area between January and March 2021, just 14% of cases affiliated with schools likely have been acquired in the school setting, while 86% were acquired outside the school setting.

The public health team also uses a seven-day rolling average, which indicates a downward trend from a peak of 111 cases between March 27 to April 3 to the current 76 cases between April 22 to 29.

Given the above points, we are feel that schools may consider resuming in-person learning should they choose because evidence shows that:

- acquisition of COVID-19 among students, staff and teachers has mainly occurred outside of schools;
- the case numbers in the Regina are declining, and the decline preceded the decision for schools to proceed to online learning; and
- the evidence indicates adherence to public health measures in schools (masking, distancing, cohorting) works.

Finally, monitoring of case trends and patterns will continue and may call for a reversal of our recommendation in the future. We will continue to provide updates to our school division partners regularly about risk assessment to support these difficult decisions.