

MANAGEMENT OF HEALTHCARE WORKER WITH EXPOSURE TO A PERSON CONFIRMED WITH COVID-19

Risk Category:

Low risk close contact: HCW is wearing a mask and source person is wearing a mask

High risk close contact: HCW is not wearing PPE according to the Infection Prevention Control guideline and household contacts.

Definition:

Source person: A person who is a confirmed case of COVID-19

Household contacts: HCW who is living or sleeping in the same home, or living in a shared accommodation sharing kitchen or bathroom facilities, or sexual partners of confirmed COVID-19 person.

Risk of Close Contact	Clinical status ¹	RTK Ag Test	Return To Work (RTW) criteria	RTK Ag after RTW
HIGH RISK	SYMPTOMATIC	RTK Ag immediately & Day-3 post exposure	RTW if Day 3 test negative & symptoms substantially resolved If symptoms still present at day 3, to be assessed & investigated with PCR before RTW	RTK Ag daily until Day 5 post exposure (fully vaccinated) / Day 7 post exposure (partially/unvaccinated) Self-monitor symptoms for 14 days, and test if symptomatic/required
	ASYMPTOMATIC	RTK Ag immediately	RTW if RTK Ag negative	
LOW RISK	SYMPTOMATIC	RTK Ag immediately	RTW if RTK Ag negative Re-evaluate risk and symptoms & test if required. Exclude from work with MC until test result available and/or until symptoms improve Self-monitor symptoms for 14days, and test if symptomatic/required	
	ASYMPTOMATIC	Not required	No work restrictions Self-monitor symptoms for 14days, and test if symptomatic/required	

1. Asymptomatic HCW within 90 days post COVID-19 Infection can continue to work without restrictions and does not require testing.

RETURN TO WORK (RTW) PRACTICES AND RESTRICTIONS

The following RTW practise and work restrictions should be adhered to by HCW returning to work after completion of the Home Surveillance Order (HSO) period:

- i) OSH should be notified upon returning to work.
- ii) Staff Declaration Form should be filled upon returning to work (Appendix 6).
- iii) Staff should wear appropriate PPE at all clinical areas and strictly adhere to hand hygiene, respiratory hygiene, and cough etiquette.
- iv) Staff should be restricted from taking care of immunocompromised patients for the period of monitoring.
- v) Staff should not share same confined closed area while unmasked such as pantry, on-call room or prayer room with other colleagues.
- vi) Staff should strictly wear well fitted 3-ply surgical mask and face shield when in close contact with other colleagues if physical distancing is not permissible.

- vii) Movement should be restricted, while at work and outside of work. Staff should continue self-isolation at home upon returning from work, avoid 3C and practice 3W.
- viii) Staff should not attend public events or social gatherings during the period of RTW & work restriction monitoring.
- ix) Staff should undergo professional RTK-Ag or supervised saliva test as directed before starting work daily.
- x) Authorized personnel e.g. ward sister should monitor and supervise staff who are on RTW practice & work restriction while at work.
- xi) Strict twice daily (before and at end of work shift) monitoring of temperature and symptoms compatible with COVID-19 by OSH Officer/authorized personnel.
- xii) Staff should continue self-monitoring up to Day 14 post exposure
- xiii) If develop new onset of symptoms (even mild) or worsening of symptoms consistent with COVID-19, immediately stop patient care activities and notify supervisor or and OSH officer.