
TO: DDG: Chief of Operations

Chief Directors: MHS, RHS, Strategy

Heads of Institutions

District & Sub-Structure Directors

Director: City Health

Circular H221/2021

**NATIONAL REVISION OF CONTRACT TRACING, QUARANTINE & ISOLATION PROTOCOLS
DATED 23 DECEMBER 2021**

This circular replaces previously issued Circular H219-2021: Quarantine Policy Update for Asymptomatic Healthcare Worker Contacts of Covid-19 Cases. Please find attached NDOH circular announcing the new revised contact tracing, quarantine and isolation protocols for all individuals for implementation with immediate effect.

The following is a summary and should be read in conjunction with the attached:

Contact Tracing:

- All contact tracing to be stopped with immediate effect.
- The exception would be in congregate settings, cluster outbreak situations or self-contained settings.

Quarantine:

- All quarantine for both vaccinated and unvaccinated contacts is stopped with immediate effect.
- No testing for COVID-19 is required unless contacts become symptomatic.

Isolation:

- **Asymptomatic:** No isolation is required. These could be individuals who have been tested on admission to hospital or have had pre-travel testing.
- **Mild Disease:** Isolate for 8 days from date of onset of symptoms (which is day 1) and return to work on Day 9.
- **Severe Disease:** Isolate for 10 days from date of onset of symptoms (which is day 1) and return to work on Day 11.

Note that any isolation period beyond Day 8 and Day 10 day respectively, should be supported by a medical report from the attending clinician.

Yours sincerely

Juanita O. Arendse
Chief Director: ECSS
Date: 23 December 2021



**DIRECTOR GENERAL
HEALTH
REPUBLIC OF SOUTH AFRICA**

PRETORIA
Private Bag X828, PRETORIA, 0001, Dr AB Xuma Building, 1112 Voortrekker Rd, Pretoria Townlands 351-JR, Pretoria, 0187, Tel (012) 395 8000
CAPE TOWN
P.O. Box 3875, CAPE TOWN, 8000, 103 Parliament Towers, Room 615, Plain Street, CAPE TOWN, 8000 Tel (021) 461 2040 Fax (021) 461 6864

TO: HEADS OF PROVINCIAL HEALTH DEPARTMENTS

**SUBJECT: REVISION TO CONTACT TRACING, QUARANTINE AND ISOLATION PROTOCOLS:
23.12.2021**

1. The following revisions have been accepted based on the -COVID-19 MAC advisories of 16.12.2021
 - 1.1 Proportion of people with some immunity from infection and/or vaccination is high
 - past infection in 60-80% in several sero-surveys
 - 1.2 Containment strategies are no longer appropriate – mitigation is the only viable strategy
 - Especially true of the newer, more infectious/transmissible variants like OMICRON
 - 1.3 New knowledge about the virus:
 - a) high proportion of asymptomatic disease,
 - b) high degree of asymptomatic and pre-symptomatic spread,
 - c) aerosol spread.
 - d) Only a small proportion of cases are diagnosed.
 - 1.4 We never identify most high risk patients
 - a) Testing skewed towards symptomatic (minority)
 - b) Not all symptomatic people test
 - c) Not all negative tests are true negatives
 - 1.5 “High risk” definition probably isn’t meaningful anymore
 - a) Doesn’t take into account aerosol spread
 - b) Doesn’t take into account the newer variants (increased transmissibility)
 - c) Doesn’t take into account pre-existing immunity
 - 1.6 Quarantine has been costly to essential services and society as many people stay away from their work and thus lose their income and children miss on their schooling.

Thus, the following is applicable with immediate effect :

2. Contact Tracing

- 2.1 All contact tracing be stopped with immediate effect except in congregate settings and cluster outbreak situations or self-contained settings.
- 2.2 All contacts must continue with their normal duties with heightened monitoring (daily temperature testing, symptom screening) of any early signs. If they develop symptoms then they should be tested and be managed according to the severity of the symptoms
- 2.3 All contacts must not be tested unless if they develop symptoms

3. Quarantining for contacts of confirmed cases of Covid -19

3.1 All quarantine is to be stopped with immediate effect

3.2 This applies to both vaccinated and unvaccinated contacts

3.3 No testing for Covid -19 is required irrespective of the risk exposure unless the contact becomes symptomatic

4. Isolation

- Isolation rules are applicable to both vaccinated and unvaccinated individuals
- Isolation rules are applicable to high and low risk individuals
- Return to work from Day 10 onwards must as always take into consideration the individual's clinical status. Only those patients well enough to work should do so.

4.1 Asymptomatic Individuals

- a) No isolation period required
- b) To do self-observation for 5-7 days for development of any symptoms with enhanced precautions including avoiding attending settings where many people gather, mask wearing and social distancing.

4.2 Mild disease

Mild diseases refers to persons who have symptoms and have tested positive but who do not require hospitalization. do not have shortness of breath, dyspnoea or abnormal chest imaging.

Mild disease symptoms and signs include but are not limited to the following: fever, cough, sore throat, malaise, headache, muscle pain, nausea, vomiting, diarrhoea, loss of taste and smell.

- a) Isolation period is maintained at 8 days.
- b) The person in this category must wear a mask at all times (even at home, work and all public spaces) for the duration of the 8 days period of isolation.
- c) Where a health care worker returns to work after Day 8 such a worker must wear a N95 mask at all times and must at all times avoid contacts with extremely high risk patients (especially severely immune-compromised patients).
- d) There is no need for Covid-19 test (either PCR or antigen test) be performed prior to returning to work after 8 days isolation period.
- e) For mild cases, isolation beyond 8 days must be supported by the medical report

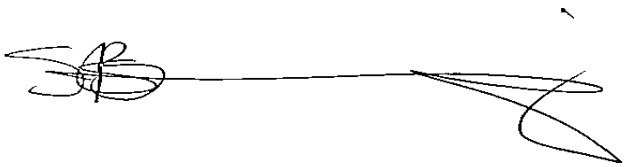
4.3 Severe Disease:

- a) Severe disease refers to persons who test positive and have exacerbated symptoms i.e shortness of breath, dyspnoea, chest pain and abnormal chest imaging and who require hospitalisation to manage the clinical presentation.
- b) Isolation period is maintained at 10 days after clinical stability is achieved
- c) The person in this category must wear a mask at all times (even at home, work and all public spaces) for the duration of the 10 days period of isolation.
- d) Where a health care worker returns to work after Day 10, such a worker must wear a N95 mask at all times and must at all times avoid contacts with extremely high risk patients (especially severely immune-compromised patients).

- e) There is no need for Covid-19 test (either PCR or antigen test) be performed prior to returning to work after 10-day isolation period
- f) For severe cases, isolation beyond 10 days must be supported by the medical report

5. Return to work

All people that have been infected and have been in isolation, must be ready to return to work after completing mandatory period of isolation as above and no further testing is required after either 8 or 10 days of isolation.



DR SSS BUTHELEZI
DIRECTOR-GENERAL: HEALTH
DATE: 23 December 2021