

Managing Health Care Worker Exposures – high COVID-19 community transmission

Update: 1 January 2021

This guidance is designed to provide advice regarding managing health care workers who have been exposed to COVID-19 in the community or while in the workplace.

Given escalating COVID-19 case numbers and associated health service impacts, this updated guidance is proposed in the context of:

- Red Alert precautions – especially rigorous compliance with staff mask wearing and eye protection within 1.5m of a patient
- A fully vaccinated workforce with increasing rates of booster doses
- Ongoing measures to ensure staff do not attend the workplace if symptomatic
- Rigorous caution in tea rooms, minimising close interactions with others and only removing masks when immediately eating or drinking
- Ensuring staff are directed to have a PCR if:
 - They have symptoms of COVID-19
 - They have a positive rapid antigen test (RAT)

This guidance aims to balance:

- The risk of COVID-19 transmission in health facilities
- The risks to patient safety of furloughed staff
- Staff well-being
- The impacts associated with a high demand for PCR testing
- The availability and optimal use of RAT kits

As a general principle, for all exposures where the furloughing of a staff member presents a critical risk to safe service delivery to patients, a senior health service manager can approve a COVID-19 exposed staff member to continue work with risk mitigation measures including daily RAT for at least 7 days post exposure.

Delegation of the senior manager should be Senior Nurse Manager for the facility or above, or equivalent after hours. Consultation and risk assessment should be guided locally by Infectious Diseases (ID) and /or Infection Prevention and Control (IPAC)

In this guidance, where RAT is indicated, but not available, staff should be directed to have either:

- (1) A daily rapid PCR (performed each working day), or
- (2) Second-daily standard PCR

Where daily RATs are recommended and neither RAT nor PCR testing is available, staff must not attend the workplace for seven days after exposure.

RATs are to be supplied and provided to staff by the HealthCare facility/agency.

Staff should report their RAT results into StaffTrakr on a daily basis. StaffTrakr can be accessed from <https://cmgmt.citc.health.nsw.gov.au> or by scanning the following QR code.



Training material for StaffTrakr can be found here - <https://nswhealth.sharepoint.com/sites/EHNSW-VACCSYSTEM/SitePages/StaffTrakr.aspx>

Notes:

- *This guidance does not differentiate based on vaccination status*
- *The day of exposure = day 0*
- *In relation to avoiding shared spaces such as tea rooms, the Health agency is to ensure an appropriate space is provided for staff to observe break entitlements in accordance with relevant Award provisions*

1. HCW is identified as a household or household-like[#] contact of a person who has COVID-19

Action

Do not attend the workplace for 7 days post exposure.

However, if the HCW's absence would pose a significant risk to safe service delivery, as determined by a senior manager, then:

May attend work subject to senior manager approval, with a risk management plan including:

- Daily COVID-19 rapid antigen test (RAT)* for 7 days post exposure including on non-work days AND
- PCR test on day 2&6 post exposure where feasible (can work while result is pending; use rapid testing platform if available) AND
- For 14 days post exposure
 - Consider redeploying to lower patient risk area if possible
 - Mask wearing at all times - surgical or N95 as per [Clinical Excellence Commission \(CEC\) guidance](#)
 - Do not enter shared spaces such as tearooms and do not participate in any staff gatherings in the workplace where masks are likely to be removed
 - Careful monitoring for symptoms

[#] Household-like is someone who has spent 4 or more hours in the same residence/care facility with an infectious case

* 7 RAT kits to be provided to the staff member

2. HCW is exposed in a NSW health care facility

Action

Apply the updated HCW risk assessment matrix <https://www.health.nsw.gov.au/Infectious/covid-19/Documents/risk-matrix-hcw-vaccinated.pdf>

3. HCW is informed that they may have been exposed to COVID-19 in the community such as from a friend or family member at a social event

Action

Continue to attend work with a risk management plan including:

- Daily COVID-19 rapid antigen test (RAT)* for 7 days post exposure including on non-work days AND
- For 14 days post exposure:
 - Consider redeploying to lower patient risk area if possible
 - Mask wearing at all times - surgical or N95 as per [CEC guidance](#)
 - Do not enter shared spaces such as tearooms and do not participate in any staff gatherings in the workplace where masks are likely to be removed
 - Careful monitoring for symptoms

* 7 RAT kits to be provided to the staff member

4. All other HCW COVID-19 exposures (including HCWs who have returned from overseas)

Action

- Continue working
- For 14 days post exposure / return from overseas*:
 - Consider redeploying to lower patient risk area if possible
 - Mask wearing at all times - surgical or N95 as per [CEC guidance](#)
 - Do not enter shared spaces such as tearooms and do not participate in any staff gatherings in the workplace where masks are likely to be removed
 - Careful monitoring for symptoms

*HCWs returning from overseas need to comply with RAT testing requirements as for all overseas returnees