



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

June 5, 2020

Revised July 29, 2020 (new material underlined)

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

This advisory supersedes guidance from the New York State Office for People With Developmental Disabilities (OPWDD) pertaining to the COVID-19 outbreak, entitled “Updated Protocols for Personnel in Clinical and Direct Care Settings to Return to Work Following COVID-19 Exposure or Infection,” released on March 28, 2020. This guidance applies to all facilities and services certified by OPWDD.

- A. Providers may allow clinical and direct support professionals or other facility staff who have **been exposed to a confirmed case of COVID-19**, or who have traveled internationally in the past 14 days to return to work if all of the following conditions are met:
1. Furloughing such personnel would result in staff shortages that would adversely impact operation of the provider.
 2. Personnel who have been in contact with confirmed or suspected cases are **asymptomatic**.
 3. Personnel who are asymptomatic contacts of confirmed or suspected cases should self-monitor twice a day (i.e. temperature, symptoms), and undergo temperature monitoring and symptom checks at the beginning of each shift, and at least every 12 hours during a shift.
 4. Personnel who are asymptomatic contacts of confirmed or suspected cases should wear a facemask while working, until 14 days after the last high-risk exposure.
 5. 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).
 6. Personnel allowed to return to work under these conditions should maintain self-quarantine when not at work.
 7. 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. Providers may allow personnel who have traveled in the past 14 days to a state with a significant degree of community spread of COVID-19 (see guidance at https://coronavirus.health.ny.gov/system/files/documents/2020/06/interimguidance_traveladvisory.pdf), whether healthcare providers or other facility staff (hereinafter “employees”), to work if all of the following conditions are met:

1. Employees are asymptomatic.
2. Employees received diagnostic testing for COVID-19 within 24 hours of arrival in New York.
3. Employees self-monitor twice a day (i.e. temperature, symptoms), and receive temperature monitoring and symptom checks at the beginning of each shift, and at least every 12 hours during a shift.
4. Employees must wear a facemask while working.
5. To the extent possible, employees working under these conditions should preferentially be assigned to patients at lower risk for severe complications, as opposed to higher-risk patients (e.g. severely immunocompromised, elderly).
6. Employees allowed to return to work under these conditions should maintain self-quarantine when not at work.
7. At any time, if an employee 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.

C. Providers may allow personnel with **confirmed or suspected COVID-19**, whether direct care professionals, clinical staff or other facility staff, to continue to work 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.
4. Personnel who are recovering from COVID-19 and return to work after 10 days should

wear a facemask while working until symptoms have completely resolved, so long as mild symptoms are improving, if they persist.

5. In the **rare** instance when a staff member with unique or irreplaceable skills critical to the care of individuals is affected by COVID-19, the healthcare entity may contact OPWDD to discuss alternative measures to allow such staff member to safely return to work before 10 days have elapsed.

Personnel who are furloughed due to isolation, or because they do not meet the above conditions for returning to work, qualify for paid sick leave benefits, and their employers can provide them with a letter confirming this, which can be used to demonstrate eligibility for the benefit.

General questions or comments about this advisory can be sent to Susan Predergast, OPWDD Statewide Director of Nursing Services, at susan.b.predergast@opwdd.ny.gov.