

Staff Return to Work Precautions For High Risk/Household Contacts of a COVID-19 Case

If you have been isolating* from someone in your household who has tested positive for COVID-19 or you have had a high risk** community exposure to a COVID-19 positive contact, **you are asymptomatic (symptom free), and your initial COVID-19 PCR test is negative*****, you may be able to be in the workplace provided the specific safety precautions can be taken which your manager will review with you (see below).

**** Note- In order for staff working with outpatients in the cancer centre and renal program to return, in addition to their initial COVID-19 negative PCR test, they must have a second COVID-19 test on Day 3 of their isolation and cannot return unless that test result is negative.*

Day 0 of isolation is the date of last exposure. The isolation day count begins the day after exposure.

1. **You must perform rapid antigen testing every day for 10 days following** your last contact with the positive case) **and repeat COVID-19 PCR testing Day 3 and Day 7** following your last exposure to the COVID-19 positive contact.

Staff can book testing for themselves and their household members at the COVID-19 Assessment Centre (Beechgrove) by calling **613-548 2376**, or by booking online: <https://ygkccovidtesting.coconutcalendar.com/service>. Should the staff be unable to secure an appointment for a COVID-19 test, they should contact the COVID-19 Staff Hotline **613-548-6041** (or KHSC x 4389 and follow the prompts) or OHSW. Staff who are working and unable to attend Beechgrove for their follow up testing may obtain a PCR self-swab from OHSW during regular business hours and return the swab for accessioning to OHSW during regular business hours, or to KGH Armstrong screener 0700-1900 Monday through Friday and 12-pm on weekend/stats.

2. **You must remain symptom free**; should you develop any COVID-like symptoms OR test positive on a rapid antigen or PCR test, you must **promptly** contact Occupational Health and refrain from coming to work.
3. **You must be on work isolation** (obtain the work isolation document at screening and do not remove your mask or respirator in the presence of others or in shared spaces for meal breaks)
4. **You must wear an N95/P100 respirator** instead of a procedure mask if you work in a clinical or patient care area
5. **You must avoid caring for the following patients:**
 - Neonatal ICU patients
 - Known unvaccinated patients **≥18 years of age**
 - Dialysis and Cancer inpatients (*Note- this does not include Cancer Centre and Renal outpatients*)

- Transplant patients
- Patients on major immunosuppressive treatment

6. Where possible, request the patient don a mask during the clinical encounter (if other staff who are NOT high-risk contacts are available, they should be assigned to patients who cannot wear a mask)
7. **You must ensure your patients don a mask** when you are caring for/interacting with them; you should not be assigned to patients who cannot wear a mask or are not compliant with masking.
8. You must avoid high risk activities that require close face to face contact with the patient for extended periods of time (e.g. ophthalmology assessments)
9. For Resource Pool staff and those who are floated to other units, **you should only be assigned to 1 unit**, and ideally the same patients, until 10 days after your last exposure to the COVID-19 positive individual.
10. You must promptly report any PPE breaches to your manager and Occupational Health.

***Isolating means:**

- The staff member is able to sleep in a different bedroom than the COVID-19 positive person;
- The staff member is not required to care for/feed the COVID-19 positive person (e.g. young children);
- The COVID-19 positive case wears a mask and performs hand hygiene when going into shared household spaces (e.g. kitchen and washroom) and disinfects surfaces after use. *If possible*, meals should be delivered to COVID-19 positive person to avoid them having to use the kitchen, and they should use their own dedicated washroom if possible.
- The staff member avoids using shared spaces at the same time, or soon after the COVID-19 positive case has been in the space. If the staff member is going into a shared space that the COVID-19 positive person has recently used, the staff member should wear a mask and/or allow more time for clearance and consider cracking open window to improve ventilation

****High Risk Contact** includes situations where the staff member has had close, unprotected contact with a COVID-19 positive case that does not live in their household, if the staff meets these criteria, they would be considered high risk and should follow the attached guidelines. OHSW can assist you with this assessment if it unclear but err on the side of caution if unsure.

- The staff member was in contact with the COVID-19 positive person 48 hour prior to their symptom onset, or 48 hours prior to their COVID-19 positive test if no symptoms?
AND
- The staff member had close (< 6 feet), prolonged (typically > 15 minutes) unprotected contact with the COVID-19 positive case. Here are some examples to assist:
 - They had a meal together, unmasked, sitting side by side in an enclosed space (kitchen) for 30 minutes- HIGH RISK
 - They met each other in the parking lot up a the local grocery store and had a conversation outside for 5-10 minutes unmasked about 3 -4 feet apart - Low Risk