
COVID-19 Vaccination and Exposure/Quarantine Guidelines for Healthcare Workers (HCWs)

This policy outlines COVID-19 guidelines for Healthcare Workers at Santa Clara Valley Healthcare (SCVH). Healthcare Worker (HCW) is defined as any employee, volunteer, staff, physician, contract personnel, or other individual working in SCVH facilities regardless of job duty.

See Facility's Aerosol Disease Transmission Plan (ADT) from the Infection Prevention Department and County of Santa Clara guidelines for compliance with Cal/OSHA's Emergency Temporary Standards (ETS) (relating to employees that are not subject to the ADT) for additional requirements for occupational exposures.

COVID-19 VACCINATION

- A. All HCWS must be fully vaccinated (14 days past final dose in a vaccination series), or have an approved medical, disability, or religious exemption from the vaccination requirement.
 1. County policy for vaccination requirements for County personnel and for County contractors (latest updates September 27, 2022) [09272022 Memo COVID-19 Vaccination Requirement for County Personnel.pdf \(sccgov.org\)](#); [09272022 Memo Regarding Vaccination Requirement for County Contractors.pdf \(sccgov.org\)](#)
 2. [QSO-23-02-ALL \(cms.gov\)](#)
- B. Managers may not allow anyone to work in their department until they have confirmed that the HCW's COVID-19 vaccination status has been documented in Ready Set and that the employee is in compliance with these guidelines. Managers shall contact Employee Health to confirm that HCW's vaccination status is documented before the HCW begins work.
- C. Employee Health shall ensure that all COVID-19 vaccination or exemption requirements are appropriately completed and documented in Ready Set before clearing any newly hired HCW to work.
- D. Managers shall contact Employee Health Services to confirm vaccination status is documented for HCW transferring from other departments, and those returning from leave.
- E. If there are any deficiencies or delays in documentation or verification of COVID-19 vaccination or exemption requirements, Employee Health shall communicate with the appropriate manager.

HCWs WITH COVID-19 SYMPTOMS

- A. Any HCW with COVID-19 symptoms must test for COVID-19 using a method described in Attachment A. COVID-19 symptoms include the following:
 1. Fever (100.0°F) or chills
 2. Cough or congestion
 3. Loss of taste or smell
 4. Sore throat (new or unexplained)
 5. Fatigue (new or unexplained)
 6. Shortness of breath or difficulty breathing
 7. Muscle or body aches (new or unexplained)
 8. Headache (new or unexplained)
 9. Nausea, diarrhea, or vomiting (new or unexplained)
- B. HCWs who test positive for COVID-19 must contact EH per instructions in Attachment A, and quarantine as directed by EH in compliance with the Healthcare and Congregate Care Isolation and Quarantine Guidelines: Guidance on Quarantine and Isolation for Health Care Personnel (HCP) Exposed to SARS-CoV-2 and Return to Work for HCP with COVID-19 <https://www.cdph.ca.gov/programs/chcq/lcp/pages/afl-21-08.aspx> [AFL 21-08 \(ca.gov\)](#).

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- a. See Section IV Employee Health Responsibilities
- C. Call 9-1-1 or follow usual procedures to request emergency medical evaluation and treatment if HCW experiencing or witnessing severe or life-threatening symptoms.
 - D. Managers shall ensure that the work areas that the symptomatic individual spent time in and surfaces that the individual may have come in contact with or coughed on during the prior 24 hours (e.g., workstation, armchairs, doorknobs, equipment, and office supplies) are cleaned pursuant to EVS protocols.
 - E. All HCWs are expected to cooperate with and follow the instructions by EH and their manager with respect to identifying close contacts and exposure risks in the workplace and return to work criteria.

HCWS WITH COVID-19 EXPOSURES

Follow testing instructions on Attachment A and as indicated under "Employee Health and HCW responsibilities" section below.

