

**REVISED COVID-19  
Protocols for Direct Care  
Staff to Return to Work**

Issued: April 26, 2021

**Health Advisory: Revised Protocols for Personnel in Clinical and Direct Care Settings to Return to Work Following COVID-19 Exposure or Infection – Guidance for OMH Licensed and Unlicensed Community Residential and Ambulatory Programs.**

**A. Asymptomatic Staff Exposed to COVID-19**

Consistent with recent CDC and NYS DOH guidance<sup>1</sup>, providers may allow clinical and direct support professionals or other facility staff who have **been exposed to a confirmed or suspected case of COVID-19** (e.g. had higher-risk prolonged close contact in a healthcare setting with a patient, visitor, or HCP with confirmed or suspected COVID-19 while not wearing recommended personal protective equipment; had close community contact within 6 feet of a confirmed or suspected case for 10 minutes or more; or was deemed to have had an exposure by a local health department) to return to work **after ten (10) days of quarantine** if **no symptoms** have been reported during the quarantine period and if the all of the following conditions are met:

1. Personnel who have been in contact with confirmed or suspected cases are **asymptomatic**;
2. Personnel must continue to monitor for symptoms and conduct daily temperature checks **through Day 14**.
3. Individuals must be counseled to continue strict adherence to all recommended non-pharmaceutical interventions, including hand hygiene, the use of face masks or other appropriate respiratory protection face coverings, and the use of eye protection.
4. At any time, if these staff develop symptoms consistent with COVID-19, they should immediately self-isolate and contact the local public health authority and/or their supervisor to report this change in clinical status and determine if they should seek testing.

**B. Asymptomatic Exposed Staff During a Staffing Shortage**

Providers may allow clinical and direct support professionals or other facility staff who have **been exposed to a confirmed or suspected case of COVID-19** to return to work **before** ten (10) days of quarantine if **no symptoms** have been reported during the quarantine period and if all of the following conditions are met:

1. Furloughing such personnel would result in staff shortages that would adversely affect the health and safety of individuals served by the facility;

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<sup>1</sup> [https://coronavirus.health.ny.gov/system/files/documents/2021/04/update\\_interim\\_hcp\\_return\\_to\\_work\\_april2221.pdf](https://coronavirus.health.ny.gov/system/files/documents/2021/04/update_interim_hcp_return_to_work_april2221.pdf)

- **The provider agency must submit a completed attestation, acknowledging that the agency has implemented or attempted staffing shortage mitigation efforts and is experiencing a staffing shortage that threatens provision of essential care services and that all of the below factors and requirements will be or are being met.**
  - The attestation form can be found here: <https://omh.ny.gov/omhweb/guidance/omh-return-to-work-exposed-staff-attestation.pdf>
  - Residential programs must submit the attestation form to [omh.sm.ResidentialAttestation@omh.ny.gov](mailto:omh.sm.ResidentialAttestation@omh.ny.gov)
  - Ambulatory programs should submit to [omh.sm.AmbulatoryAttestation@omh.ny.gov](mailto:omh.sm.AmbulatoryAttestation@omh.ny.gov)
  - Attestation forms must be submitted before asymptomatic exposed staff are approved to return to any work location. One attestation may be submitted by each provider operating program(s) within these parameters but must list the locations/sites where staffing shortages require that exposed staff return to work before 10-day quarantines are completed.
  - Only one attestation is required per agency, listing all impacted programs. Agencies are not required to resubmit the attestation each time an employee is exposed.
  - Please review item 6 in the attestation; if agency is unable to meet this item, please note reason on the attestation form. Agencies with both ambulatory and residential programs can submit to both email addresses.
2. Personnel who have been in contact with confirmed or suspected cases are **asymptomatic**;
  3. Personnel must have a negative test (PCR or antigen) to return to work after an exposure and subsequently be tested every 2-3 days after the first test until Day 10 after exposure.
  4. However, following CDC's February 14, 2021 "Testing Healthcare Personnel for SARS-CoV-2" recommendation that asymptomatic staff who have recovered from COVID-19 infection may not need to undergo repeat testing or quarantine if exposed to COVID-19 within 3 months after the date of symptom onset from the initial COVID-19 infection or date of first positive diagnostic test if asymptomatic during illness (see Section F).
  5. Personnel must continue symptom monitoring and conduct daily temperature checks through Day 14.
  6. Individuals must be counseled to continue strict adherence to all recommended non-pharmaceutical interventions, including hand hygiene and use of surgical masks;
  7. Individuals must be advised that if any symptoms develop, they should immediately stop work, isolate at home and contact their local public health authority or their healthcare provider to report this change in clinical status and determine if they should seek testing;
    - Note that personnel who test positive for COVID-19 must isolate and contact their Local Department of Health (section D below);

8. To the extent possible, direct care professionals and clinical staff approved to work under these conditions should preferentially be assigned to individuals at lower risk for severe complications, as opposed to higher-risk patients (e.g. severely immunocompromised, elderly); AND
9. Personnel approved to return to work under these conditions should remain in quarantine through Day 14 when not at work.
10. OMH-licensed Article 31 programs operated by and located in Article 28 General Medical Hospitals (e.g. CPEPs, inpatient psychiatric units, clinics, etc) must follow the same staffing shortage procedures that apply to the overall hospital. Please refer to guidance from the NYS Department of Health.

### C. Staff Who Travel Out of State

As of April 1, 2021, asymptomatic staff, arriving in New York State from other U.S. states and territories are not required to test or quarantine. Domestic travel is defined as travel lasting 24 hours or longer to states or US territories other than contiguous states (i.e., Pennsylvania, New Jersey, Connecticut, Massachusetts, and Vermont).

