

Section 1: Asymptomatic Healthcare Workers and Employees

On March 15, 2020, NYC Department of Health & Mental Hygiene (DOHMH) issued directions on how to manage and monitor all ASYMPTOMATIC healthcare workers for COVID-19, regardless of exposure in the community or healthcare setting. DOHMH has asked that **ALL** healthcare workers and employees **self-monitor** by taking their temperature twice daily and assessing for COVID-19 like illness.

Signs and symptoms of COVID-19 include (Updated by the CDC April 25, 2020):

- Fever (temperature greater than 100° Fahrenheit)
- Shortness of breath
- New onset persistent cough
- Nasal congestion & runny nose <u>not</u> associated with seasonal allergies
- Sore throat
- New loss of taste or smell

Chills

OR at least two of these symptoms:

- Muscle pain
- Headache

If you have recently traveled, and do not have mandated quarantine restrictions, and have no symptoms of COVID-19, you are able to return to work or school.

• Healthcare workers / employees who do not have any of COVID-19 symptoms should report to work, regardless of known COVID-19 exposure, unless they have been instructed by their supervisor/ manager to work from home.

Staff, who are concerned that they may have the COVID-19 virus but have not developed symptoms, may request a nasopharyngeal swab (PCR) test.

- Staff are limited to one COVID-19 PCR test every 28 days
- Healthcare workers who are antibody positive against SARS CoV-2 (COVID-19) will not qualify for PCR testing unless they develop new symptoms for COVID-19
- Staff with previously positive PCR test are not eligible for retesting

Appointments for PCR testing are made through EHS by completing the EHS REDcap survey. To access the tool click <u>EHS REDCap</u> (<u>https://is.gd/employee_covid_registry</u>) or scan this QR code.

If an employee does not have internet access, they can call 212-844-1100, and a member of the EHS will assist you to register in the REDCap tool.

*Note: Daily PCR testing is limited due to lab capacity

The above guidance is subject to change based on local, state and federal health authority guidelines.





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Section 2: Asymptomatic Healthcare Workers & Employees with Positive PCR Test for COVID-19

If the healthcare worker is asymptomatic but was tested and found to be positive, they must not report to work for at least 10 days after the date of the positive test.

If they develop symptoms during that time, they must not report to work for 10 days after symptom onset, and must have been fever-free for at least 72 hours without taking fever reducing medications (e.g. aspirin, acetaminophen), along with resolving respiratory symptoms.

Section 3: Symptomatic Healthcare Workers and Employees

If healthcare workers or other employees develop any of the above signs and symptoms, they should not report to work. If any signs and symptoms occur while working, the healthcare worker/employee **MUST** immediately leave the patient care area and inform their supervisor.

<u>ALL</u> employees with COVID related symptoms <u>MUST</u> notify Employee Health Service (EHS) via the online EHS REDCap tool. **To access the tool click <u>EHS REDCap</u>** (<u>https://is.gd/employee_covid_registry</u>) **or scan this QR code.**



Upon your registration, a member of the EHS team will call you within 24 hours.

Employees that have <u>active COVID-19 symptoms</u> are eligible for the nasopharyngeal swab (PCR test).

- PCR testing is indicated when someone has developed acute COVID-19 symptoms
 - a. <u>One of the following</u>: Fever [>100° F], cough, shortness of breath or difficulty breathing, sore throat, runny nose **not** associated with seasonal allergies, new loss of taste or smell, <u>OR</u>
 - b. <u>Two of the following</u>: chills, muscle pain, headache

If you want to be tested, a member the EHS team will schedule an appointment for you at a MSHS testing site. When completing REDCap, you are able to request testing. Employees do NOT need to also call and/or email to notify EHS.

If an employee does not have internet access, they can call 212-844-1100, and a member of the EHS will assist you to register in the REDCap tool.

Symptomatic employees should NOT walk into their local EHS sites, but follow the protocol outlined above.

If someone has worsening symptoms, such as difficulty breathing, please contact your doctor and/or go to the nearest urgent care center or emergency department for immediate attention.

Personnel are able to return to work 10 days after symptom onset and being consistently afebrile (temperature < 100° Fahrenheit) for at least 72 hours without taking fever reducing medications (e.g. aspirin, acetaminophen), along with resolving respiratory symptoms.

WHAT (you should do)

• Rest, staying hydrated, and sleep are typically helpful in your recovery.



