

## DS STAFF COVID PROTOCOL

*Revised: 1/27/22*

In order to maintain the health and safety of the HCRS community, it is essential that DS staff follow these guidelines:

***Note: These guidelines only apply to our DS Division.***

### COVID-19 VACCINATION

Effective December 1, 2021, all staff are required to have received their final dose of vaccine against COVID-19. As of December 15, all staff are fully vaccinated (at least 2 weeks from their final dose) and any new hires must be fully vaccinated before their start date. This difficult decision was made in order to protect the health and safety of the entire HCRS community.

### ILLNESS SYMPTOMS

Our goal is to provide a safe work environment that is free from contagious illnesses such as COVID-19, the flu, and even the common cold. As such, we are now requiring that any staff member with contagious symptoms outside of their normal baseline (not including symptoms of seasonal allergies) stay home.

Any staff member who is experiencing symptoms of COVID (see chart below) or any other contagious illness, such as the common cold, must remain at home until they've been at least 24 hours fever-free without the use of fever-reducing medication, **AND** symptoms have improved. In addition, staff who were suspected of having COVID may also need to be cleared by the HCRS COVID Line before returning to their work site. Staff who have been quarantining may also be directed to contact the COVID line before returning to their work site.

Ill staff, whose position allows them to, may work from home if their symptoms are not severe. Staff who are too sick to work, or who are unable to work from home, should use their available sick time until they've met the above requirements. (See COVID pay code section below for more info)

COVID-19 Related Symptoms		
<ul style="list-style-type: none"> <li>Fever or chills</li> <li>Cough</li> <li>Shortness of breath or difficulty breathing</li> </ul>	<ul style="list-style-type: none"> <li>Fatigue</li> <li>Muscle or body aches</li> <li>Headaches</li> <li>New loss of taste or smell</li> </ul>	<ul style="list-style-type: none"> <li>Sore throat</li> <li>Congestion or runny nose</li> <li>Nausea, vomiting, or diarrhea</li> </ul>

## USE OF FACE MASKS

All staff need to wear a medical grade face mask (KF94, KN95, N95, or other medical mask) when indoors in common areas and when unable to maintain physical distancing of 6' or more indoors. This means that staff are not allowed to eat together at HCRS sites. However, DS staff may eat with clients as part of their standard services. Staff are to eat the maximum distance that is safely possible from the client(s) they are supporting and minimize the amount of time they have their mask off.

If a staff member has difficulty with the fit of a KN95 face mask, they may use a cloth mask over a surgical mask as an interim measure, since, the most critical factor is fit. The goal is to eliminate any gaps on the sides of the mask that could allow for air droplets containing the virus to escape.

We recommend that all teams and staff have open communication with each other to ensure everyone's comfort levels with masking and distancing are being met. We have developed a list of tips for having these conversations in an effective manner (attached).

### If DS Staff Have Symptoms

Staff member should remain at home and contact the HCRS COVID-19 Line (see below for contact info).

- Staff will be reminded to contact their health care provider for a medical evaluation or recommendations.
- The health care provider may refer the staff member for COVID testing.
- The COVID Line will direct staff to stay home from work until they've been fever-free for at least 24 hours without the use of fever reducing medication, **AND** they've been free of symptoms for at least 24 hours. **ALSO**, the COVID Line will let staff know if they need to receive clearance from the COVID Line before returning to work.
- The COVID Line may also recommend that staff get tested.
- After speaking with the staff member, the COVID Line will provide a written email to the staff member (ensuring there's no protected health information in the email), copying their supervisor and Division Director, with the plan for isolation and/or return to work.
- If testing is not recommended by a health care provider, or the staff person chooses not to be tested, they will follow the same protocol above.
- If COVID test comes back positive, see next section.

### When DS Staff Test Positive for COVID-19

- The staff member will immediately go into isolation at home.
- Human Resources (HR) will be notified of the positive case by the employee, manager, or other means.
- HR reviews the situation and takes the following steps:
  - The positive staff member is directed to isolate
  - The last day the positive staff member was at an HCRS site is determined
  - The staff member is directed to reach out to their supervisor regarding client protocols and follow-up
  - The individual is asked about staff contacts either within or outside of work
  - HR notifies any staff who had a primary exposure
  - HR will endeavor to do 1<sup>st</sup> level contact tracing as time and resources allow.
- Once a plan is developed, HR will email the plan (ensuring there's no protected health information in the email) to the staff member, copying their supervisor and Division Director.
  - The staff person with COVID will remain home from work until it's been at least 10 days since their positive test or the start of symptoms, whichever comes first, **AND** they've been fever-free for at least 24 hours without the use of fever-reducing medication, **AND** their symptoms have improved. **ALSO**, the staff member will be notified by HR if they need to be cleared by the COVID Line to return to their worksite.
  - In the case of contingency or crisis staffing levels, the staff member may be cleared to return to work earlier than outlined above, based on authorization from the Vermont Department of Health.

