

AN EMPLOYEE TESTED POSITIVE FOR COVID-19 AT OUR FACILITY, NOW WHAT?

CORONAVIRUS – HOW CONTAGIOUS IS IT?

COVID-19 is caused by a novel coronavirus and is not fully understood. Based on initial studies it has been determined that on average a person infected will transmit the virus to 2-3 other people (for comparison the seasonal flu is approximately one other person infected).

TRANSMISSION: The virus is transmitted via droplets released when an infected person coughs, sneezes or speaks. The droplets land on the face or in the mouth, nose or eyes of people nearby or can contaminate a surface that another person contacts and then transfers to their face through touch.

LONGEVITY OUTSIDE OF THE BODY: There is preliminary evidence that the virus is viable on surfaces such as plastic and stainless steel for up to three days and it can remain viable airborne in aerosol form for up to three hours.

EMPLOYEE WITH POSITIVE TEST – WHAT DO WE DO?

Current guidance on how to handle an employee who tests positive for COVID-19 is dependent on a variety of factors. There is not a “one-size fits all” response because of the high number of current potential scenarios. Therefore, we at U.S. Compliance are currently recommending that you:

- Contact us for guidance, as needed.
- Review your local health department website for current information and guidance specific to employers.
- Following an assessment of the situation, if appropriate, contact the local health department for instructions. The guidance will vary depending on location and current status of the outbreak in the region.
 - Understand that currently there is no legal requirement to contact or inform the local health department.
- An employee with a positive test result should only be allowed to return to work after satisfying one of the two CDC recommended criteria:
 - i. Two negative test results obtained at least 24 hours apart
 - ii. A minimum of 10 days after the onset of symptoms and three days symptom free without the use of symptom reducing medications
- The local health department or in some locations law enforcement may contact the employer of a person with a positive test result. In addition to informing the employer of the positive result they may inquire about the status of the employer’s infection control & prevention plan and compliance with any relevant executive orders.

EMPLOYEE EXPERIENCING SYMPTOMS, BUT CASE IS NOT CONFIRMED:

Employees who are ill or experiencing symptoms should not come to work. However, if an employee is presenting symptoms (cough, fever, tiredness, headache, tight chest, shortness of breath, loss of taste or smell, etc.), but has not been tested for COVID-19 and/or is not yet a confirmed case, the following precautions should be taken:

1. ISOLATE EMPLOYEE IN A SEPARATE ROOM

- a. Pre-determine an unoccupied room to isolate sick employee.
- b. Provide facial tissue and advise employee to cover mouth and nose with tissue when coughing or sneezing. Provide a lined trash can in this room for disposal.
- c. Provide employee with a face covering if available.

2. NOTIFY ERT – IMPLEMENT INFECTIOUS DISEASE CONTROL PLAN

- a. If possible, have one person be the contact for all sick employees.

3. TALK TO EMPLOYEE

- a. Maintain 6ft distance from employee while conversing with them or contact them by phone.
- b. Determine who the employee was in close contact (see definition in FAQ section at end of this document) with while at work for two calendar days prior to the onset of symptoms or if they had close contact with other employees during off hours.
- c. Determine locations they have visited within the facility since the last thorough cleaning, last three days of work if cleaning of visited areas is not being completed daily or on day of illness if employee has not been at facility for prior three days.
- d. Be kind but thorough during this conversation to find out who the employee had close contact with and all locations they visited in the facility during the specified time period.
- e. Inform symptomatic employee to contact their healthcare provider for further instructions and let them know they cannot return to work for a minimum of 10 days from date of onset of symptoms and three days (72 hours) symptom free without the use of symptom reducing medications.

4. SEND EMPLOYEE HOME

- a. Instruct employee to remain in the isolation room until they are ready to leave the facility.
- b. Ask them to maintain social distancing practices with other employees and minimize contact with surfaces on their way out of the building.
- c. Provide employee with a face covering if available.

5. NOTIFY EMPLOYEES OF THEIR POTENTIAL EXPOSURE TO A SUSPECTED CASE

- a. Without identifying the sick employee by name, inform other employees of their potential exposure.
- b. Review local health department website for guidance targeted at employers to determine if exposed employees should be sent home for self-isolation. Encourage employees to contact their healthcare provider for recommendations on whether or not they should self-isolate. The CDC recommends that exposed employees self-monitor for symptoms and take their temperature twice daily including before reporting to work each day. Exposed employees that continue to report to work should wear a face covering (provided by or approved by the employer) at all times while onsite if safe to do so based on their job

tasks. If employee temperature is 100F or higher they are to remain home and should follow the guidance in letter (b)(ii) for when to return. If the employer chooses to send the exposed employee's home, the following self-isolation guidance is recommended regarding when the employee is allowed to return to work:

- i. If no symptoms (fever, cough, shortness of breath), and no symptom reducing medications are used - 14 days
- ii. If symptomatic – minimum of 10 days from onset of symptoms and three days (72 hours) symptom free without the use of symptom reducing medications

6. DISINFECT SURFACES IN AREAS VISITED BY EMPLOYEE

- a. Isolate areas visited by sick employee for as long as possible (up to 24 hours) to allow air to settle or turn over prior to cleaning. Increase ventilation if possible, including opening doors and windows. Clean and disinfect all high touch and horizontal surfaces, tools and equipment. Once the area is clean and disinfected then employees will be allowed to return to area and resume work.