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- Manage and treat your symptoms with fluids and medicines for fevers, cough, and other cold symptoms.
- Call your doctor if you start to feel worse (increased congestion, coughing or fevers).
- Seek emergency medical treatment if you have difficulty breathing

HOW (guidelines for hand washing and germ management)

- Clean your hands often. Wash your hands with soap and water for at least 20 seconds. If soap and
 water are not available, clean your hands with an alcohol-based hand sanitizer that contains at
 least 60% alcohol, covering all surfaces of your hands and rubbing them together until they feel
 dry. Soap and water should be used preferentially if hands are visibly dirty.
- Avoid touching your eyes, nose, and mouth with unwashed hands.

Cover your mouth and nose with a tissue when you cough or sneeze. Throw used tissues into a lined trash can. Immediately wash your hands with soap and water or hand sanitizer

Section 4: Employees and Healthcare Workers with Exposures in the Healthcare Setting

With the COVID-19 pandemic, at this time, contact investigations are not being performed in the hospital. In the event of a reported high-risk exposure (i.e. unprotected contact (> 10 minutes) with a confirmed COVID-19 patient or unprotected contact during an aerosolizing procedure performed on a COVID-19 patient), healthcare workers may report to work as long as they are asymptomatic and will be actively monitored by EHS.

Healthcare workers who have experienced a high-risk exposure need to report it immediately to their supervisor. Additionally, <u>all</u> employees with a reported high-risk exposure MUST notify EHS via the EHS online EHS tool. **To access the tool click** <u>EHS REDCap</u> (<u>https://is.gd/employee_covid_registry</u>) or scan this QR code.



If an employee does not have internet access, they can call 212-844-1100, and a member of the EHS will assist you to register in the REDCap tool.

These personnel will be required to wear a surgical mask throughout their shift and **self-monitor for 14 days** by taking their temperature twice daily and assessing for COVID-19 like illness. Temperatures and symptom log **must** be submitted to EHS electronically. EHS will provide guidance on this process when the incident is reported. Additionally, employees will be eligible for COVID-19 serum antibody testing, as outlined in Section 6 below.

The above guidance is subject to change based on local, state and federal health authority guidelines.



Section 5: Employees and Healthcare Workers Who Have Not Developed COVID-19 Symptoms

During May and June 2020, EHS is offering employees and healthcare workers, who have not developed COVID-19 symptoms, a one-time blood test to assess if you have developed COVID-19 antibodies.

Your taking this test is voluntary. You do not need to take this test in order for you to be at work and perform your work duties. Whether you take it or not, and what the result is, will not affect your work duties. The results will become part of your EHS record. Your test results will **not** be shared with your supervisor.

This section of the policy does not apply to staff whom:

- Have already received a COVID-19 antibody test at a Mount Sinai testing site, OR
- Have developed COVID-19 illness and/or had a high risk healthcare exposure to a COVID+ patient AND registered with EHS (In this instance you are already or will soon be scheduled for a testing appointment)

Senior leadership from each hospital will be announcing a testing schedule for staff at their site. Frontline staff are being given initial priority for testing. Frontline staff includes both clinical and nonclinical (e.g. EVS and other non-clinical ancillary) staff working in a specified clinical area. All other staff (e.g. corporate, administrative and students, etc.) will be scheduled for testing after the frontline staff have been tested.

Section 6: Employee and Healthcare Workers COVID-19 Testing Eligibility & Return to Work Policy

All PCR testing and/or Antibody test for COVID-19 is voluntary. You do not need to take either test in order for you to be at work and perform your work duties. Your test results will **not** be shared with your supervisor; upon clearance to return to work, test results will not impact your work assignment. The results will become part of your EHS record.

The table below outlines the criteria for both PCR and antibody testing, along with the related return to work policy.



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COVID-19 EMPLOYEE TESTING POLICY							
Category	Testing Type	Testing Time Frame	How to Schedule	Return to Work Policy			
Symptomatic ¹ Employee							
Symptomatic ¹ Employee	Nasopharyngeal Swab (PCR)	Typically 2-4 days after symptom onset	Register for testing via the online EHS REDCap tool, click <u>EHS REDCap</u> or scan this QR Code to access ² Upon registration in REDCap, a member of the EHS Team will contact you to schedule the test and provide testing site ³ information within 24 hours.	 Option 1: No testing, furlough and return to work as soon as 10 days from symptom onset as per policy⁴ Option 2: Testing, furlough and return to work as soon as soon as 10 days from symptom onset as per policy⁴ Option 3: Employees that test negative can volunteer to return to work before the 10 days post symptom onset (as long as afebrile for 72 hrs without fever reducing medications) 			
Asymptomatic Employees							
Previously had COVID symptoms that were reported to EHS	Serum Antibody Testing	Testing is performed when an individual is both asymptomatic for 14 days <u>and</u> at least 21 days after symptom onset	A member of the EHS Team will call all symptomatic employees who previously registered with EHS through REDCap, about 3 weeks after they first reported their symptoms to EHS to be scheduled for the test	Report to work			
Had A High-Risk Exposure In The Healthcare Setting	Serum Antibody Testing	Testing is performed at least 21 days from high-risk work exposure	A member of the EHS Team will call employees who have previously reported a new high-risk exposure to EHS, <u>and</u> have completed their 14- days of self-monitoring to schedule the test	Report to work			