MANAGER RESPONSIBILITIES RELATING TO COVID-19 EXPOSURES

A. Identify Exposures:

1. In the event there is a reported COVID-19 case, the department manager will interview the COVID-19 positive HCW (in consultation with IP as appropriate) and obtain the following information: Confirm presence of COVID-19 source. Identify and confirm all HCWs that meet exposure parameters below (Close Contact HCWs)
 - i. Distance and time parameters (close contact): A "close contact" is someone sharing the same indoor airspace for a cumulative total of 15 minutes or more over a 24-hour period (for example, three individual 5-minute exposures for a total of 15 minutes) during an infected person's infectious period. For smaller indoor spaces (i.e., enclosed spaces that are 500 square feet or smaller, such as restrooms, breakrooms, and small conference rooms), all people within those spaces are considered to be sharing the same indoor airspace regardless of where they are located within those spaces. For larger indoor spaces (i.e., enclosed spaces that are larger than 500 square feet, such as large training rooms, lobbies, or warehouses), people are considered to be sharing the same indoor airspace if they are within six feet of one another.
 - ii. Period of Exposure (infectivity period):
 - a. Symptomatic COVID-19 source: 48 hours prior to symptom onset until the time the source is isolated, e.g., last day of work.
 - b. Asymptomatic COVID-19 source: 48 hours prior to collection date of the source's first positive test until the time the source is isolated, e.g., last day of work.
2. Determine and document PPE use of both COVID-19 source and each HCW identified during the infectivity period, e.g., utilization of mask and eye protection. Determine if the exposure is a higher-risk exposure using the [CDC Risk Assessment Framework](#). A "higher-risk exposure" is an exposure where an HCW has close contact with a COVID-19 case under one of the following conditions:
 - a. The HCW was not wearing a respirator (or if the HCW was wearing a compliant face covering, the COVID-19 case was not wearing a compliant face covering); or
 - b. The HCW was not wearing eye protection and the COVID-19 case was not wearing a compliant face covering; or

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- c. The HCW was not wearing all recommended personal protective equipment (i.e., gown, gloves, eye protection, respirator) while present in the room for an aerosol-generating procedure.
 3. Identify and confirm all HCWs who meet exposure parameters and higher-risk exposures. Determine and document PPE use of both COVID-19 source and exposed individuals and notify IP.
- B. Identify and Notify HCW, Close Contacts, and those on Premises and Unions and Refer to Employee Health
1. If COVID-19 + source is a HCW in the Hospitals and Clinics or Someone in the Community:
 - i. Manager will identify Close Contact HCWs and patients if the HCW was in the workplace during period of infectivity. The department manager will complete a COVID-19 Positive Case and Community Exposure Close Contact Information Form (“Exposure Information Form”), which can be obtained from Employee Health, and return to EH no later than 5:00 p.m. the next business day after receiving notification of the COVID-19+ HCW.
 - ii. The form will also be sent to IP no later than 5:00 p.m. the next business day if patient exposures are present or potentially present.
 - iii. All Close Contact HCWs must be listed on the Exposure Information Form. Any HCW who is not on the Exposure Information Form will be referred back to their manager for further review if they contact EH. If upon further review, a HCW needs to be added to the Exposure Information Form, the manager will resubmit the Exposure Information Form with additional names.
 - iv. When there is close contact with a COVID+ source outside of work (household and community), it is considered a higher-risk exposure because the probability of both individuals not wearing appropriate PPE during interactions is high. Note that all household members are considered close contacts regardless of distance parameters and masking.
 - v. On or about the same time as the Exposure Information Form is provided to Employee Health, **but no later than the next business day following notification of COVID-19 positive HCW**, the manager will immediately do the following:
 - a. Notify COVID-19 HCW using template form (current version of template forms available from EH).
 - b. Notify all HCWs listed on the Exposure Notification Form and their labor unions (as required by Cal/OSHA regulations) by using the template form available from EH.
 - c. Notify entire unit/department and all individuals who were on the premises with the COVID-19 case, and their labor union by using the template form available from EH
 - d. Note: When filling out the Exposure Information Form and sending notice to HCWs, include all possible exposure locations and individuals on the premises, including the work location, working area, or common area used or accessed by the COVID-19 case during the infectious period, including bathrooms, break or eating areas, and waiting areas, as well as walkways, hallways, and aisles if the COVID-19 case congregated with others in that space.
 2. If COVID-19+ source is a patient in the Hospitals and Clinics