7. SYMPTOMATIC EMPLOYEE RETURN TO WORK GUIDANCE

- a. Minimum of 10 days from onset of symptoms and three days (72 hours) symptom free without the use of symptom reducing medications.
- b. Two negative tests obtained at least 24 hours apart

EMPLOYEE IN CONTACT WITH SUSPECTED OR CONFIRMED CASE AT HOME

1. IF EMPLOYEE IS AT WORK, FOLLOW THE BELOW STEPS AND THEN PROCEED TO STEP 2(D) BELOW.

- a. Isolate employee in a separate room.
 - i. Pre-determine an unoccupied room to isolate sick employee.
 - ii. Provide facial tissue and advise employee to cover mouth and nose with tissue when coughing or sneezing. Provide a lined trash can in this room for disposal.
 - iii. Provide face covering to employee if available
- b. Notify ERT- Implement Infectious disease control plan.
 - i. If possible, have one person be the contact for all sick employees.
- c. Talk to employee.
 - i. Maintain 6ft distance from employee while conversing with them or contact them by phone.
 - ii. Determine who the employee was in close contact (see definition in FAQ section at end of this document) with while at work since date of onset of symptoms of ill household member or if they had close contact with other employees during off hours.
 - iii. Determine locations they visited within the facility since the last cleaning or 3 days if thorough cleaning of all high touch items and surfaces is not being conducted

- iv. Be kind but thorough during this conversation to find out who the employee had close contact with and all locations they visited in the facility in the specified time period.

2. IF EMPLOYEE NOTIFIES THE EMPLOYER OVER THE PHONE OF CONFIRMED CASE AT HOME:

- a. Refer employee to CDC website page for homecare of infected household member located [here](#).
- b. Determine who they were in close contact with at the workplace during the last 2 calendar days
- c. Determine locations they have visited within the facility since the last cleaning or the last 3 days if thorough cleaning of all high touch items and surfaces is not being conducted
- d. Without identifying employee by name, inform all potentially exposed employees of the situation
- e. Review local health department website for guidance targeted at employers to determine if exposed employees should be sent home for self-isolation. Encourage employees to contact their healthcare provider for recommendations on whether or not they should self-isolate. The CDC recommends that exposed employees self-monitor for symptoms and take their temperature twice daily including before reporting to work each day. If employee temperature is 100F or higher they are to remain home and should follow the guidance below in (F)(ii) for when to return. Exposed employees that continue to report to work should wear a face covering (provided by or approved by the employer) at all times while onsite if safe to do so based on their job tasks.
- f. If the employer chooses to require that the employee with sick family member not report to work or be sent home from work, the following self-isolation guidance is recommended regarding when the employee should be allowed to return to work:
 - i. If no symptoms (fever, cough, shortness of breath), and without the use of symptom reducing medications - 14 days from onset of symptoms of sick family member.
 - ii. If employee is symptomatic prior to end of 14-day self-isolation – minimum of 10 days from onset of symptoms and three days (72 hours) symptom free without the use of symptom reducing medications
- g. These recommendations do not guarantee that secondary spread will not occur.

3. DISINFECT SURFACES IN AREAS VISITED BY EMPLOYEE

- a. Isolate areas visited by employee for as long as possible (up to 24 hours) to allow air to settle or turn over prior to cleaning. Increase ventilation if possible, including opening doors and windows. Clean and disinfect all high touch and horizontal surfaces, tools and equipment (see guidance in FAQ at bottom of this document). Once the area is clean and disinfected then employees will be allowed to return to area and resume work.

FREQUENTLY ASKED QUESTIONS

Does the CDC have guidance on how the cleaning and disinfection process must be performed? (i.e. internal employees with EPA N List or third party required?)

