



Guidance on Employees Exposed To COVID-19 OR Experiencing Symptoms of COVID-19

Last Updated: 4/17/2020

Guidance Overview:

This document offers guidance on how homeless service providers should respond when employees are showing symptoms consistent with COVID-19. This guidance also explains what providers should do when an employee has been identified as having been in close contact (see definition below) with another employee or a client who has been tested for COVID-19.

1. Who does this guidance apply to?

All DHS Homeless Service Providers

2. What is the definition of close contact?

According to the DC Department of Health, close contact is defined as:

1. Being within approximately 6 feet of a COVID-19 case for a prolonged period of time; OR
2. Having direct contact with infectious secretions of a COVID-19 case (e.g. being coughed on).

Note: The definition of close contact does not include all individuals on the same floor or in the same building as a positive employee or client, unless they meet criteria (1) or (2), listed above. Close contact also does not include short encounters, such as passing a person in the hallway.

3. What should providers do if an employee has been in close contact with an individual who has tested positive for COVID-19?

If an employee has been in close contact with an individual who has tested positive, the employee should contact their employer to inform them of their possible exposure immediately.

If the employee is also experiencing ANY of the following symptoms: coughing, fever, or shortness of breath, the employee should **immediately** self-isolate at home and should contact their primary care physician to see if additional testing is necessary. Any staff who are asked to self-isolate should be given a letter providing further instructions. Providers can adapt the attached template from the DC Department of Health.

If the employee is not experiencing symptoms, the provider has discretion to decide whether the employee should be sent home or can continue work. If the employee continues work, the employee should be closely monitored, and should be **immediately** sent home if she/he develops ANY symptoms.



4. What should providers do if an employee demonstrates symptoms of COVID-19 while on-site?

If an employee demonstrates a fever and/or has new or worsening cough while on-site, the employee should be sent home **immediately**. The employee should be encouraged to call their primary health provider to see if additional testing is needed.

5. What should providers do if an employee has tested positive for COVID-19?

Once the provider is notified or becomes aware of an employee who received a positive test result for COVID-19, the provider should **immediately** take the following steps:

- **Confirm Dates.** Make note of the days the employee who tested positive worked and where they worked. Also make note of the day the employee started showing symptoms [fever, coughing, shortness of breath].
- **Identify others.** Identify clients or employees who had close contact with the employee who tested positive for COVID-19. Staff should identify individuals who had close contact with that person at any time while that person was symptomatic and two days before the person became symptomatic.
- **Notify DHS of positive cases by completing this [FORM](#).** **Please note:** Access to this information is highly restricted. This form should not be confused with the general staffing tracker, available [HERE](#), which tracks general staffing trends/needs.
- **Implement cleaning plan.** Rooms or areas previously occupied by the staff should receive a deep cleaning:
 - Please see [CDC Environmental Cleaning and Disinfection Recommendations](#) for guidance on how to clean the area.
 - Please refer to [EPA registered products](#) that can be used against COVID-19.

6. What should providers do if they experience staffing shortages?

Providers should notify DHS as soon as possible about any anticipated staffing shortages that may impact operations by contacting:

For DHS Providers: Contact your contract or grant administrator

For TCP Providers: Contact TCP

Providers should consider re-purposing staff as needed to cover staffing shortages, such as by asking case managers to provide operations support at the shelters.

7. When is it safe for employees who have tested positive for COVID-19 or have experienced COVID-19 symptoms to return to work?

Any employee who have had confirmed COVID-19 positive tests results must present their supervisor with written documentation from a healthcare professional stating that they are approved to return to work before returning to work.



If the employee was never tested for COVID-19 but has an alternate diagnosis (e.g., tested positive for influenza), criteria for return to work should be based on that diagnosis.

Persons with COVID-19 who have symptoms and were directed to care for themselves at home and were never tested may discontinue isolation and return to work under the following conditions:

- At least 3 days (72 hours) have passed *since recovery* - defined as resolution of fever without the use of fever-reducing medications; and
- Improvement in respiratory symptoms (e.g., cough, shortness of breath); and,
- At least 7 days have passed *since symptoms first appeared*.

8. How can essential workers stay safe?

Please see guidance from the DC Department of Health: *Coronavirus 2019 (COVID-19): Guidance for Essential (Non-Healthcare) Workers on How to Stay Safe in the Workplace*. This contains a list of recommendations that essential workers should follow to help protect themselves and other members of the community.

Please also see Mayor's Order 2020-063, *Extensions of Public Emergency and Public Health Emergency and Measures to Protect Vulnerable Populations During the COVID-19 Public Health Emergency*, issued April 15, 2020, that designates individuals who provide direct support services within congregate care settings (including shelters) as essential health care providers.

This designation allows those staff members to get access to testing if staff become symptomatic. Please see [HERE](#) for more information on how to access testing.

9. What other protective measures should providers take?

Consistent Mayor's Order 2020-063, *Extensions of Public Emergency and Public Health Emergency and Measures to Protect Vulnerable Populations During the COVID-19 Public Health Emergency*, issued April 15, 2020, we ask providers to take the following protective measures (if not already underway):

- Inform all employees in writing that they should not come to work if sick and of applicable paid leave provisions;
- Inform all employees in writing of social distancing protocols;
- If feasible, separate all employee workstations by at least six (6) feet or stagger employee shift times or duties to maintain social distance;
- Require all employees working on site to wear a mask or face covering;
- Ensure that all employees have consistent access to running water and soap; tissues and lined trash receptacles; store-bought alcohol-based hand sanitizer that contains at least sixty percent (60%) alcohol if permitted in the facility; and disinfectant spray or wipes;



- Implement the following practices to mitigate the risk of transmission within facilities and residences:
 - Any employee witnessing an individual exhibiting symptoms of COVID-19 shall notify the person in charge;
 - Direct individuals exhibiting symptoms of COVID-19 to medical care or secure such care and determine or direct the individual to determine whether testing is available for COVID-19.

10. Where can I turn if I have additional questions?

For questions or additional information, please email dhs.covid19@dc.gov or visit coronavirus.dc.gov.

Attachments:

- TEMPLATE – letter to exposed staff