POLICY STATEMENT:
Texas Tech University Health Sciences Center Managed Care (TTUHSC MC) is dedicated to assuring the health and safety of all employees and offenders. In doing so, it is imperative that employee exposures to COVID-19 are managed appropriately.

PROCEDURE:

1. Prevention
   Prevention is the responsibility of all employees. Proper adherence to recommended infection control practices is expected. All employees shall utilize appropriate preventative best practices, including the utilization of personal protective equipment (PPE) and hygiene recommendations. Also, all employees shall have their temperatures taken upon entering the unit. If symptoms are discovered, the TDCJ COVID-19 Health Screening Form is required.

In addition, other workplace best practices are expected. These include, but are not limited to, the following:

   • Social distancing when possible
   • Unavoidable in-person meetings should be short in length and in a room where participants can keep a distance of six feet apart.
   • Avoidance of physical contact with other individuals unless necessary (e.g., CPR). Social contact (e.g., hugging) is strictly prohibited.
   • Stagger work hours. For example, if the normal working hours are from 9 a.m.-6 p.m., stagger reporting times at one-hour intervals between 7 a.m. and 10 a.m., with corresponding staggered times for the end of the day. Timing for lunch and other breaks can also be staggered.
   • Limit gathering in shared spaces such as break rooms, copy rooms or other places where people socialize. Remain six feet apart.
   • Eat away from others. Wipe down the eating space before and after the meal. Avoid crowded cafeterias and break rooms. Avoid the sharing of food or eating off another person’s plate.

If an employee is feeling ill, the employee shall not report to work. The employee is to notify their supervisor of their inability to report to work as soon as possible. If an employee is at the workplace and develops symptoms, the employee shall immediately notify their supervisor or designee and leave work immediately.
2. Symptoms
People with COVID-19 have had a wide range of symptoms reported – ranging from mild symptoms to severe illness. Symptoms may appear 2-14 days after exposure to the virus. People with these symptoms may have COVID-19. Please note, this list does not include all possible symptoms and the CDC will continue to update this list. The updated list will be posted on the CDC website and serves as the identified source for this policy.

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

3. Employee Daily Requirements

a. Self-screening prior to arriving on worksite
Employees must conduct a self-screen, including temperature check, and confirm they are not exhibiting COVID-19 symptoms, which include:
- Fever greater than 100 degrees.
- A new cough that is not attributable to another medical condition.
- New muscle aches not attributable to another medical condition or another specific activity (e.g., due to physical exercise).
- Throat pain not attributable to another medical condition.
- New shortness of breath not attributable to another condition.

If an employee does not own a thermometer, upon arrival at the worksite, they may use one as provided by their supervisor. PLEASE NOTE: Daily unit entrance checks of symptoms and temperature satisfy this requirement. There is not a requirement for the self-screening to be documented.

b. If you are exhibiting COVID-19 symptoms
Employees who are exhibiting symptoms and/or have a temperature greater than 100 degrees Fahrenheit will be required to stay home and:
- Inform their supervisor.
- Seek proper medical advice.
- Test for COVID-19 as may be appropriate.
- Submit an online screening tool to MC C&RM for follow up and additional guidance.

4. Additional Reporting Requirements
If an employee falls into one of the below categories, the employee must promptly contact their supervisor. Once notification has been received, the supervisor shall immediately notify the Managing Director of C&RM. The notification must include the unit; first and last name of the employee; position; date of the test or onset of symptoms; if tested, whether it is strike force screening or antibody testing; start date of the isolation and expected duration; names of any officers and/or offenders potentially exposed; and any other pertinent information. Upon receipt, the following items must also be immediately reported: test results, return to work, other relevant information.
• **Tested for COVID-19.** Testing for COVID-19 includes all types of testing, including antibody testing, strike force screenings, hospital mandate (e.g., prior to a procedure), personal preference, and repeat tests. The date of the test, test result, and date of the test must be provided.

• **Confirmed case of COVID-19.** A confirmed case is when the reporting employee has received a positive result from a COVID-19 laboratory test, with or without symptoms.