All unvaccinated domestic travelers who have not recovered from COVID-19 in the past 3 months are recommended to get tested 3-5 days after arrival in New York, consider non-mandated self-quarantine (7 days if tested on day 3-5, otherwise 10 days), and avoid contact with people at higher risk for severe disease for 14 days, regardless of test result.

Travelers who leave New York State for less than 24 hours do not need to obtain a diagnostic test before departing and do not need to quarantine upon return. However, such travelers must fill out the traveler form upon entry and must obtain a diagnostic test on the fourth day after arrival in New York. A copy of this form can be found at: <https://coronavirus.health.ny.gov/covid-19-travel-advisory#traveler-health-form>

### D. Staff With Confirmed or Suspected COVID-19

Providers may allow personnel with **confirmed or suspected COVID-19**, whether direct care professionals, clinical staff or other facility staff, to return to work only if all the following conditions are met:

1. To be eligible to return to work, personnel with confirmed or suspected COVID-19 must have maintained isolation for at least 10 days after illness onset, must have been fever-free for at least 72 hours without the use of fever reducing medications, and must have other symptoms improving.
2. Personnel who are severely immunocompromised as a result of medical conditions or medications should consult with a healthcare provider before returning to work. Providers should consider seeking consultation from an infectious disease expert for these cases.
3. If a staff member is asymptomatic but tested and found to be positive, they must maintain isolation for at least 10 days after the date of the positive test and, if they develop symptoms during that time, they must maintain isolation for at least 10 days after illness onset and must have been at least 72 hours fever-

free without fever reducing medications and with other symptoms improving.

#### **E. Asymptomatic Fully Vaccinated Staff Exposed to COVID-19 and Quarantine**

Asymptomatic staff who have been fully vaccinated against COVID-19 do not need to quarantine or furlough during the first 3 months after full vaccination if:

- **Such staff is fully vaccinated (i.e.,  $\geq 2$  weeks following receipt of the second dose in a 2-dose series, or  $\geq 2$  weeks following receipt of one dose of a single-dose vaccine);**
- Such staff is within 3 months following receipt of the last dose in the series;
- Such staff has remained asymptomatic since the last COVID-19 exposure.
- Staff must:
  - Participate in diagnostic COVID-19 testing between 5-7 days after current COVID-19 exposure, or as soon as possible if exposure is not discovered until day 7 or later;
  - Attempts should be made to assign these staff to lower-risk patients/clients.
  - In all exposure situations, HCP are expected to comply with symptom monitoring and nonpharmaceutical interventions as described above through day 14.

All healthcare facilities are expected to know which of their staff have been vaccinated. Any vaccinated staff who did not receive the vaccine through their workplace must inform the facility of their vaccination status through the same process the facility uses to maintain information on annual influenza immunizations and tuberculosis tests.

#### **F. Asymptomatic Staff Infected with COVID-19 within 3 Months and Quarantine**

Asymptomatic staff who have recovered from SARS-CoV-2 infection in the last 3 months need not undergo repeat testing or quarantine if exposed to COVID-19, if they meet the following criteria,:

- Isolation period described in section D completed.
- COVID-19 was confirmed with a positive PCR or antigen test
- Today's date is less than 3 months from symptom onset or positive antigen or PCR test, whichever came first

G. The following chart summarizes the guidance above.

Staff Status		COVID-19 Exposure AND ASYMPTOMATIC	Suspected COVID-19 AND SYMPTOMATIC	Positive COVID-19 Test	Domestic Travel (non-contiguous states)	International Travel
A. Fully Vaccinated*		Can RTW immediately no repeat testing or quarantine needed	Isolate in accordance with DOH guidelines	Isolate in accordance with DOH guidelines	Can RTW immediately, no testing or quarantine needed	Can RTW immediately, no testing or quarantine needed
B. Confirmed Positive COVID-19 within last 3 months** (after completing required isolation period)			Require clinical evaluation for potential alternate etiologies  Can RTW if clinical evaluation reveals no evidence of infectious respiratory condition <b>and afebrile</b> (doctor's note)	Re-test not necessary within 3 months. However, if positive, Isolate in accordance with DOH guidelines****;		
Staff who do not meet (A) or (B) criteria	NO Staffing Attest.	10 day quarantine, after Day 10 can RTW without testing if no symptoms reported	Isolate in accordance with DOH guidelines	Isolate in accordance with DOH guidelines	Can RTW immediately, no testing or quarantine needed	Unvaccinated health care personnel who have not recovered from COVID-19 in the past 3 months working must furlough for 7 days with a test on day 3-5 after arrival in New York from international travel, or furlough for 10 days if not tested.
	Staffing Attest.	Can RTW after negative test (PCR preferred), and be tested every 2-3 days*** after first test until Day 10 after exposure	Isolate in accordance with DOH guidelines	Isolate in accordance with DOH guidelines		

RTW = return to work

\* Staff is fully vaccinated (i.e., ≥2 weeks following receipt of the second dose in a 2- dose series, or ≥2 weeks following receipt of one dose of a single-dose vaccine) AND staff is within 3 months following receipt of the last dose in the series

\*\*Confirmed by antigen or PCR test, 3 months from symptom onset or positive test, whichever came first

\*\*\*Antigen testing conducted by the facility is acceptable, if available.

\*\*\*\* PCR test likely to remain positive even after infection resolves.

General questions or comments about this advisory can be sent to your local OMH Field Office contact.