

REVISED COVID-19 Protocols for Direct Care Staff to Return to Work

Issued: February 15, 2021

Health Advisory: Revised Protocols for Personnel in Clinical and Direct Care Settings to Return to Work Following COVID-19 Exposure or Infection

A. Asymptomatic Staff Exposed to COVID-19

Consistent with recent CDC guidance, providers may allow clinical and direct support professionals or other facility staff who have **been exposed to a confirmed case of COVID-19** to return to work **after ten (10) days** of quarantine if **no symptoms** have been reported during the quarantine period and if the all of the following conditions are met:

- 1. Personnel who have been in contact with confirmed or suspected cases are **asymptomatic**;
- 2. Personnel must continue symptom monitoring **through Day 14.** Self- monitoring should be completed twice a day (i.e. temperature, symptoms), and undergotemperature monitoring and symptom checks at the beginning of each shift, and at least every 12 hours during a shift.
- 3. Individuals must be counseled to continue strict adherence to all recommended nonpharmaceutical interventions, including hand hygiene and use of face coverings.
- 4. To the extent possible, direct care professionals and clinical staff working under these conditions should preferentially be assigned to individuals at lower risk for severe complications, as opposed to higher-risk patients (e.g. severely immunocompromised, elderly).
- 5. Personnel allowed to return to work under these conditions should maintain self- quarantine **through Day 14** when not at work.
- At any time, if the personnel who are asymptomatic contacts to a positive case and working under these conditions develop symptoms consistent with COVID-19, they should immediately stop work and isolate at home. All staff with symptoms consistent with COVID-19 should be immediately referred for diagnostic testing for SARS-CoV-2.

B. Asymptomatic Exposed Staff During a Staffing Shortage

Providers may allow clinical and direct support professionals or other facility staff who have **been exposed to a confirmed or suspected case of COVID-19** to return to work **before** ten (10) days of quarantine if **no symptoms** have been reported during the quarantine period and if all of the following conditions are met:

- 1. Furloughing such personnel would result in staff shortages that would adversely affect the health and safety of individuals served by the facility;
 - The provider agency must submit a completed attestation, acknowledging that the agency has implemented or attempted staffing shortage mitigation efforts and is experiencing a staffing shortage that threatens provision of essential care services and that all of the below factors and requirements will be or are being met.

The attestation form can be found here: <u>https://omh.ny.gov/omhweb/guidance/omh-return-to-work-exposed-staff-attestation.pdf</u>

Residential programs must submit the attestation form to: <u>omh.sm.ResidentialAttestation@omh.ny.gov</u>

Ambulatory programs should submit to: omh.sm.AmbulatoryAttestation@omh.ny.gov

Attestation form must be submitted before asymptomatic exposed staff are approved to return to any work location. One attestation may be submitted by each provider operating program(s) within these parameters but must list the locations/sites where staffing shortages require that exposed staff return to work before 10-day quarantines are completed. Please review item 6 in the attestation; if agency is unable to meet this item, please note reason on the attestation form. Agencies with both ambulatory and residential programs can submit to both email addresses.

- 2. Personnel who have been in contact with confirmed or suspected cases are **asymptomatic**;
- 3. Personnel must continue symptom monitoring through Day 14. Self- monitoring should be completed twice a day (i.e. temperature, symptoms), including temperature monitoring and symptom checks at the beginning of each shift, and at least every 12 hours during a shift;
- 4. Individuals must be counseled to continue strict adherence to all recommended nonpharmaceutical interventions, including hand hygiene and use of surgical facemasks;
- 5. Individuals must be advised that if any symptoms develop, they should immediately stop work, isolate at home and contact their local public health authority or their healthcare provider to report this change in clinical status and determine if they should seek testing;
 - Note that personnel who test positive for COVID-19 must isolate and contact their Local Department of Health (section D below);
- To the extent possible, direct care professionals and clinical staff approved to work under these conditions should preferentially be assigned to individuals at lower risk for severe complications, as opposed to higher-risk patients (e.g. severely immunocompromised, elderly); AND
- 7. Personnel approved to return to work under these conditions should remain in quarantine through Day 14 when not at work.

8. OMH-licensed Article 31 programs operated by and located in Article 28 General Medical Hospitals (e.g. CPEPs, inpatient psychiatric units) must follow the same staffing shortage procedures that apply to the overall hospital. Please refer to guidance from the NYS Department of Health.

C. Staff Who Travel Out of State

Staff who are asymptomatic and are returning from travel to a non-contiguous state or a country or territory subject to a CDC Level 2 or higher COVID-19 risk assessment level, or for which the COVID-19 risk level is designated by the CDC as unknown, may return to work consistent with the essential worker requirements set forth in the NYDOH travel advisory.

Travelers who leave New York State for less than 24 hours do not need to obtain a diagnostic test before departing and do not need to quarantine upon return. However, such travelers must fill out the traveler from upon entry and must obtain a diagnostic test on the fourth day after arrival in New York. A copy of this form can be found at: <u>https://coronavirus.health.ny.gov/covid-19-travel-advisory#traveler-health-form</u>.

Providers may locate the guidance document issued by the New York State Department of Health titled "Interim Guidance for Quarantine Restrictions on Travelers Arriving in New York State Following Out of State Travel" at: <u>https://coronavirus.health.ny.gov/covid-19-travel-advisory</u>.

D. Staff With Confirmed or Suspected COVID-19

Providers may allow personnel with **confirmed or suspected COVID-19**, whether direct care professionals, clinical staff or other facility staff, to return to work only if all the following conditions are met:

- 1. To be eligible to return to work, personnel with confirmed or suspected COVID-19 must have maintained isolation for at least 10 days after illness onset, must have been fever-free for at least 72 hours without the use of fever reducing medications, and must have other symptoms improving.
- 2. Personnel who are severely immunocompromised as a result of medical conditions or medications should consult with a healthcare provider before returning to work. Providers should consider seeking consultation from an infectious disease expert for these cases.
- 3. If a staff member is asymptomatic but tested and found to be positive, they must maintain isolation for at least 10 days after the date of the positive test and, if they develop symptoms during that time, they must maintain isolation for at least 10 days after illness onset and must have been at least 72 hours fever-free without fever reducing medications and with other symptoms improving.

E. Staff who have been in <u>close contact</u> with someone who has COVID-19 excluding people who have had COVID-19 within the past 3 months.

1. People who have tested positive for COVID-19 within the past 3 months and recovered do not have to quarantine or get tested again as long as they do not develop new symptoms.

2. People who develop symptoms again within 3 months of their first bout of COVID-19 may need to be tested again if there is no other cause identified for their symptoms.

General questions or comments about this advisory can be sent to your local OMH Field Office contact.