• **Suspected case of COVID-19.** A suspected case is when the reporting employee shows symptoms of COVID-19, but either has not been tested or is awaiting test results, or is without symptoms (asymptomatic) and has been tested. This would include completion of the TTUHSC screening form. If test results are positive, a suspected case becomes a confirmed case.

• **TDCJ Health Screening Form.** The form of the reporting employee indicates a fever (above 100.4°F) or close contact with an individual who tested positive for COVID-19 in the last 14 days.

• **TCCC Fever Exclusion.** The reporting employee’s entry temperature indicated fever and employee was excluded from the center.

• **All other potential or confirmed exposures.** Exposures include those related to personal exposures (e.g., household members or other individuals who are suspected or confirmed cases of COVID-19), contact tracing conducted by the health department, contact with TDCJ or other staff members who have confirmed cases of COVID-19, self-isolation or quarantine orders, and any other situation in which an employee determines they have had a higher risk of exposure.

5. **Local Health Department**
   If an employee receives a positive COVID-19 test results, the employee must immediately report the results to their local health department. The local health department will be the lead for contact tracing and the MC Compliance and Risk Management (C&RM) department will consult with them for guidance on additional employee testing, return to work, etc. In addition, C&RM will work with the employee and supervisor to determine if any employees or patients may have been potentially exposed to provide notification to TDCJ.

   If an individual work restriction is made by the local health department for a specific employee, the health department’s restriction will be applied instead of the ones outlined in this policy.

6. **Employee Work Restrictions**
   These work restrictions will be applied to employees. The determination of restrictions and employee notifications will be made by the supervisor.

   a. **Symptomatic Employees**
      Symptomatic employees shall not report to work. If during the course of the working day, an employee becomes ill, the employee must immediately notify their supervisor and leave work. Employees will be allowed to return to work based on the symptom-based strategy or test-based strategy.

      i. **Symptom-based Strategy**
         Exclude from work until:
         - At least 3 days (72 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications and improvement in respiratory symptoms (e.g., cough, shortness of breath); and,
         - At least 10 days have passed since symptoms first appeared.

      ii. **Test-based Strategy**
         Employees may return to work if they provide a negative COVID-19 test result and a healthcare provider’s note releasing the employee to return to work.
However, restrictions provided by the local health authority or medical practitioner will replace the symptom and test-based strategies and will be adhered to.

If an employee had COVID-19 ruled out and have an alternate diagnosis (e.g., tested positive for influenza), criteria for return to work should be based on that diagnosis.

b. Asymptomatic Employees
The work restrictions for employees who are asymptomatic will be determined based on the following categories:

i. Crisis Capacity Strategy to Address Staffing Shortages - Exposure or Pending Test Result
To ensure continuity of operations of essential functions, critical infrastructure and healthcare staff that have a COVID-19 exposure may be permitted to continue to work provided they remain asymptomatic and additional precautions are implemented for 14 days after last exposure. Staff must wear surgical facemasks at all times while in the workplace and will be monitored for symptoms and temperatures through the C&RM self-monitoring app.

ii. Time-based Strategy - Employees with confirmed COVID-19 who have not had any symptoms should be excluded from work until 10 days have passed since the date of their first positive COVID-19 diagnostic test assuming they have not subsequently developed symptoms since their positive test. However, restrictions provided by the local health authority or medical practitioner will replace the time-based strategy and will be adhered to.

iii. Strike Force Screening – If an asymptomatic employee receives a positive result from a strike force screening, the employee must notify their supervisor. The supervisor must immediately notify the Managing Director of C&RM. The employee will be directed to seek a nasopharyngeal swab COVID-19 test. If the nasopharyngeal swab test confirms the positive result, the above work restrictions will be applied.

c. Return to Work
After returning to work, the following restrictions will be in place:
- A surgical facemask must be worn at all times for source control and the employee is to have no contact with immunocompromised patients.
- Adhere to hand hygiene, respiratory hygiene, and cough etiquette in CDC’s interim infection control guidance (e.g., cover nose and mouth when coughing or sneezing, dispose of tissues in waste receptacles)
- Self-monitor for symptoms, and seek re-evaluation if respiratory symptoms recur or worsen.

d. TDCJ COVID-19 Health Screening Form
Employees are required to have their temperatures taken upon arrival of the unit. If an employee is determined to have symptoms, a TDCJ COVID-19 Health Screening Form will be completed.