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- 2 infection in the last 30 days if they remain asymptomatic.
<https://www.cdph.ca.gov/programs/chcq/lcp/pages/afl-21-08.aspx>; [AFL 21-08 \(ca.gov\)](#)
- ii. HCW returning to work between days 6-9 after meeting routine criteria should wear a surgical mask or fit-tested N95 for source control through at least day 10 from symptoms onset or positive test.
5. The timeframe from symptom onset may be extended to up to 20 days for HCWs who are severely immunocompromised or who had critical illness (e.g., required intensive care). Severely immunocompromised includes, but is not limited to, the following individuals with: chemotherapy for cancer treatment, hematologic malignancies, being within one year of receiving a hematopoietic stem cell or solid organ transplant, untreated HIV infection with CD4 T lymphocyte count < 200, combined primary immunodeficiency disorder, and taking immunosuppressive medications (e.g., drugs to suppress rejection of transplanted organs or to treat rheumatologic conditions such as mycophenolate and rituximab, receipt of prednisone >20mg/day for more than 14 days).
 6. Upon receipt of notification of COVID-19 positive HCW, EHS will send the Exposure Information Form to the manager to complete if one has not already been submitted and provide return to work guidance to the COVID positive HCW.
 7. When completed by the manager, EH will review the Exposure Information Form and provide advice to the HCWs listed on the Exposure Information Form and their manager consistent with this policy.
 8. EH will provide County Incident Report to County Counsel in format requested by County Counsel, which is separate from Public Health Department and other reporting. See Reporting Requirements below

REPORTING REQUIREMENTS

- A. Clusters/Outbreaks¹** EH is responsible for identifying any clusters and will notify applicable IP Department and Unit Manager. EH will also collaborate with Unit Manager, IP, and Risk Management in investigating

¹ Cluster/Outbreak is defined as follows:

Individuals Working in Acute Care and Clinic Settings

(See CDPH AFL 20-75.1 for further information): ≥2 cases of confirmed COVID-19 in a patient 7 or more days after admission for a non-COVID condition, with epi-linkage (defined as overlap on the same unit or ward for any duration or having the potential to have been cared for by common healthcare personnel within a 14-day period of each other) ; **or** ≥2 cases of confirmed COVID-19 in HCW with epi-linkage (defined as having the potential to have been within 6 feet for 15 minutes or longer while working in the facility during the 14 days prior to the onset of symptoms or positive test (for example, worked on the same unit during the same shift) who do not share a household, and are not listed as a close contact of each other outside of the workplace during standard case investigation or contact tracing in counties with <4 daily new cases per 100k population or <5% test positivity based on the county positivity rate reported in the past

week <https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-75.aspx>, **or** ≥3 cases of confirmed COVID-19 in HCW with epi-linkage who do not share a household, and are not listed as a close contact of each other outside of the workplace during standard case investigation or contact tracing in counties with ≥4 daily new cases per 100k population or ≥5% test positivity based on the county positivity rate reported in the past week.

Individuals Working in Long Term Care Setting ≥1 facility-acquired (defined as a confirmed diagnosis 14 days or more after admission for a non-COVID condition, without exposure during the previous 14 days to another setting where an outbreak was known or suspected to be occurring) COVID-19 case in a resident.

Individuals Working in Other Settings.

(See 8 CCR 3205.1) An “outbreak” is 3+ COVID cases “within an ‘exposed group’” that visited the workplace during the high-risk exposure period during a 14-day period. High-risk exposure period is defined as: (A) For COVID-19 cases who develop COVID-19 symptoms, from two days before they first develop symptoms until all of the following are true: it has been 10 days since symptoms first appeared; 24 hours have passed with no fever, without the use of fever-reducing medications; and symptoms have improved. (B) For COVID-19 cases who never develop COVID-19 symptoms, from two days before until 10 days after the specimen for their first positive test for COVID-19 was collected.

potential clusters/outbreak. Clusters/outbreaks will be reported by Risk Management to Public Health Department and California Department of Public Health pursuant to latest requirements.

