

# Aspirus Emergency System Wide Policy COVID-19

## Communicating Employee Exposure after Positive COVID-19 Test Result

**Approved 03.30.2020**

### **Process:**

In order to effectively identify and communicate exposure, we all need to do our part in protecting ourselves and our patients. It is extremely important that HCWs follow the PPE policy for all precautions, document all fields on the TRACKING FORM FOR HEALTH CARE WORKER IN PATIENT ROOMS for all suspected and confirmed COVID-19 patients, and fax to local Infection Prevention.

Upon receiving notification from Lab of a positive COVID-19 test result:

1. Infection Prevention notifies local Health Department immediately
2. Infection Prevention and Public Health identifies infectious period
  - a. Infection Prevention utilizes most recent recommendation for defining infectious period
  - b. Public Health may communicate different/updated infectious time period
  - c. If the positive result is an Aspirus employee, the process will be completed by Managers/Directors and Employee Health. (Now go to #6 below to continue process)
3. Infection Prevention and Public Health identifies all encounters during infectious period
4. Infection Prevention identifies exposed HCWs (may utilize Labor Pool or other staff to assist)
  - a. Infection Prevention conducts chart review
  - b. Infection Prevention reviews Tracking Forms for Healthcare Worker in Patient Rooms
  - c. Engage Risk Manager in checking for related SafetyZone events and potentially other exposed HCWs
5. Infection Prevention communicates exposure
  - a. Call managers regarding exposure prior to email
  - b. Send email (using email template) of list of exposed HCW and Exposure Follow-up Steps and Expectations document to managers
  - c. Send a summary of exposure to local Incident Command
6. Managers verify spreadsheet of exposed HCW in their department by reviewing schedules and workflows to identify any other exposed HCWs
  - a. Infection Prevention will send spreadsheet for Patient to Employee exposure
  - b. Employee Health will send spreadsheet for Employee to Employee exposure
7. Managers contact exposed HCWs and inform them of required next steps:
  - a. Managers to provide HCWs the Exposure Follow-up Steps and Expectations document
  - b. Managers to immediately remove exposed HCWs from schedule, in order to promptly remove risk of additional exposure
  - c. Managers may utilize local Incident Command (to utilize Labor Pool) to recruit help to contact HCWs who have been exposed
8. Managers complete verified spreadsheet of exposed HCW and send to Employee Health

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9. Employee Health contacts HCW to follow up on exposure
  - a. Determine level of exposure risk
  - b. Inform HCW of next steps based on risk and CDC guidance
  - c. Employee Health completes SafetyZone event with HCW
10. Employee Health communicates leaves and duration of leaves to respective managers, HR Business Partners and Leave Management Services
11. Employee Health communicates exposure summary to local Incident Command
12. Employee Health supervises self-quarantined HCW per Public Health
13. Employee Health clears HCW to return to work and communicates this with the HCW and their manager, HR Business Partners and Leave Management Services

If additional exposed HCWs are identified, managers should follow this process beginning with Step 7.

If exposed HCW develops symptoms, Employee Health will notify respective managers, HR Business Partners and Leave Management Services.

### **\*Additional Considerations and Recommendations:**

While contact tracing and risk assessment, with appropriate implementation of HCP work restrictions, of potentially exposed HCP remains the recommended strategy for identifying and reducing the risk of transmission of COVID-19 to HCP, patients, and others, it is not practical or achievable in all situations. Community transmission of COVID-19 in the United States has been reported in multiple areas. This development means some recommended actions (e.g., contact tracing and risk assessment of all potentially exposed HCP) are impractical for implementation by healthcare facilities. In the setting of community transmission, all HCP are at some risk for exposure to COVID-19, whether in the workplace or in the community. Devoting resources to contact tracing and retrospective risk assessment could divert resources from other important infection prevention and control activities. **Source:** Per CDC guidelines retrieved on 3/27/2020

\*In the event of sustained community transmission, the outlined process for exposure tracing and risk assessment will be reviewed by each Business Unit's Incident Command and recommendations to eliminate this process and develop new plans for monitoring employees may be considered.