Considerations for Identifying Exposed Employees as Related to COVID-19

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Version 1.0

Preface

During a public health event, public health officials, including epidemiologists, use the term "contact tracing" to describe the process for identifying persons that have may have come into direct contact with an infected person. "Contact tracing" is typically performed in the United States by state and local public health departments using staff that is trained in contact tracing protocols.

Contact tracing as it pertains to the COVID-19 pandemic is the identification of persons who may have been exposed to someone diagnosed with COVID-19 or that is symptomatic for COVID-19 given testing is not broadly accessible.[1]

Currently, businesses are responsible for identifying potentially exposed persons within their workplaces when a worker is confirmed positive for COVID-19 or becomes symptomatic and taking appropriate actions to minimize the spread of COVID-19. The processes businesses deploy to identify potentially exposed COVID-19 workers are different and in addition to contact tracing conducted by trained state and local public health officials to manage the spread of infection in communities. To manage COVID-19 risks to workers, it is critical for companies to closely review current policies and procedures and assure they align with the latest federal, state and local guidance and to develop and implement a risk management approach that considers, among other things, the company's specific operations.

The following considerations are based on what we presently know about the virus and are provided to assist companies in reviewing and amending current policies as related to identifying potentially exposed workers so that such workers can be notified and other relevant actions pertaining to the facility, including targeted cleaning, can be taken in a timely manner.

Ultimately, each company will need to implement their own policies tailored to their specific facilities and risks.

Background

Although the capacity for increased testing capabilities are expected to become widely available in the future, management of the COVID-19 pandemic will rely heavily on *traditional public health methods for case identification and contact tracing*, similar to those methods used every day for tuberculosis, sexually transmitted infections, and vaccine-preventable disease control across the country.[2]

This kind of case identification and contact tracing will be critical in the overall effort to ease social distancing around the country. Controlling COVID-19 in states and localities across the country will require that public health authorities identify nearly all active cases of COVID-19; isolate infected

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[1] Typically, an individual with suspected or confirmed COVID-19 infection is asked to recall everyone whom they have had close contact during the timeframe while they may have been infected. Those identified individuals are then notified of their potential exposure as rapidly as possible. To protect the patient or individuals' privacy, those identified individuals are only informed that they may have been exposed to a patient and are not told the patient's identity. www.cdc.gov/coronavirus/2019-ncov/php/principles-contact-tracing.html. Accessed April 23, 2020.

[2] https://www.centerforhealthsecurity.org/our-work/pubs_archive/pubs-pdfs/2020/a-national-plan-to-enable-comprehensive-COVID-19-case-finding-and-contact-tracing-in-the-US.pdf. Accessed April 20, 2020.

individuals at home or, as necessary, isolate them on a voluntary basis in healthcare facilities or dedicated isolation facilities; alert and trace the contacts of each case; and quarantine with exposed contacts (or other dedicated facilities, if home is not an option) if they develop symptoms or get sick.[3,4]

Current Guidance Applicable to Critical Infrastructure Workers

Manufacturing, processing, packing, holding, distribution and retail facilities are encountering employees that are symptomatic/confirmed positive for COVID-19. When workers are positive/symptomatic for COVID-19, facilities need to identify potentially exposed workers and take appropriate action. The actions taken by a facility regarding potentially exposed workers will depend on a number of factors including: available federal guidance, State and local requirements, current community spread of COVID-19, facility design and operations, and the ability to prevent further exposure in the facility by taking precautions such as worker screening prior to entering work areas, providing workers with PPE including facial coverings or masks, implementation of social distancing, and enhanced cleaning and disinfection.

Current CDC guidance[5] now advises that critical infrastructure workers may be permitted to continue work following potential exposure to COVID-19, provided they remain asymptomatic and additional precautions are implemented to protect them and the community. CDC defines *potential exposure* as a household contact or having close contact within 6 feet of an individual with confirmed or suspected COVID-19 for a sufficient duration of time, sometimes referenced as 10 minutes or more.[6]

CDC's guidance[5] and the advice contained therein has evolved substantially over the past several weeks as more is learned about the virus that causes COVID-19 disease. Initially CDC advised employers to quarantine all potentially exposed workers for 14 days. Then CDC advised employers to send all potentially exposed workers home and if they remained asymptomatic for 48 hours they could return to work. **Now, as stated above the CDC Safety Practices for Critical Infrastructure Workers is advising employers that potentially exposed workers can remain working as long as appropriate precautions are taken, and the exposed workers remain asymptomatic.**

Note: State and local governments may choose to not permit critical infrastructure workers that have been identified as potentially exposed to COVID-19 to continue working; companies need to understand state and local requirements in these situations as they may require that potentially exposed individuals to be quarantined or home isolated.