B. Cal/OSHA

1. EH shall Immediately report any serious work-related injury, illness, or death of an HCW to the Risk Management Department, who will review and make any appropriate reports to regulatory authorities. "Serious injury or illness" means any injury or illness occurring in a place of employment or in connection with any employment that requires inpatient hospitalization for other than medical observation or diagnostic testing.
2. With COVID-19 cases, inpatient hospitalizations may occur sometime after the initial knowledge of an HCW's illness; in those cases, inpatient hospitalizations must be reported as soon as the employer learns, or reasonably could learn, of them. See below for reporting by Risk Management.

C. County Internal Reporting

1. In addition to the required reporting as noted above, EH must report all COVID-19 positive personnel cases they become aware of to the Office of the County Counsel at incident@cco.sccgov.org. If the HCW or County employee **does not** currently work at the Hospitals and Clinics, EH will notify the designated representative at the location where the HCW currently works. In this situation no further action is necessary by EH except if designated representative at location where HCW/employee currently works requests guidance from EH regarding return-to-work clearance (outside department will in general do their own notice, reporting, and provide their own work clearance in conjunction with guidance from the County Public Health Department).
2. Reporting to incident@cco.sccgov.org is required on the same day the department learns of the COVID-19 positive case. This is an attorney-client privileged communication.
3. EH shall provide the following information in the body of the email:
 - i. Department in which the COVID-19 positive personnel works.
 - ii. Name of COVID-19 positive personnel.
 - iii. Position title of the COVID-19 positive personnel
 - iv. Street address of location where personnel is typically based to work
 - v. Date of positive test (this is the date specimen or sample was collected for testing (not the date of the test result)
 - vi. Last date the personnel worked on-site
 - vii. If the personnel have worked on-site in the 14 days prior to the test collection date, list EVERY facility address (street address, city, zip) where they worked during those 14 days
 - viii. Date the department received notification from the personnel
 - ix. If reporting to the Public Health Department was required for this case confirm that the Department has reported to the Public Health Department through the Worksite Case and Contacting Reporting portal.
 - x. Departmental contact name for any questions.

"Exposed group" is defined as: All employees at a work location, working area, or a common area at work, where an employee COVID-19 case was present at any time during the high-risk exposure period. A common area at work includes bathrooms, walkways, hallways, aisles, break or eating areas, and waiting areas. The following exceptions apply: (1) For the purpose of determining the exposed group, a place where persons momentarily pass through while everyone is wearing face coverings, without congregating, is not a work location, working area, or a common area at work; (2) If the COVID-19 case was part of a distinct group of employees who are not present at the workplace at the same time as other employees, for instance a work crew or shift that does not overlap with another work crew or shift, only employees within that distinct group are part of the exposed group; (3) If the COVID-19 case visited a work location, working area, or a common area at work for less than 15 minutes during the high-risk exposure period, and the COVID-19 case was wearing a face covering during the entire visit, other people at the work location, working area, or common area are not part of the exposed group.

- xi. Departmental contact email/phone.