- The CDC guidance *Cleaning and Disinfection After Persons Suspected/Confirmed to Have COVID-19 Have Been in the Facility* can be found [here](#). The guidance does not require that an outside cleaning service be utilized but if employees are assigned this task all applicable OSHA standards must be complied with – see below.
 - If the employer will have employees perform the cleaning and disinfection, a Job Hazard Assessment for the task that includes the PPE required, chemicals used etc. should be completed with the support of your US Compliance advisor and signed by the employer.
 - The selected disinfectant will need to be evaluated for compatibility with the gown and gloves used by the employees and chemical exposure risks. Additional PPE may be required depending on the disinfectant used. All disinfectants on the [EPA list N](#) are approved for use against SARS-CoV-2. A hydrogen peroxide-based product on the EPA list N is recommended if available and if compatible with the surfaces being cleaned. Hydrogen Peroxide disinfectants tend to be safer for employees and equally effective with short contact times. Properly diluted household bleach is also effective but confirm compatibility with surfaces to be disinfected and follow all safety precautions. The PPE will need to be worn for the entire task including handling the trash.
- The employee(s) performing the cleaning and disinfection will need to be trained on the following topics:
 - i. PPE required for the task
 - ii. How to properly don and doff the gown, gloves and other PPE in a manner that protects the employee and prevents exposure during removal
 - iii. The concepts of cleaning vs. disinfection
 - iv. Disinfectant application method, required contact time (dwell time) and any potential hazards of exposure to the chemicals being used in concentrated and diluted form as per the Hazard Communication Standard
 - v. If the employees performing the cleaning and disinfection could potentially be exposed to blood or other potentially infectious materials all of the Bloodborne Pathogens Occupation Exposure training and related standards also apply.

Am I legally required to notify the local Public Health Department if an employee tests positive?

- Not that U.S. Compliance is aware of at this time. This may vary by state and county. All official sources we have reviewed say “should” and instruct facilities to “contact local health department” as part of their guidance. We recommend reviewing the website for your local health department to determine if it is required in your area.

What if an employee has informed the employer that they have all the signs and symptoms of Covid-19, but they have not been tested as tests are unavailable or their symptoms are mild, and they are not going to be tested and recover at home. Are they required to follow same procedure as if it is confirmed case?

- They are not required to follow the same procedure, but it is recommended. They should inform the employees who were in close contact (see definition below) with the symptomatic, exposed, or positive employee. When informing other employees of the possible exposure they **cannot** identify the symptomatic, exposed, positive employee by name. The following information should be conveyed to the employees who were potentially exposed:

- If the employee of concern is a confirmed (positive test) case, an employee with symptoms or an asymptomatic employee that was exposed to an ill person in their household.
- They should also be informed that any of these constitutes a low risk exposure under most non-healthcare circumstances.
- The exposed employees should be at a minimum instructed to self-monitor for symptoms and the decision to send them home should be based on local health department guidance. The CDC does not offer guidance beyond the self-monitoring (see below next question) and to “contact the local health department”.
- If the employer does not identify the positive or symptomatic employee, they are not in violation of confidentiality laws (ADA). However, any information they receive about the infected or symptomatic employee’s condition is considered confidential medical information and must be treated as such.

Am I required to notify all employees?

- Employers are not legally required to inform the exposed employees but according to the CDC they “should.” If employers want control of the message, we recommend that following notification of the employees who were in close contact with the infected or symptomatic employee they inform all employees and reinforce infection control behavior guidance.
- From the CDC - *If an employee is confirmed to have COVID-19 infection, employers should inform fellow employees of their possible exposure to COVID-19 in the workplace but maintain confidentiality as required by the Americans with Disabilities Act (ADA). The fellow employees should then self-monitor for symptoms (i.e., fever, cough, or shortness of breath).*

How does the CDC define “close contact”?

- **Close contact is defined by the CDC as** - *being within approximately six feet (two meters) of a COVID-19 case for a prolonged period of time; close contact can occur while caring for, living with, visiting, or sharing a healthcare waiting area or room with a COVID-19 case*
- **What is considered prolonged period of time?** - *Data are insufficient to precisely define the duration of time that constitutes a prolonged exposure. Recommendations vary on the length of time of exposure from 10 minutes or more to 30 minutes or more. In healthcare settings, it is reasonable to define a prolonged exposure as any exposure greater than a few minutes because the contact is someone who is ill. Brief interactions are less likely to result in transmission; however, symptoms and the type of interaction (e.g., did the person cough directly into the face of the individual) remain important.*
- Sharing the same bathroom or equipment is considered a very low risk exposure. If other employees were not physically in close contact to the infected employee and if they were following the other guidance regarding cleaning, handwashing, face touching etc. it would not be considered an exposure, but those areas and equipment should all be included in the cleaning and disinfection process as this fomite based transfer is still thought to be a source of viral transmission.

Thank you for visiting our COVID-19 Resource Center. We are committed to identifying, developing and updating resources to help the manufacturing community respond to the coronavirus pandemic. If you need more information, please email: covidresponse@uscompliance.com. Thank you for your support and we look forward to working through this challenge together!