

Caregiver Health Services Employee Monitoring and Novel Coronavirus Exposure Management Plan 02/01/2020

For those PSJH caregivers caring for or having been exposed to a patient with confirmed novel coronavirus or returning from travel from high-risk areas determined by WHO as outbreak zones
NOTE: These instructions are subject to revision and will be updated as CDC and local health authority guidance is revised

PROCEDURE: Caregivers exposed to a patient with confirmed Novel Coronavirus

Definition of exposure:

Notes

¹Close contact is defined as:

a) being within approximately 6 feet (2 meters), or within the room or care area, of a 2019-nCoV case for a prolonged period of time while not wearing recommended personal protective equipment or PPE (e.g., gowns, gloves, NIOSH-certified disposable N95 respirator, eye protection); close contact can include caring for, living with, visiting, or sharing a health care waiting area or room with a 2019-nCoV case

– or –

b) having direct contact with infectious secretions of a 2019-nCoV case (e.g., being coughed on) while not wearing recommended personal protective equipment.

²Fever may be subjective or confirmed

Retrieved 2/01/2020 at 8:07pm from: <https://emergency.cdc.gov/han/HAN00427.asp>

A. DAILY ACTIVE MONITORING OF SYMPTOMS AND BODY TEMPERATURE-

- Movement and monitoring decisions for HCP with exposure to 2019-nCoV should be made in consultation with public health authorities.
- Facilities and organizations providing healthcare should implement [sick leave policies](#) for HCP that are non-punitive, flexible, and consistent with public health guidance

Retrieved 02/01/2020 at 8:41PM from: <https://www.cdc.gov/coronavirus/2019-nCoV/hcp/infection-control.html>

If public health authorities approve continuation of work:

1. Sign in daily on unit log. Unit logs will be faxed to Caregivers Health Services (CHS) each morning (insert fax number here). At the beginning and end of each shift, log into the designated CHS site and enter current body temperature and responses to symptom questions (see instructions, attached). This will be done starting with the first day of contact with the patient and continue until 14 days after last care of patient with confirmed novel coronavirus, including days when not scheduled to work, unless directed otherwise by health authorities.
2. On days during the required reporting period when the employee is off duty, **or if the employee is furloughed**, the employee will access the designated CHS site remotely, to log

in every 12 hours. Complete the caregiver monitoring tool following instructions attached. If the employee does not have internet access available, the employee may call the designated CHS Exposure monitoring phone number to provide current body temperature and symptom update by phone or pager (Insert phone or pager number here): _____.

PROCEDURE: Caregivers caring for a patient with confirmed Novel Coronavirus

B. DAILY ACTIVE MONITORING OF SYMPTOMS AND BODY TEMPERATURE-

3. Sign in daily on unit log. Unit logs will be faxed to Caregivers Health Services (CHS) each morning (insert fax number here). At the beginning and end of each shift, log into the designated CHS site and enter current body temperature and responses to symptom questions (see instructions, attached). This will be done starting with the first day of contact with the patient and continue until 14 days after last care of patient with confirmed novel coronavirus, including days when not scheduled to work.
4. On days during the required reporting period when the employee is off duty, the employee will access the designated CHS site remotely, to log in every 12 hours. Complete the caregiver monitoring tool following instructions attached. If the employee does not have internet access available, the employee may call the designated CHS Exposure monitoring phone number to provide current body temperature and symptom update by phone or pager (Insert phone or pager number here): _____.

PROCEDURE: Caregivers returning from travel as of 2/2/2020:

US Temporary Measures

A White House Briefing on January 31, 2020, announced that beginning at 5:00 p.m. Eastern Time on Sunday February 2, 2020, the US will implement the following temporary measures:

- Any US citizen returning to US from **Hubei province in the previous 14 days** will be subject to up to 14 days mandatory quarantine to ensure they receive proper health screening and medical care
- Any US citizen returning to the US from **the rest of mainland China within the previous 14 days** will undergo proactive entry health screening at a select number of ports of entry and up to 14 days of monitored self-quarantine to ensure they have not contracted the virus and do not pose a public health risk
- President Trump has signed a Presidential Proclamation temporarily suspending entry into the US of foreign nationals that pose a risk of transmitting 2019-nCoV
- Foreign nationals other than immediate family of US citizens and permanent residents who have traveled in China within the last 14 days will be denied entry into the US at this time