Given that every facility is constructed differently, and has different access points, congregation areas and established patterns of employee movement, procedures for identifying exposed workers need to be facility specific.

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[3] *Id. /////*

[4] https://www.cdc.gov/coronavirus/2019-ncov/downloads/critical-workers-implementing-safety-practices.pdf

[5] Implementing Safety Practices for Critical Infrastructure Workers Who May Have Had Exposure to a Person with Suspected or Confirmed COVID-19. https://www.cdc.gov/coronavirus/2019-ncov/community/critical-workers/implementing-safety-practices.html. Accessed April 23, 2020.

[6] Public Health Recommendations for Community-Related Exposure. https://www.cdc.gov/coronavirus/2019-ncov/php/public-health-recommendations.html. Accessed April 23, 2020.

Considerations for Food Facilities When Identifying Potentially Exposed Workers[7]

Identification of "Contacts" or Potentially Exposed Workers[8]

- Once a worker is confirmed to be infected with the virus or becomes symptomatic, contacts or potentially exposed workers should be identified by retracing the ill worker's activities (and the activities and roles of those around them) since the onset of illness and several days (at least 48 hours) prior to the onset of illness. Contacts or potentially exposed workers are anyone who has been in *close contact* (as defined by CDC and discussed above) with an infected person: family members, work colleagues, friends, healthcare providers or others.
- The following approaches to determining where the infected worker was in a food facility may facilitate the identification of potential exposed individuals could be considered:
    - Track movement and interaction of the infected person through the facility. Use of fobs, keycards, timeclocks, etc. that indicate locations that the ill worker accessed (and using those systems/data to identify other individuals in those spaces)
    - Identify all employees that have been in close contact (i.e., closer than 6 ft for greater than 10 minutes[6]) for several days prior to the ill employee becoming symptomatic or testing positive for COVID-19.Review of closed-circuit TV or other systems that show the locations of individuals at different times
    - Discussions/ interviews to determine workers, contractors, and others that are regularly in the same workspace
    - Typical lunch and break times (and any evidence that would substantiate this)
    - Determine whether the employee carpools with other facility employees and whether they participated in the carpool within at least 48 hours of onset of symptoms or testing positive.
    - Determine if employees share housing (e.g., roommates or family members).

Contact Listing

- All workers who meet the definition of having had "exposure" and are considered to have been in contact with the infected person should be considered exposed. Efforts should be made to notify every listed contact or potentially exposed worker that they have potentially been exposed to an infected person.
- The identity of the infected person should remain confidential.
- The potentially exposed worker, if reached, should be provided with an explanation of:
    - what it means to be a potentially exposed person (consideration should be given on how the employee will be told as not to create unnecessary fear or to inadvertently encourage absenteeism; do this by adding as much context and discussion of risk, as possible)
    - actions to take based on CDC guidance, and
    - the importance of contacting a physician and seeking medical attention if they develop symptoms.

[7] https://www.transunion.com/blog/implementing-a-covid-19-contact-tracing-program-to-support-reopening-the- economy. As modified April 20, 2020.

[8] CDC recommends that those performing contact tracing have certain knowledge and skills. Additional information can be viewed here: www.cdc.gov/coronavirus/2019-ncov/php/principles-contact-tracing.html. Accessed April 23, 2020.

Contact Follow-Up

- Appropriate follow-up should be conducted with all contacts or potentially exposed workers to monitor for symptoms, test for signs of infection, recommend appropriate care.
- Home isolate potentially exposed employees (or allow them to continue work if they remain asymptomatic and adhere to CDC practices).
- Contact local health department for assistance and reporting (if required in the state or local jurisdiction in which the facility is located), including determining if tests are available for employees.