INFECTION PREVENTION DEPARTMENT AND RISK MANAGEMENT RESPONSIBILITIES

- A. Upon notification from Manager or EH about potential patient exposures, IP will follow their policies on patient notification, testing, risk management notification and reporting.
- B. Upon notification from EH of a potential outbreak/cluster, IP will review the case with EH, and work with location managers, and Administration designees.
- C. IP will notify Risk Management and the County Public Health Department.
- D. If a cluster/outbreak is identified, IP, County Public Health Department, Risk Management, EH, Managers, and Administration designees will work together on a mitigation plan. Department leaders of the cluster location will be responsible for sending out notification, including notice to all HCWs working on the unit/department at the time of exposure (including ancillary and other staff), and considering expedited testing to all such individuals at the time of notice. This notification will occur by the end of the following business day. If the first test is done within 6 days of exposure and is negative, a second test will be offered approximately 6-10 days later after exposure date. Patients will also be tested as appropriate as determined by IP in conjunction with County Public Health Department.
- E. Risk Management is responsible for regulatory reporting, including but not limited to, cluster reporting to CDPH and County Public Health Department, and any reporting of "serious work-related injury, illness, or death of a HCW to Cal/OSHA, and will ensure that all such reporting is completed promptly.
- F. Further investigation into the cause of HCW transmission, improving environmental controls, and education will be carried out, in consultation with County Public Health Department as appropriate.
- G. If COVID-19 positive HCW **does not** work in a classification identified in the facility's Aerosol Transmissible Diseases (ATD) Standard, the manager will contact the County Occupational Safety and Environmental Compliance (OSEC) Office for assistance in determining whether Cal/OSHA's Emergency Temporary Standards (ETS) apply and if any additional steps need to be taken to comply with the ETS.

Contact Information:

County Office of Occupational Safety and Environmental Compliance (OSEC): 408-441-4280
Employee Health Department: 408-283-7474

ATTACHMENTS/REFERENCES

AFL 20.8 - [AFL 21-08 \(ca.gov\)](https://www.dir.ca.gov/afl2108.html), latest version December 22, 2022

[09272022 Memo COVID-19 Vaccination Requirement for County Personnel.pdf \(sccgov.org\)](#)

[09272022 Memo Regarding Vaccination Requirement for County Contractors.pdf \(sccgov.org\)](#)

[QSO-23-02-ALL \(cms.gov\)](https://www.cms.gov/medicare/coverage/coverage-articles/2023/02/qso-23-02-all)

Attachment A – Healthcare Worker COVID-19 Testing Options and Instructions

Rev. 4.4.23

ATTACHMENT A

HEALTHCARE WORKER COVID-19 TESTING OPTIONS AND INSTRUCTIONS: CLOSE CONTACT, EXPOSURE TESTING & COVID -19 POSITIVE RESULTS

A. TESTING INSTRUCTIONS FOR HCWs WITH COVID-19 EXPOSURES WHO HAVE NO SYMPTOMS

- Upon confirmation of a Higher-Risk Close Contact Exposure to a COVID-19 case, obtain testing for COVID-19 at days 3 and 5 post exposure, using options noted below.
- If not tested by Employee Health, report the test results to Employee Health within one business day using the process noted in Section C below.
- Options for testing:
 - A. At-home antigen test.
 - B. Through Employee Health Services (EHS), by appointment only after confirmation of exposure by the supervisor). Supervisor, please send the employee names and date of exposure and location of exposure (VMC, OCH or SLR) to COVIDehs@hhs.sccgov.org for appt request with specific location at either Valley Medical Center (VMC), O'Connor Hospital (OCH) or St. Louise Regional Hospital (SLRH).
 - C. Own provider, or
 - D. Other testing site.

B. TESTING INSTRUCTIONS FOR PERSONNEL WHO HAVE COVID-19 SYMPTOMS

- HCWs can use an at-home antigen test, test through their own provider, or obtain testing through Employee Health.
- If not tested by Employee Health, report the test results to Employee Health within one business day using the process noted in Section C below.
- Symptomatic testing by Employee Health is available by appointment at OCH/SLRH. Appointments are available upon request Monday-Friday.
 - a. Please do not call Employee Health to schedule an appointment. Instead, please email Employee Health and include in the subject line request for COVID appt with the following details to COVIDehs@hhs.sccgov.org
 1. Name:
 2. Date of Birth:
 3. Employee ID (if County employee):
 4. Date of Onset of Symptoms:
 5. Email (Personal email or reachable email)
 6. Best Phone Number:
 7. Manager Name & Department worked:

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8. Last day of work:
 - b. Employee Health will email back same day or within 24 hours during workdays with an appointment date and time (check your spam/junk folder if you do not see an email within that time).
 - c. Please plan to attend the appointment given to you and show up on time.

