

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

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 potential scenarios. Therefore, we at U.S. Compliance are currently recommending that you:

- Contact U.S. Compliance 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.
- 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 enquire about the status of the employer’s infection control & prevention plan and compliance with any relevant executive orders.

EMPLOYEE WITH POSITIVE TEST– WHAT DO WE DO?

1. CONTACT YOUR US COMPLIANCE ADVISOR FOR GUIDANCE – IF NEEDED

2. CONDUCT CONTACT TRACING EXERCISE:

- a. Conduct contact tracing for all employees with a positive test result and presumptive positives based on reported symptoms (fever, new loss of taste or smell).
- b. Contact employee with positive test result by phone if possible. If not possible, follow all protective measures (masking, social distancing, etc.) for an in-person conversation.
- c. Determine who the employee was in close contact (see definition in FAQ section at end of this document) with while at work for 48 hours prior to the onset of symptoms or if asymptomatic the employee’s test sampling date. Also, ask if employee was in close contact with other employees during off hours for the same time period.
- d. Determine all the locations the employee visited within the facility since the last thorough cleaning.
 - i. If longer than 7 days since employee was last on site, no specific disinfection is required.
- e. 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.
- f. Inform symptomatic employee to contact their healthcare provider for further instructions and let them know when they can return to work based on guidance located [below](#).

3. NOTIFY ERT – IMPLEMENT INFECTION PREVENTION PLAN

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

4. 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 and when to end quarantine or self-isolation. Summary of CDC guidance regarding quarantine of employees identified as a close contact can be found [here](#).

5. 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.

EMPLOYEE HAD A POSITIVE TEST OR EXPOSURE– WHEN CAN THEY RETURN TO WORK?

Recommendations for quarantine and discontinuation of isolation, based upon an employee's symptoms and testing status are below. The CDC and most state departments of health do not recommend a test-based strategy to discontinue isolation and/or return to work. For people that previously tested positive for COVID-19 who remain asymptomatic after recovery, retesting is not recommended within 3 months after the date of symptom onset for the initial COVID-19 infection.

The following details the Return to Work Guidance as is recommended by the CDC for common workplace scenarios:

1. IF AN EMPLOYEE REPORTS SYMPTOM(S) WHILE AT WORK OR IS IDENTIFIED AS SYMPTOMATIC DURING EMPLOYEE SYMPTOM SCREENING AT THE FACILITY:

- Immediately separate symptomatic employee from other employees
- Send employee home as soon as possible – safe transport if employee uses public transportation, rideshare or carpools
- Provide employee with information regarding how to get tested for current infection (PCR or antigen)
- Follow instructions below for an employee that is symptomatic and awaiting Covid-19 test results

2. IF AN EMPLOYEE IS SYMPTOMATIC AND AWAITING COVID-19 TEST RESULTS:**

- They should stay home, away from others, or under isolation precautions until results are available.
- If results are delayed, follow guidance for symptomatic and tested positive for COVID-19
- Once results are available, follow the recommendations below based on results.

3. IF AN EMPLOYEE IS SYMPTOMATIC AND TESTED POSITIVE FOR COVID-19 BY PCR OR ANTIGEN TESTING:

- They should stay home away from others or under isolation precautions until:
 - At least 10 days* have passed since symptoms first appeared; AND