Other Considerations

There are many proactive actions a facility can take to prepare for the worse-case scenario, in this case a worker that tests positive and/or becomes symptomatic for COVID-19. Facilities should consider the following when developing their plan for identifying exposed employees:

- Update each facility's sanitation standard operating procedures (SOPs) and other procedures and practices to reflect the current state in light of the COVID-19 pandemic.
- Educate and train/retrain employees on COVID-19 risks, prevention, and associated company policies in the first language(s) of the workforce.
- Assure appropriate PPE are available and workers have been trained to utilize the PPE effectively.
- Implement increased social distancing and/or physical barriers/partitions or other measures during work and breaks to limit person-to-person contact wherever practical. [4]
- Implement supplementary infection control measures including enhanced hand hygiene, i.e., more frequent handwashing, frequent use of hand sanitizers.
- Identify any workers that may be at higher risk for serious illness, such as older adults and those with chronic medical conditions and consider minimizing face-to-face contact between these employees or assign work tasks that allow them to maintain a distance of six feet from other workers, if possible.
- Screen/monitor employees for COVID-19 symptoms, in a manner that adheres to social distancing recommendation and mitigate any potential cross contamination issues.[9]
    - Implement the use of employee questionnaires to assess for potential exposure to COVID-19 ill persons due to contact with those outside the workplace or due to travel.
- Identify your local health department COVID-19 contact should an employee become infected with COVID-19.
- Implement enhanced cleaning and disinfecting protocols. Clean and disinfect frequently touched objects and surfaces such as workstations, keyboards, telephones, handrails, restrooms, break rooms, locker rooms, doorknobs, and any other locations that are commonly used or accessed.
- Define close contact as it pertains to any identified infected person; e.g., threshold of 6 ft for > 10 minutes[10]

[9] Screening Food Industry Employees for COVID-19 Symptoms or Exposure. https://www.feedingus.org/. Accessed April 20, 2020.

[10] CDC Guidance, Public Health Recommendations for Community-Related Exposure *Data are insufficient to precisely define the duration of time that constitutes a prolonged exposure. Recommendations vary on the length of time of exposure from 10 minutes or more to 30 minutes or more. In healthcare settings, it is reasonable to define a prolonged exposure as any exposure greater than a few minutes because the contact is someone who is ill. Brief interactions are less likely to result in

- Modify facility operations to minimize the impact if an employee tests positive/becomes symptomatic for COVID-19. For example:
    - Establish smaller cohorts of employees so if one tests positive, those potentially exposed are limited to the cohort group.
    - Restrict staff rotations between different areas in the facility, job types/functions, and shifts to more easily identify those potentially exposed in the event an employee becomes infected with COVID-19.
    - Limit facility access to employees only and other critical visitors (e.g., inspectors, delivery drivers).
    - Do not permit congregating in common areas of the facility by establishing additional areas for timeclocks, breaks, meals and locker rooms and restrooms and limiting the number employees permitted in each location, making sure seating in such areas follows physical distancing recommendations.
    - Consider smaller cohorts for breaks, meals and locker room access. Plan for additional times between these employee break persons for any needed cleaning prior to the next group arriving.
    - Decide, in advance if all symptomatic persons will be presumed positive and reacted to accordingly
    - Establish system to capture contact information for potentially exposed individuals and workspace/equipment/common areas. i.e., spreadsheet, form.
    - Determine whether all exposed persons will be required to quarantine or will be allowed to continue work if they remain asymptomatic and adhere to CDC practices.
    - If it is determined that exposed persons are required to quarantine, develop a quarantine policy for potentially exposed employees.
    - Determine how infected or potentially exposed employees will be integrated back into the workplace, , e.g., timeline of isolation, mandatory symptom confirmation.
    - Assure you have up to date contact information for all employees.
    - Develop scripts to be used for notifying potentially exposed employees so these employees are all communicated with in the same manner and provided the same information in the same manner.
- Develop/adopt a risk management approach/tool to react to a worker that is COVID-19 positive or potentially exposed to a COVID-19 worker/someone that is COVID-19 positive outside the workplace. Consider using the Food and Beverage Issue Alliance **COVID-19 RELATED DECISION TOOL FOR FOOD FACILITIES** found at www.feedingus.org.

transmission; however, symptoms and the type of interaction (e.g., did the person cough directly into the face of the individual) remain important.

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