Guidance for Work Exclusions among Health Care Workers who have been Exposed to COVID-19

Use this chart to determine if a health care worker (HCW) who had contact with someone with confirmed COVID-19 should be excluded from work or does not need to be excluded from work. Because HCW come into contact with vulnerable populations, the best practice is to take a conservative approach for monitoring and applying work restrictions according to this guidance. We understand these approaches may not always be feasible while maintaining safe staffing and managing staff shortages.

- Did the HCW have prolonged close contact with a confirmed COVID-19 case during their infectious period?
  - No: The HCW does not need to be excluded from work.
  - Yes: Did the HCW perform an aerosol-generating procedure?
    - No: Was the HCW wearing a respirator or face mask?
      - No: The HCW should be excluded from work.
      - Yes: Was the person with COVID-19 wearing a cloth face covering or face mask?
        - No: The HCW should be excluded from work.
        - Yes: Was the HCW wearing eye protection?
          - No: The HCW should be excluded from work.
          - Yes: The HCW does not need to be excluded from work.
    - Yes: Was the HCW wearing all recommended personal protective equipment (PPE) (i.e., gown, gloves, eye protection, respirator) while performing an aerosol-generating procedure?
      - No: The HCW should be excluded from work.
      - Yes: The HCW does not need to be excluded from work.

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Additional Notes:

1. For this guidance, CDC’s definition of healthcare personnel (HCP) will be used to define health care workers (HCW). HCW may include, but are not limited to, emergency medical service personnel, nurses, nursing assistants, physicians, technicians, therapists, phlebotomists, pharmacists, students and trainees, contractual staff not employed by the health care facility, and persons (e.g., clerical, dietary, environmental services, laundry, security, maintenance, engineering and facilities management, administrative, billing, and volunteer personnel) not directly involved in patient care but potentially exposed to infectious agents that can be transmitted among from HCW and patients.

2. For this guidance, **prolonged** is defined as 15 minutes or more. However, consider any duration prolonged if the exposure occurred when performing of an aerosol-generating procedure.

3. For this guidance, **close contact** is defined as:
   - being within 6 feet of a person with COVID-19 or
   - having unprotected direct contact with infectious secretions or excretions of the person with confirmed COVID-19.

4. Determining the **infectious period** of someone with COVID-19:
   - For someone with COVID-19 **with symptoms**, the infectious period starts 2 days before symptoms began and continues until they meet the criteria for discontinuation of transmission-based precautions.
   - For someone with COVID-19 **who never developed symptoms**, the infectious period starts 2 days before the day they got tested and continues until they meet the criteria for discontinuation of transmission-based precautions.

5. Respirators provide a higher level of protection than face masks and are recommended when caring for patients with COVID-19. However, face masks still provide some level of protection to health care workers, which was factored into this risk assessment. Cloth face coverings are not considered PPE because their capability to protect health care workers is unknown.

6. Health care workers who are excluded from work should be excluded for 14 days after the most recent exposure and follow quarantine guidance. Those who work in congregate care settings do not have the option to test out of quarantine after 7 days.

7. If staffing shortages occur, it might not be possible to exclude exposed health care workers from work. For additional information and considerations, refer to Strategies to Mitigating Healthcare Personnel Staffing Shortages. During the COVID-19 response, Vermont Department of Health is directing health care partners to submit all staffing requests through the State Emergency Operations Center’s Staffing Unit via the 24-hour Watch Officer: 1-800-347-0488. Long-term care facilities should refer to the DAIL Staff Support Memo.

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