- At least 24 hours have passed since last fever without the use of medicine that reduces fevers; AND
 - Other symptoms have improved.
- 4. IF AN EMPLOYEE IS SYMPTOMATIC AND TESTED NEGATIVE** FOR COVID-19 BY PCR OR ANTIGEN TESTING:**
- They should stay home away from others or under isolation precautions until:
 - At least 10 days* have passed since symptoms first appeared; AND
 - At least 24 hours have passed since last fever without the use of medicine that reduces fevers; AND
 - Other symptoms have improved.
- 5. IF AN EMPLOYEE IS SYMPTOMATIC AND HAS NOT BEEN TESTED** FOR COVID-19 BY PCR OR ANTIGEN TESTING:**
- They should stay home away from others or under isolation precautions until:
 - At least 10 days* have passed since symptoms first appeared; AND
 - At least 24 hours have passed since last fever without the use of medicine that reduces fevers; AND
 - Other symptoms have improved.
- 6. IF AN EMPLOYEE IS ASYMPTOMATIC AND TESTED POSITIVE FOR COVID-19 BY PCR OR ANTIGEN TESTING:**
- They should stay home away from others or under isolation precautions until:
 - At least 10 days* have passed since specimen collection of the first positive COVID-19 PCR/antigen testing while asymptomatic.
 - If symptoms develop, follow guidance for symptomatic and tested positive for COVID-19.
- 7. IF AN EMPLOYEE IS ASYMPTOMATIC AND TESTED POSITIVE** FOR COVID-19 BY SEROLOGY (ANTIBODY BLOOD TEST):**
- No isolation is required since there is a low likelihood of active infection
 - Take everyday precautions to prevent the spread of COVID-19.
- 8. IF A CRITICAL/ESSENTIAL EMPLOYEE IS A CLOSE CONTACT OF A CONFIRMED CASE BUT IS ASYMPTOMATIC AND TESTED NEGATIVE** FOR COVID-19 BY PCR OR ANTIGEN TESTING:**
- See ** below before allowing employee to return-to-work.
- 9. IF AN EMPLOYEE HAS OTHER NON-COMPATIBLE SYMPTOMS AND HAS NOT BEEN TESTED FOR COVID-19:**
- They should stay home away from others or under isolation precautions until:
 - At least 24 hours have passed since last fever without the use of medicine that reduces fevers; AND
 - Other symptoms have improved.

*An employee who had severe/critical illness or is severely immunocompromised should:

- If symptomatic, stay home away from others or under isolation precautions until:

- At least 20 days have passed since symptoms first appeared; AND
- At least 24 hours have passed since last fever without the use of medicine that reduces fevers; AND
- Other symptoms have improved.
- If asymptomatic, stay home away from others or under isolation precautions until:
 - At least 20 days have passed since specimen collection of the first positive COVID-19 PCR/antigen testing while asymptomatic. If symptoms develop, follow guidance for symptomatic and tested positive for COVID-19.

**An employee who had known close contact with a confirmed COVID-19 case should quarantine for 14 days from their last exposure to the case. However, individuals may be eligible for the acceptable options to shorten quarantine outlined below. Individuals may use the alternatives only if the following conditions are met:

- Individual does not live in a congregate setting; AND
- No clinical evidence of COVID-19 has been elicited by daily symptom monitoring during the entirety of quarantine up to the time at which quarantine is discontinued; AND
- Daily symptom monitoring continues through quarantine Day 14; AND
- Strict adherence to all recommended non-pharmaceutical interventions (e.g., correct, and consistent mask use, physical distancing) continues through quarantine Day 14. If symptoms develop, they should immediately self-isolate and contact the health department or their healthcare provider to report this change in clinical status.

EMPLOYEE IS QUARANTINING– ARE THERE WAYS WE CAN SHORTEN QUARANTINE?

The following options to shorten quarantine are acceptable alternatives if the conditions above are met:

- Quarantine can end on Day 11 (i.e., quarantine at home for 10 full days) without testing and if no symptoms have been reported during daily monitoring. There is an increased risk of transmission with the shorter period of quarantine estimated by the CDC to be between 1%-10%.
- Quarantine can end as early as Day 8 (i.e., quarantine at home for at least 7 full days) if a specimen tests negative by PCR testing and if no symptoms were reported during daily monitoring. The specimen must be collected and tested no earlier than Day 6 (i.e., after at least 5 full days) following their last known exposure, and quarantine still cannot be discontinued earlier than Day 8. However, if they test positive for COVID-19 by PCR testing, they should follow the relevant isolation guidance. There is an increased risk of transmission with the shorter period of quarantine estimated by the CDC to be between 5%-12%.



Image: <https://www.fdlco.wi.gov/departments/departments-f-m/health-department/covid-19-coronavirus/close-contact-of-someone-with-covid-19>

Critical infrastructure workers should follow guidance that includes special consideration for these groups.

- Employers may consider allowing exposed and asymptomatic critical infrastructure workers to continue to work in select instances when it is necessary to preserve the function of critical infrastructure workplaces. This option should be used as a last resort and only in limited circumstances, such as when cessation of operation of a facility may cause serious harm or danger to public health or safety.

GLOSSARY OF TERMS:

1. CLOSE CONTACT:

- a. Close contact* for COVID-19 is defined as any of the following exposures to an individual during their infectious period:
 - Individual who was within 6 feet of an infected person for a cumulative total of 15 minutes or more over a 24-hour period**
 - Individual providing care in a household without using recommended infection control precautions
 - Individual who has had direct physical contact (hugging or kissing)
 - Individual who has shared eating and/or drinking utensils, and
 - Individual who has been sneezed on, coughed on, or got respiratory droplets on them.

