

Guidance for responding to COVID-19 in the workplace

SOLANO PUBLIC HEALTH | January 2022

This guidance is intended for use by employers that operate in Solano County that are experiencing a case or two of COVID-19 in their workplace. This guidance is **not** intended for managing cases in healthcare or congregate settings.

The recommendations outlined below are by Solano Public Health and may differ from Cal/OSHA or other regulatory agencies; in this instance, follow the requirements mandated by your regulatory agency.

Employers should be proactive and keep in mind that identification of even a single positive case among employees may quickly develop into an outbreak.

- 1. Determine if the staff member was present at the facility while infectious
 - If the staff member had symptoms (fever, chills, new cough, difficulty breathing, sore throat, body or muscle aches, fatigue, loss of taste or smell, headache, congestion or runny nose, loss of appetite, nausea/vomiting, or diarrhea), they are infectious 2 days before their symptoms first appeared until up to 10 days after, although most are infectious through day 5. If the staff member was present at the facility during this time period, they may have exposed other staff members to the disease.
 - i. For example, if a staff member had symptoms on July 3rd their infectious period is July 1st-13th. If they were at the facility from July 1st-13th, they may have exposed other staff members.
 - If the staff member had no symptoms, they are infectious 2 days before they were tested (or they
 were swabbed) until up to 10 days after, although most are infectious through day 5. If the staff
 member was present at the facility during this time period, they may have exposed other staff
 members to the disease.
 - ii. For example, if a staff member was tested/got swabbed on July 3rd their infectious period is July 1st-13th. If they were at the facility from July 1st-13th, they may have exposed other staff members.
 - If the staff member was not present at the facility during their infectious period none of the other staff members are considered exposed.
 - Return to work

 We ask that you not request a staff member to provide a return-to-work letter from Solano Public Health. Also, healthcare provider offices and medical facilities may be extremely busy and not able to provide a letter in a timely manner.
 - Solano Public Health does not recommend retesting of positive individuals after 10 days of symptom onset (10 days after testing. If no symptoms). In many situations, remnants of the virus remain in the body for up to 12 weeks, and will cause a positive test result; however, the person is no longer contagious after a certain number of days have passed:
 - For most staff members (those who do not have severely immunocompromised conditions** and have mild to moderate illness), they may return to work:
 - i. 5 days after their symptoms first appeared; AND
 - ii. 24 hours have passed since they had a fever without them taking a feverreducing medication; AND
 - iii. Either they no longer have symptoms, or their symptoms have gotten better; OR



- iv. For those with no symptoms, 5 days after they were swabbed or tested.
- v. Staff members should adhere to a total of **10 days of wearing a well-fitting mask**, from when they started showing symptoms or from when they tested (for those with no symptoms) when around others, regardless of whether they have symptoms or not.

In the above example, the staff member is most infectious from July 1st-8th. If their symptoms have gotten better and it has been at least 24 hours since their fever is gone (without using any anti-fever medication), they may return to work on July 9th, at the earliest. If they still have a fever on July 9th, they need to stay home until 24 hours after their fever has resolved without using a fever-reducing medication

- Staff members that are/were severely* or critically ill* or have conditions that severely compromise their immune system* are considered contagious for 20 days after their symptoms first appeared and 24 hours have passed since they had a fever without them taking a fever-reducing medication (or for those with no symptoms, 20 days after they were swabbed or tested).
- Note: Infected staff members can remain infectious up to 10 days after symptoms appear and/or positive test. The 5-day isolation period, followed by 5-day mask period of wearing, helps to both safeguard the community and minimize negative workplace impact. Also, your workplace may have to follow Cal/OSHA guidance for when staff can return to work. This guidance can be found at: https://www.dir.ca.gov/dosh/coronavirus/

2. Identify close contacts

Maintaining the privacy of employees is a **must**. Remember, according to Public Law (Americans with Disabilities Act and Health Insurance Portability and Accountability Act), you, the employer, must **maintain employees' privacy**. **Do not** name anyone who is sick unless they give you permission.

- Determine the last day that the staff member with COVID-19 was at the workplace.
- If you determine that they were at work during their infectious period, identify who had close contact with the person.
 - A close contact is any individual within 6 feet for more than 15 minutes without a facial covering in place (for both the infected and exposed employees), having direct face-to-face contact, sharing food or eating utensils with the case, or being coughed or sneezed on by the case.
- Close contacts may continue to work as long as they remain without symptoms. Advise the staff member to wear a mask, keep a distance of at least 6 feet and practice hand hygiene guidelines while in the facility.
- Close contacts should self-monitor for symptoms for 14 days after the last day of exposure.
- If symptoms develop, have them refrain from working and get tested with their provider or through the other community testing sites (
- **NOTE:** Your workplace may have to follow Cal/OSHA guidance for when staff can return to work. This guidance can be found at: <u>https://www.dir.ca.gov/dosh/coronavirus/</u>

3. Closing the facility

In general, Solano Public Health does not recommend or determine facility closure. The determination to close is left up to the facility. For cleaning and disinfecting an area or a facility following identification of a positive staff, pls see Section 4 below.