The following work restrictions will be applied as appropriate. If these work restrictions are implemented, the employee’s supervisor shall notify the Managing Director of C&RM.

i. Yes to fever question: Employee will be sent home and will be required to submit a physician’s note stating they are clear of COVID-19 symptoms before being allowed to return to work

ii. Yes to close contact with anyone who tested positive for COVID-19 or with symptoms of COVID-19: Employee will be sent home and not allowed to return to work without providing a physician’s note stating they are clear of any COVID-19 symptoms. Notification must also be
made to the TDCJ Office of Emergency Management and the TDCJ Deputy Director of Health Services. However, to ensure continuity of operations of essential functions, critical infrastructure and healthcare staff that have a COVID-19 exposure may be permitted to continue to work under the crisis capacity strategy for staffing shortages, provided they remain asymptomatic and additional precautions are implemented for 14 days after last exposure. Staff must wear surgical facemasks at all times while in the workplace. If an employee becomes symptomatic, they will be sent home and will be required to submit a physician’s note stating they are clear of COVID-19 symptoms before being allowed to return to work.

7. Travel Isolation
Some COVID-19 related circumstances are required to be reported, but do not require a contact investigation. For example, at this time, domestic or international travel for personal reasons is discouraged. To assist in efforts to support the safety and security of employees and patients, please reconsider all travel plans. If travel is determined necessary, please carefully consider the avoidance of places identified with a travel warning notice by the Centers for Disease Control and Prevention (CDC) and be aware of the possibility to alter plans as the spread of COVID-19 continues. Employees that are planning travel must notify the Managing Director of C&RM. In addition, TTUHSC employees will complete the TTUHSC Travel Form prior to departure.

If travel was to an area within the United States where there is community-based spread COVID-19, to a county identified by the CDC with a travel health notice warning of Level 3, or on a cruise, an employee is required to self-isolate for 14 days. If an employee seeks waiver of the required self-isolation, they must contact the Managing Director of C&RM. In doing so, the employee must attest to asymptomatic/symptomatic status and identified risks. If approved, the employee will be notified of any adjustments in the self-isolation requirements. Any other stipulations upon return (e.g., surgical facemask) will be determined on an individual basis.

9. Contract Hospital Units
The employees of contract hospital units are required to report in accordance to this policy. Work restrictions in accordance with the TDCJ Health Screening form will be enforced. All other work restrictions will be at the discretion of the hospital protocols. Copies of these protocols will be maintained by the Managing Director of C&RM.

10. Return to Work Notification
If an employee has been restricted from work, the supervisor is to notify the Managing Director of C&RM with the date the restriction began and the anticipated return date. Any return to work restrictions will be noted and a timeline established. Completion of any return to work restrictions (e.g., cleared to work, negative test result) must also be communicated to the Managing Director of C&RM.

11. Failure to comply
Work restrictions will be determined as identified in this policy on an individual basis. Once assigned, the restrictions are to be considered mandatory and failure to comply will be reported according. This includes self-monitoring, utilization of surgical facemasks at all times, etc.

In addition, an employee’s failure to report potential, suspected, or confirmed exposure to COVID-19 or its related testing is mandatory. Failure to comply will result in personnel action.

11. Leave
Please refer to TTUHSC HR policies for information regarding use of leave.

12. Document Retention
The TTUHSC MC C&RM department will serve as the repository for the completed contact investigation packets. The department will also serve as the liaison to the TTUHSC OIH regarding COVID-19 employee related matters.

RESPONSIBILITY AND REVISIONS:
It is the responsibility of the TTUHSC MC Compliance and Risk Management Department to review and initiate necessary revisions annually.

RIGHT TO CHANGE POLICY:
TTUHSC MC reserves the right to interpret, change, modify, amend or rescind this policy in whole or in part at any time to reflect changes in policy and/or law.

CERTIFICATION:
This policy was approved by the TTUHSC MC Executive Medical Director and the Executive Director on 4/15/20.