### When a DS Staff Member has a Primary Exposure to COVID

- If a staff member has had COVID-19 within the past 90 days, no quarantine is required.
- As long as staff are boosted, or not yet eligible for a booster, no quarantine is required.
- For staff who are eligible for a booster but haven't yet received one, the Vermont Department of Health now indicates they should quarantine. If this is the case, staff member should:
  - Stay home and quarantine
  - Notify their supervisor and the HCRS COVID Line
- The COVID Line will determine the quarantine period and send the staff member a written copy of the plan (without any protected health information), copying their supervisor and Division Director.

**When a DS Staff Member has a  
Household Member who Tests Positive for COVID-19**

- Unless the staff member has had COVID within the past 90 days, they will remain at home.
- The staff member will immediately contact the HCRS COVID Line.
- The COVID Line will generally require the staff member to remain home for a certain period of time, and a negative COVID test may be required at the end of that time period if isolation in the home was not possible.

***See next page for tips on managing a positive case in your home***

**COVID Pay Code:** Staff may use the HCRS COVID Pay Code for COVID Isolation or Quarantine, assuming they are unable to work from home and have no more than one week of available sick time.

**HCRS COVID/Infection Control Line**

(802) 886-4561 (that goes to HR staff at ext. 2181)

[HRCOVID19@hcrs.org](mailto:HRCOVID19@hcrs.org)

**Note:** The COVID/Infection Control Line is not monitored during non-office hours or on weekends.

## Tips for Managing a Positive COVID Case in Your Home

### Guidance from the World Health Organization (WHO)

1. Identify one member of the household to be the caregiver, as needed
2. Prepare a separate room or isolation space; encourage person with COVID-19 to stay in the isolation space and out of common areas; use separate restroom, if available
3. Open windows when you can
4. Keep visitors away
5. Everyone in the household should wear a medical grade mask when it's absolutely necessary to be in the same room
6. Wash hands frequently
7. Disinfect frequently touched surfaces twice a day at a minimum

#### Use of Antigen Tests to estimate infectiousness

Antigen tests, unlike PCR COVID tests, require a lot of virus protein to turn positive. This means they are less specific in determining the onset of infection. However, antigen tests do offer an estimation of the period of time when an infected person is most likely to spread COVID-19 to others.

First and foremost, seek medical consultation to determine next steps after exposure or symptom onset.

In certain instances, HCRS may require a PCR and/or antigen test. If an antigen test is required by HCRS, you can seek reimbursement for the cost of the test kit through submission of an expense report.

### COVID Tests

PCR or LAMP Tests	Antigen Tests
<p>The PCR, the “gold standard” of Covid-19 detection, can detect relatively small viral pieces with accuracy. People usually get swabbed at a collection site or the doctor’s office. The swab is then put into a tube that’s sent to an off-site lab for processing.</p> <p>However, these tests are so sensitive that people who have had coronavirus can test positive for weeks after they’re no longer infectious, he said.</p> <p>Another at-home test, known as LAMP, gives people the same accuracy as PCR but without having to send the nasal</p>	<p>The antigen test kits offer faster feedback and can be done entirely at home, but they are less accurate than the PCR. People generally need to have a lot more virus in their nose to get a positive result using that method. Each test kit looks a little different and comes with slightly <a href="#">different instructions</a>.</p> <p>Antigen tests are recommended in the following circumstances:</p> <ul style="list-style-type: none"> <li>• You have been confirmed positive for COVID-19 and are seeking to discontinue isolation in advance of the 10 day isolation period—consider taking an antigen test beginning on day 4 (4 days post positive test or symptom onset, whichever came first), and continue testing every 24-48 hours until the test appears</li> </ul>

COVID Tests	
PCR or LAMP Tests	Antigen Tests
<p>swabs off-site. The kits, which retail at \$75-plus apiece, are even more complicated than the antigen test kits.</p> <p>The LAMP tests the state health department distributed to people over the holidays, for example, came with a <a href="#">battery-operated detector</a> and a tube that has to snap into place for an accurate reading.</p>	<p>negative. Note that even a faint line on most tests indicates a positive result.</p> <ul style="list-style-type: none"> <li>• Students enrolled in the Test-To-Stay programs at their local school: students identified as close contacts test each day using an antigen test in order to continue with in-person learning. If you are experiencing COVID-19 symptoms and suspect COVID-19—follow the instructions on the at home antigen test, (most test kits require you to take both tests-24-48 hours apart) and seek guidance from a medical professional for further PCR testing</li> <li>• You have been identified as a close contact to someone infected with COVID-19—quarantine as directed by medical professionals or the Vermont Department of Health. If quarantine is not indicated, you may consider using a rapid antigen test daily before going to work or out in the community</li> </ul>