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COVID-19 EMPLOYEE TESTING POLICY						
Category	Testing Type	Testing Time Frame	How to Schedule	Return to Work Policy		
Asymptomatic Employee	Nasopharyngeal Swab (PCR)	Upon request but no more than once every 28 days	Register for testing via the online EHS REDCap tool, click <u>EHS REDCap</u> or scan this QR Code to access ² Upon registration, a member of the EHS Team will contact you to schedule the test and provide testing site ³ information within 24 hours.	 Report to work while awaiting test results Results Positive: home isolation for at least 10 days from date of positive result If symptoms¹ develop during that time, employee does not report to work for at least 10 days after symptom onset (as long as afebrile for at least 72 hours without taking fever reducing medication and respiratory symptoms have improved) 		
Asymptomatic Employee	Serum Antibody Testing	A one-time test is being offered to all MSHS employees between May and June 2020	Senior leadership from each hospital will be announcing the testing schedule for their site *Frontline staff (clinical and non-clinical) who have worked in high-risk areas will be given initial priority for testing. Testing for Corporate, ISMMS and Network staff and students will be offered testing in conjunction with the hospitals.	Report to work		

Notes:

- 1. Signs and symptoms of COVID -19 include:
 - Fever (temperature greater than 100° Fahrenheit)
 - Shortness of breath
 - New onset persistent cough
 - Nasal congestion & runny nose not associated with seasonal allergies
 - Sore throat
 - New loss of taste or smell

OR at least two of these symptoms:

- Chills
- Muscle pain
- Headache



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- 2. The EHS REDCap registration process outlined in Sections 1, 2, 3 and 4 above are the same process. If an individual completed an EHS REDCap form as noted in Sections 2 & 3 they are eligible for testing, and they **DO NOT** need to register a second time for the same exposure.
- 3. COVID-19 Testing is **NOT** performed at local EHS sites, testing logistics and testing sites will be provided by EHS as outlined in the table above.
- 4. Staff are able to return to work 10 days after symptom onset and being consistently afebrile (temperature < 100° Fahrenheit) for at least 72 hours without taking fever reducing medications (e.g. aspirin, acetaminophen), along with resolving respiratory symptoms.



Section 7: Employees and Healthcare Workers Return to Work

Employees and healthcare workers who are symptomatic and have had a PCR test for COVID-19 who are awaiting test results are required to self-isolate pending those results. If positive, the employee or healthcare workers cannot work for at least 10 days from the onset of symptoms. A person is able to return to work after 10 days of symptom onset, regardless of date of testing, if they have been consistently afebrile (temperature < 100° Fahrenheit) for at least 72 hours without taking fever reducing medications (e.g. aspirin,, acetaminophen), along with resolving respiratory symptoms. No repeat testing is required to return to work per NYC DOHMH.

Employees that have a negative PCR result can volunteer to return to work before the 10 days post symptom onset, as long as they have been afebrile for 72 hours without fever reducing medications.

EHS **MUST** clear all personnel before returning to duty; Clearance to return to work is done over the phone, and EHS will call the employee when they are eligible to return to duty. Alternatively, employees can call 212-844-1100 on the 10th day after symptom onset.

Healthcare workers and other staff employed by a facility regulated by the New York State Health Department (e.g., an Article 28 Facility) or a jurisdiction outside of NYC should check with their employer before returning to work as the employer may have a different policy regarding COVID-19.

The above guidance is subject to change based on local, state and federal health authority guidelines.

References:

Centers for Disease Control (CDC)

- Centers for Disease Control and Prevention (CDC), Interim U.S. Guidance for Risk Assessment and Public Health Management of Healthcare Personnel with Potential Exposure in a Healthcare Setting to Patients with Coronavirus Disease (COVID-19) April 30, 2020 <u>https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html</u>
- <u>https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html</u>
- https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html
- https://www.cdc.gov/coronavirus/2019-ncov/hcp/return-to-work.html

New York City Department of Health and Mental Hygiene Health

 New York City Department of Health and Mental Hygiene Health Alert # 6 COVID-19 Updates for New York City March 15, 2020 https://www1.nyc.gov/assets/doh/downloads/pdf/han/alert/2020/covid-19-03152020.pdf

New York State Department of Health

• New York State Department of Health: Health Advisory – Protocols for Personnel to Return to Work Following COVID-19 Exposure. March 16, 2020