

Title:	COVID-19 Employee Exposure Management	Policy Number:	ICN-1
		Version Number	1
Reference:	Centers for Disease Control and Prevention (CDC); TDCJ CMHC Policy B- 14.52 – Coronavirus 2019 (COVID-19); TDCJ COVID-19 Health Screening Form	Effective Date:	4/15/20
		Original Approval:	4/15/20

POLICY STATEMENT:

Texas Tech University Health Sciences Center Managed Care (TTUHSC MC) is dedicated to assuring the health and safety of all employees and offenders. In doing so, it is imperative that employee exposures to COVID-19 are managed appropriately.

PROCEDURE:

1. Prevention

Prevention is the responsibility of all employees. Proper adherence to recommended infection control practices is expected. All employees shall utilize appropriate prevention practices as required.

The employee shall not report to work. The employee is to notify their supervisor and report to work as soon as possible. If an employee is at the workplace and becomes ill, the employee shall immediately notify their supervisor or designee and leave work.

When a diagnosis is made by the local health department for a specific employee, the health department's protocol shall be applied instead of the ones outlined in this policy.

To manage employee COVID-19 exposures, TDCJ CMHC shall follow the Texas Health Code, Chapter 161, Subchapter C, which defines the following:

- _____ is when the reporting employee has received a positive result from a COVID-19 laboratory test, with or without symptoms.
- x Suspected case of COVID-19. A suspected case is when the reporting employee shows symptoms of COVID-19, but either has not been tested or is awaiting test results, or is without symptoms (asymptomatic) and has been tested. Symptoms include fever (above 100.4°)

x TCCC Fever Exclusion. The reporting employee's entry temperature indicated fever and

- A mask must be worn at all times until 14 days from symptoms onset and the employee is to have no contact with immunocompromised patients.
- To return sooner than 7 days, a physician's note excluding COVID-19 or negative COVID-19 test result is required.

After returning to work, the employee will:

- Adhere to hand hygiene, respiratory hygiene, and cough etiquette in CDC's interim infection control guidance (e.g., cover nose and mouth when coughing or sneezing, dispose of tissues in waste receptacles)
- Self-monitor for symptoms, and seek re-evaluation if respiratory symptoms recur or worsen.

Determination of risk and work restrictions

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COVID19 Definitions and Risk Categories

I. Definitions

Active monitoring means that the state or local public health authority assumes responsibility for estacch92 /TT0 1 Tf t1
cough, shortness of breath, sore throat)

in a healthcare waiting area or room); or b) having unprotected direct contact with infectious secretions or excretions of the patient (e.g., being coughed on, touching used tissues with a bare hand). The term "prolonged" has been defined by TTUH-19 laboratory test, with or without symptoms.

Healthcare Personnel (HCP) refers to all paid and unpaid persons serving in healthcare settings who have the potential for direct or indirect exposure to patients or infectious materials, including body substances; contaminated medical supplies, devices, and equipment; contaminated environmental surfaces; or contaminated air. For this document, HCP does not include clinical laboratory personnel.

Self-monitoring means HCP perform self-monitoring with oversight

by their healthcare facility's occupational health or infection control program in coordination with the health department of jurisdiction, if both the health department and the facility are in agreement. On days HCP are scheduled to work, healthcare facilities could consider measuring temperature and assessing symptoms prior to starting work. Alternatively, a facility may consider having HCP report temperature and absence of symptoms to occupational health prior to starting work. Modes of communication may include telephone calls or any electronic or internet means of communication.

Suspected case shows symptoms of COVID-19, but either has not been tested or is awaiting test results. If test results

nebulizer therapy, sputum induction) on patients with COVID-19 when the healthcare providers' eyes, nose, or mouth were not protected, is also considered

COVID 19 Employee Exposure Flow Chart Attachment B

Reporting Employee:
Tested with Results Pending

TTUHSC Office of Institutional Health
Post Exposure COVID 19

Employee name: _____ Date _____

Department: _____

Employee position: Staff Nurse

__>>BDC ~~0~~.yes, describe _____

Was the source patient wearing a mask during a RTb



NOTE:

Low - No Work restrictions. Self - monitoring

Low - No Work restrictions. Self - monitoring with delegated supervision

Medium - Exclude from work for 14 days. Self - quarantine. Active monitoring.

High - Exclude from work for 14 days. Self - quarantine. Active monitoring.

Symptomatic - Unlikely CoVID - 19

Recommendation _____

Symptomatic - Possible CoVID - 19

Recommendation _____

Comment: _____

DO NOT COMPLETE THIS SECTION.

REFER TO TTUHSC MC COVID INCIDENT

REPORT FORM

ICM COVID-19 Employee Exposure Management
Policy – Attachment D

Mark One of the Following:
Initial Report: _____ Follow-up Report _____
If Follow-up, Date of Initial Report: _____
+ If follow-up report, complete Section A only any additional or revised sections.
INITIAL REPORT MUST BE COMPLETED IN ITS ENTIRETY.

Section A – Reporting Employee Information

Reporting Employee Name: _____ Job Title: _____
Unit: _____ Supervisor Name: _____
Notification Date: _____
Symptoms: _____ Date of onset of symptoms: _____
Did employee report possible exposure?
If yes date(s) of possible exposure: _____
Has employee been tested?
If yes, date of test: _____
If yes, date or expected date of results: _____
If yes, was the test initiated by the employee or TTUHSC?
Was test initiated by TTUHSC or employee?

Section B Incident Description

Section C – Post-Exposure Management of Contact Employees

Refer to the following Section C(1) Risk Assessment Table and C(2) Work Restriction Levels to complete C(3) Employee Contact Assessment for EACH employee with contact

1. Risk Assessment Table

COVID-19 positive/suspected reporting employee wearing facemask during close contact (within 6 feet)?	Level of close contact Interaction Prolonged is greater than 15 minutes	Epidemiologic Risk Factors for Individual Exposed to the Employee in Column One	Exposure Category
Yes	Brief	PPE: None	Low
Yes	Brief	PPE: Yes	Low

Section D- Additional Risk Factors Considered

Section E List & Details of Patients and/or TDCJ Employees Potentially Exposed

Section F- Additional Corrective Action and/or Comments

Date Approved by Regional Medical Director:
Date Approved by Regional Operations/Montford Managing Director:
Date Approved by Regional Dental Director (as applicable):
Submitted to MC Compliance and Risk Management by:
Date Submitted:

Within 48 hours, return completed TTUHS/OIHP Post-Exposure COVID-19 Form(s), Contact Investigation Incident Report, and TDCJ Health Screening Form (if applicable) to TUHSC Managed Care - OIHP