4. Clean and disinfect thoroughly

Cleaning includes:

- Open outside doors and windows to increase air circulation in the area, if possible.
- Clean and disinfect all areas used by the staff member, such as offices, bathrooms, common areas, shared electronic equipment like tablets, touch screens, keyboards, and remote controls.
- Clean dirty surfaces with soap and water before disinfecting them.
- Disinfect frequently touched surfaces including doorknobs, tabletops, counters, phones, keyboards, and fixtures on an ongoing basis. To disinfect surfaces, use products that meet EPA criteria for use against SARS-Cov-2, the virus that causes COVID-19. The list can be found at: https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2-covid-19
- The CDC cleaning and disinfection recommendations can be found at: https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html

5. Educate and train employees on good hand hygiene and how they can reduce the spread of COVID-19:

- Post the CDC printable flyer in the workplace: <u>https://www.cdc.gov/coronavirus/2019-ncov/downloads/Essential-Critical-Workers_Dos-and-Donts.pdf</u>
- Post and circulate or email information advising any or all of the following social distancing best practices:
 - Hand hygiene.
 - Cough and sneeze etiquette: cover your mouth and nose with a tissue when you cough or sneeze or use the inside of your elbow. Throw used tissues in the trash and immediately wash hands with soap and water for at least 20 seconds. If soap and water are not available, use hand sanitizer containing at least 60% alcohol.
 - Avoid close contact with sick persons.
 - Wear facial coverings when in public and within 6 feet of others indoors at the workplace.
 - Avoid touching eyes, nose, and mouth with unwashed hands.
 - Avoid sharing personal items with co-workers (i.e. dishes, cups, utensils, towels, pens).
 - Avoid using other employees' phones, desks, offices, or other work tools and equipment, when possible. If necessary, clean and disinfect them before and after use.
 - Clean AND disinfect frequently touched objects and surfaces such as workstations, keyboards, telephones, handrails, and doorknobs. Dirty surfaces can be cleaned with soap and water prior to disinfection.
 - Stay home if you are sick, except to get medical care.
 - Inform your supervisor if you have a sick family member at home with COVID-19.

6. Other General and Ongoing Recommendations

- Designate a workplace infection prevention coordinator to implement COVID-19 infection prevention procedures and to manage COVID-related issues among employees.
- Instruct employees to stay home if they are ill.
- Develop mechanisms for tracking exposed cases among employees.
- Ensure that sick leave policies are sufficiently generous and flexible to enable employees who are sick or those who are exposed to stay home without penalty.
- California has additional services for employees, including supplemental paid sick leave for food sector workers at companies with 500 or more employees nationwide.
- The Families First Coronavirus Response Act requires certain employers to provide employees with paid sick leave or expanded family and medical leave for specified reasons related to COVID-19.



Employers may also consult:

- CDC guidance for businesses and small businesses for information on preventing outbreaks;
- Cal/OSHA guidance to ensure that they are complying with legal requirements for worker protection;
- The California statewide industry-specific guidance to reduce risk during and after reopening of businesses.

Understand requirements for reporting employee cases to Cal/OSHA.

- Any serious injury, illness, or death occurring in any place of employment or in connection with any employment must be reported by the employer to the local Cal/OSHA district office immediately. For COVID-19, this includes inpatient hospitalizations and deaths among employees.
- Employers should report serious injury, illness, and death, including hospitalization and death from COVID-19, even if work-relatedness is uncertain.
- Cal/OSHA prefers calls by phone but will also accept email reports (Cal/OSHA Accident Report inbox). Details on reporting, contact information for district offices, and the Title 8 section 342 requirement are available online.

Resources:

CDC FAQs for businesses: <u>https://www.cdc.gov/coronavirus/2019-ncov/community/general-business-faq.html</u> CDC isolation update 27 December 2021: <u>https://www.cdc.gov/media/releases/2021/s1227-isolation</u> Cal/OSHA guidance: <u>https://www.dir.ca.gov/dosh/coronavirus/</u> OSHA FAQ: <u>https://www.osha.gov/coronavirus/faqs</u>

DEFINITIONS:

*Severe illness – individuals with respiratory frequency >30 breaths/min, saturation of oxygen (SpO2)<94% on room air at sea level (or, for patients with chronic hypoxemia, a decrease from baseline of >3%), ratio of arterial pressure of oxygen to fraction of inspired oxygen (PaO2/FiO2)<300mmHG, of lung infiltrates >50%.

*Critical illness – individuals with respiratory failure, septic shock and/or multiple organ dysfunction.

**Severely immunocompromised – individuals who are on chemotherapy for cancer, have untreated HIV infection with CD4 T lymphocyte count <200, have combined primary immunodeficiency disorder or are on prednisone>20mg/day for more than 14 days. Ultimately, the degree of immunocompromise for the patient is determined by the treating provider.