*Close contact does not include healthcare providers or EMS providers using appropriate PPE and implementing appropriate infection control practices.

**Individual exposures added together over a 24-hour period (e.g., three 5-minute exposures for a total of 15 minutes). Data are limited, making it difficult to precisely define “close contact;” however, 15 cumulative minutes of exposure at a distance of 6 feet or less can be used as an operational definition for contact investigation. Factors to consider when defining close contact include proximity (closer distance likely increases exposure risk), the duration of exposure (longer exposure time likely increases exposure risk), whether the infected individual has symptoms (the period around onset of symptoms is associated with the highest levels of viral shedding), if the infected person was likely to generate respiratory aerosols (e.g., was coughing, singing, shouting), and other environmental factors (crowding, adequacy of ventilation, whether exposure was indoors or outdoors). Because the general public has not received training on proper selection and use of respiratory PPE, such as an N95, the determination of close contact should generally be made irrespective of whether the contact was wearing respiratory PPE. At this time, differential determination of close contact for those using fabric face coverings is not recommended.

2. CONGREGATE SETTING:

- a. Any facility where people living in a group setting share living space (including bathroom or kitchen) AND those living there depend on the facility for:
 - Completion of activities of daily living; OR
 - Student or worker housing (e.g., dormitories or residence halls)
 - Apartments
 - Multi-generational or multi-family homes

3. INFECTIOUS PERIOD:

- a. The timeframe an individual can transmit disease to others. For COVID-19, this starts from 2 days before illness onset (or, for asymptomatic patients, 2 days prior to positive specimen collection) until the time the individual discontinues isolation.

4. ISOLATION:

- a. Separates sick people with a contagious disease from people who are not sick.

5. NON-PHARMACEUTICAL INTERVENTIONS THAT CAN BE PRACTICED BY INDIVIDUALS INCLUDE THE FOLLOWING:

- a. correct and consistent mask use,
- b. physical distancing,
- c. hand and cough hygiene,
- d. environmental cleaning and disinfection,
- e. avoiding crowds,
- f. ensuring adequate indoor ventilation,
- g. and self-monitoring for symptoms of COVID-19 illness.

6. QUARANTINE:

- a. Separates and restricts the movement of people who were exposed to a contagious disease to see if they become sick. For COVID-19, this means staying home or in a private room with a private bathroom for 14 days after last contact with a person who has COVID-19. However, individuals may be eligible for the acceptable options to shorten quarantine outlined [here](#).

7. SEVERE/CRITICAL ILLNESS:

- a. Illness due to COVID-19 that required any intensive care during hospitalization.

8. SEVERELY IMMUNOCOMPROMISED MEANS YOU HAVE:

- Been taking chemotherapy for cancer recently;
- HIV and a CD4 T-cell count 14days); OR
- Another condition that a healthcare provider has told you makes you severely immunocompromised.

9. SYMPTOMATIC: PEOPLE WITH THESE SYMPTOMS MAY HAVE COVID-19:

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

FREQUENTLY ASKED QUESTIONS:

- 1. Am I legally required to notify the local Public Health Department if an employee tests positive?**
 - This varies by state and county. There are counties and states where it is required but for the majority of locations it is not required but recommended. Please refer to the local state or county health department website for guidance on requirements. Links to local health department websites can be found [here](#).
- 2. Am I required to notify all employees?**
 - This varies by state and county. There are counties and states where it is required but for the majority of locations it is not required but recommended. Please refer to the local state or county health department website for guidance on requirements. Links to local health department websites can be found [here](#).
 - 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).*
- 3. If an employee has recovered from Covid-19 and is exposed again or identified as a close contact; do they have to quarantine and be tested again?**
 - For an employee previously diagnosed with COVID-19 who recovered from laboratory-confirmed infection and has met criteria to end isolation and remains asymptomatic, quarantine is not recommended in the event of close contact with an infected person within 3 months of symptom onset of their initial illness or since specimen collection (if asymptomatic) of the first positive COVID-19 PCR/antigen test. However, if an employee is identified as a contact of a new case 3 months or more after symptom onset or since specimen collection (if asymptomatic) of the first positive COVID-19 PCR/antigen test, they should follow quarantine recommendations for contacts.