PROCEDURE: Reporting onset of fever or any signs or symptoms

1. During the designated reporting period, employees are **required** to immediately report any fever of ≥ 100.4 degrees F, or any of the following symptoms: sore throat, runny nose, cough, shortness of breath
 - a. **If symptoms develop while ON duty:**
 - i. Don a surgical mask
 - ii. Notify core leader immediately to be relieved of duty

- iii. Core leader will notify Infection Prevention (IP)
 - iv. Infection Prevention will notify Public Health and await further instructions
 - v. Core leader will contact CHS with the employee's name, date of birth, employee ID number, date and time, employee's temperature and symptoms.
 - vi. Core leader will gather names of co-workers and patients caregiver may have come into contact with and provide to CHS and IP
 - vii. CHS will work with local IP and DOH to determine exposure
 - viii. Caregiver or core leader will report the incident through Sedgwick
- b. If symptoms develop while OFF duty:**
- i. Caregiver calls CHS if open (hours and numbers here) or Administrative Supervisor if CHS is closed
 - ii. CHS staff or Administrative Supervisor will notify Infection Prevention.
 - iii. Infection Prevention will contact Public Health
 - iv. CHS staff or Administrative Supervisor will contact caregiver with further instructions.

2. COMPLIANCE

- a. Designated CHS nurse will audit the symptom-monitoring data on a regular basis, and will contact any employee who does not have a temperature and symptom review documented approximately every 12 hours for 14 days from the last care of confirmed patient or from exposure.
- b. Once contact is made with noncompliant employee, the CHS nurse will review symptoms and current body temperature and log the results on the caregiver's behalf.
- c. The caregiver's manager and Human Resources will be provided with the names of any provider that is noncompliant.

3. CLEARANCE TO WORK

- a. Caregivers on self-monitoring for exposure are clear to work as long as no temperature or symptoms develop. Once this continues for 14 days past last exposure, monitoring is no longer required.
- b. Collaborate with local Infection Prevention and, if needed, local health authority regarding the specific details of CGs travel location.
- c. Caregivers who develop symptoms will be required to receive clearance through Caregiver Health Services. Clearance criteria is currently being evaluated by the CDC and DOH.

CAREGIVER MONITORING SIGNATURE FORM

I have read the Caregiver Monitoring and Novel Coronavirus Exposure Management plan for caregivers who work with or who have experienced an exposure to a patient with confirmed Novel Coronavirus.

I understand that I am required to report my current body temperature and symptom screen every 12 hours, starting with the first shift worked and extending through the 14th day after my last shift of work with or from date of exposure to a patient with confirmed Novel Coronavirus.

I understand that during the designated reporting period, I am **required** to immediately report, any of the following: fever of ≥ 100.4 degrees F, runny nose, sore throat, cough, or shortness of breath. I will notify my provider in advance of arrival and don a mask upon entry whenever possible.

Employee Name (PRINT): _____ Date: _____

Employee ID number: _____ Employee Date of Birth: _____

Employee Signature: _____

FAX THIS FORM TO CAREGIVER HEALTH SERVICES AT THE BEGINNING OF THE FIRST SHIFT WORK: Insert Fax Number Here: _____.

Caregiver Novel Coronavirus Monitoring Worksheet

This worksheet is provided for your own use. Actual reporting of symptoms must be done via the Caregiver Health Services site or, if internet access is not available, via the dedicated Caregiver Health Services line. Any of the following symptoms must be reported immediately: fever of ≥ 100.4 degrees F, runny nose, sore throat, cough, or shortness of breath (or as provided by local health authority).

EMPLOYEE NAME:		EMPLOYEE ID #	
EMPLOYEE DOB:			
START DATE:			
	TEMP AM	TEMP PM	Symptoms/Comments
DAY 1			
DAY 2			
DAY 3			
DAY 4			
DAY 5			
DAY 6			
DAY 7			
DAY 8			
DAY 9			
DAY 10			
DAY 11			
DAY 12			
DAY 13			
DAY 14			
END DATE:			

Please notes these guidelines are subject to change, [please check CDC page here](#) for latest.