C. REPORTING TESTING RESULTS TO EMPLOYEE HEALTH

If you obtain a positive test result at a location outside of Employee Health, please send a copy of the positive test result to COVIDehs@hhs.sccgov.org with the following information with subject line

1. Name:
2. Date of Birth:
3. Employee ID (if County employee):
4. Date of Onset of Symptoms:
5. Email (Personal email or reachable email)
6. Best Phone Number:
7. Manager Name & Department worked:
8. Last day of work:
9. Copy of the positive test results (for at-home antigen tests, include a photo of the test result next to a piece of paper with your name and date of test written on it)

Check your spam/junk folder if you do not receive a response from Employee Health within the expected time. If you have any further questions, please email Employee Health at COVIDehs@hhs.sccgov.org Please do not reply to individual staff emails in Employee Health, as all staff do not work every day and responses could be delayed.

D. ACCESSING TESTING RESULTS IF TESTED WITH EMPLOYEE HEALTH

- If you tested for COVID-19 via Employee Health the COVID-19 test results can be obtained only by two means, either My Health Online (MHO) or Ready Set (RS) Account.
- If you do not have any of these accounts or have incorrect contact information, personal email, or personal contact phone number EHS will be unable to communicate your results to you. Please ensure when you come for testing that Employee Health has the correct contact information on file when you come for testing.
- Please check your junk /spam folder for an email from Employee Health if you do not receive communication as expected.
- Getting Results Using MY HEALTH ONLINE (MHO)
- If you signed a consent form allowing your results to be placed into MHO, please use the link below to log into your account and view results.

1. To Sign _In for My Health Online (MHO), go to:
<https://myhealthonline.sccgov.org>
2. Click the orange box on the right that says “Sign up now”
3. Click the orange box on the right “Sign up online”. If you do not have Medical Record Number (MRN) ask the EHS staff when you go for testing.
4. When you go for testing ask the nurse to check “MyChart Sign Up” if you are already signed up it displays that you signed up already for MHO if not, ask the EHS staff, and they can either send a text to your cell phone or email link to your personal email to activate MHO account.
5. On the next screen, you will enter all the pertinent information (including your MRN), and the e-mail address to which you would like to receive an activation code.
6. You should receive the activation code quickly, and you can then go back to the website above and enter your Activation code, MRN, and DOB, and then complete the process. See attached tip sheet.
7. To then add MyChart to your phone (optional...you can also just receive results by e-mail), see second page of the attachment. OR
8. If you do not have MHO, then the negative results will be uploaded into Ready Set (RS) as per the volume of the results.

COVID-19 POSITIVE HEALTHCARE PERSONNEL (HCW) RETURN TO WORK GUIDANCE:

Regardless of the HCW COVID -19 vaccination status, all HCW must do the following upon learning that they have a COVID-19 positive test result:

- A. Immediately report the COVID-19 positive test result to their manager and EHS by sending a copy of your test results to COVIDehs@hhs.sccgov.org or a picture with name and date on a piece of paper next to the test if tested via antigen testing at home.
- B. If an HCW tests positive with any kind of COVID test (including home antigen self-collection test or self-kit, or with a COVID-19 test performed at EHS or outside healthcare facility), the HCW must isolate at home per this policy.
- C. All HCW are expected to cooperate with and follow the instructions by EHS and their manager with respect to identifying close contacts and exposure risks in the workplace and return to work criteria.
- D. All HCW, regardless of vaccination status, if asymptomatic may return to work after 5 days with at least one negative antigen test the same day. OR if continued to be symptomatic after 10 days of isolation without a viral test.
- E. The antigen testing can be completed via self-testing by the COVID positive HCW and notify the supervisor and EHS. Send EHS notification to COVIDehs@hhs.scc.gov with name of the employee, employee ID and the date of negative test result.
- F. In addition to any applicable universal masking requirements, HCW returning to work between days 5-9 after meeting routine criteria shall wear a surgical mask or fit-tested N95 for source control through at least day 10 from symptoms onset or positive test.