



UHN Health Service (HS) Toolkit for COVID-19

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Background

On December 31, 2019, a cluster of cases of pneumonia was reported in Wuhan, China, and the cause has been confirmed to be a new coronavirus not previously identified in humans. This virus is now known as the SARS-CoV-2 and the infection it causes, the 2019 Novel Coronavirus infection or COVID-19.

COVID-19 is an evolving situation and, more recently, there has been evidence of COVID-19 variants of concern (VOCs). These VOCs contain mutations in the SARS-CoV-2 genome that may impact transmission, virulence, and vaccine efficacy. We monitor this situation and adjust COVID-19 case management as applicable.

Coronaviruses are a large family of viruses, including some that cause illness in people and others that cause illness in animals. Human coronaviruses are common and are typically associated with mild illnesses, similar to the common cold. However, some human coronaviruses (SARS, MERS) can cause more severe illness.

The characteristics of this novel coronavirus and the arising VOCs have become clearer over the past two years, but there is yet much to learn as the variants arise. Our focus currently is to rapidly identify anyone who may be infected with COVID-19 and ensure their safety, as well as the safety of other UHN staff and patients.

Purpose

The purposes of these guidelines are to:

1. Provide direction to Health Services (HS) for preventing and managing COVID-19 infections among health care workers (HCWs).
2. Prevent the transmission of COVID-19 at UHN.

This is an evolving situation. These guidelines are subject to update as new information and protocols are received.

This guidance document is not intended to take the place of medical advice, diagnosis, or treatment.

Applicability

This protocol applies to all individuals carrying out activities in the hospital, rehabilitation, and research settings. This includes, but is not limited to, all HCWs including physicians, nurses, contract workers, students, post-graduate medical trainees, researchers, and volunteers. This protocol does not apply to patients or visitors.

Health Services Contact information

The **HS COVID-19 Centre** may be contacted for any COVID-19-related questions. To request a consult from the HS COVID-19 Centre, **visit** <https://forms.uhn.ca/PublicForms/Form/Covid19Hotline>, or call 416-979-4441 x1 and leave a voicemail message if you are unable to submit an online form. Calls will be triaged and the volume of calls means that there are delays in returning the calls.

Case Definition for HCW Surveillance (possible COVID-19 testing)

Suspect case of COVID-19: HCW presents with any of the following symptoms:

- fever
- new onset of cough
- worsening chronic cough
- shortness of breath
- sore throat
- difficulty swallowing
- chills
- unexplained headaches
- eye pain or conjunctivitis
- nausea or vomiting
- diarrhea
- abdominal pain
- unexplained muscle or joint pain
- severe fatigue or weakness
- runny nose or congestion with no other cause i.e. allergies
- Decrease or loss of sense of taste and/or smell

Pregnant or breastfeeding HCWs

Pregnant or breastfeeding HCWs will not be expected to care for suspected or confirmed

patients with COVID-19.

Travel Surveillance Screening Guidelines

To limit the spread of COVID-19, the Government of Canada regulates travel guidance and requirements. For more information, please visit <https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/latest-travel-health-advice.html> and <https://travel.gc.ca/>

It is the responsibility of each individual employee to ensure that they are following the federal and provincial guidelines as outlined by the federal and provincial Ministries of Health.

It is not required that employees notify Health Services of domestic or international travel.

Please visit the [Government of Canada's](#) website for travel advice and the [Ministry of Health](#) website for updated information.

Testing

If you are not at work and develop symptoms:

- Self-isolate at home. DO NOT come to work. Inform your manager that you will not be at work.
- You must use the webform <http://tinyurl.com/HSCOVIDAAssessmentandRTW> to report your symptoms and request PCR testing through the TWH CAC
- Book an appointment for a PCR test:
 - Use the KICS webform for Health Services to book your appointment: <http://tinyurl.com/HSCOVIDAAssessmentandRTW>
 - The TWH CAC public booking link: <https://www.twfht.ca/displayPage.php?page=COVID19Assessment>
 - or book at your [local CAC](#).
- If your test is negative and you are REQUIRED to return for your next shift, notify your manager and complete <https://forms.uhn.ca/PublicForms/Form/Rtw> **UNLESS** your symptoms continue. If your symptoms continue you are required to notify your manager, contact the HS COVID-19 Centre by using the "Health Services COVID-19 Request to Contact" form: <https://forms.uhn.ca/PublicForms/Form/Covid19Hotline> or calling 416-979-4441 x1 and leaving a voicemail message

If you are at work and develop symptoms:

- Advise your manager/supervisor you will be leaving work when it is safe to do so. Gather your personal belongings; you will be required to leave the building immediately and return home to quarantine.
- You must use the websform <http://tinyurl.com/HSCOVIDAassessmentandRTW> to report your symptoms and request PCR testing through the TWH CAC
- Book an appointment for a PCR test:
 - Use the KICS webform for Health Services to book your appointment: <http://tinyurl.com/HSCOVIDAassessmentandRTW>
 - The TWH CAC public booking link: <https://www.twfht.ca/displayPage.php?page=COVID19Assessment>
 - or book at your [local CAC](#).
- If your test is negative and you are REQUIRED to return for your next shift, notify your manager and complete <https://forms.uhn.ca/PublicForms/Form/Rtw> **UNLESS** your symptoms continue. If your symptoms continue you are required to notify your manager, contact the HS COVID-19 Centre by using the "Health Services COVID-19 Request to Contact" form: <https://forms.uhn.ca/PublicForms/Form/Covid19Hotline> or calling 416-979-4441 x1 and leaving a voicemail message

HCWs who have tested positive for COVID-19 in the past 90 days should not be retested.

Occupational Exposure

An occupational exposure may have occurred when a HCW had **unprotected close contact with:**

1. An **asymptomatic** individual who has been diagnosed with COVID-19 infection and the HCW has been in close contact¹ within 10 days prior to the COVID-19 positive individual's test date.
2. A **symptomatic** individual who has been diagnosed with COVID-19 infection and the HCW has been in close contact¹ within 48 hours prior to the COVID-19 positive individual's symptom onset.

Criteria for high-risk close contact: (See Table 1 below for description of “unprotected”.)

1. Unprotected contact within 2 metres of an individual with COVID-19 infection for more than 15 minutes (cumulative or consecutive).

OR

2. Unprotected contact with respiratory secretions or fecal matter from an individual with COVID-19 infection.

Guidelines may differ for confirmed outbreaks, please contact the HS COVID-19 Centre for guidance.

Classification of Occupational Exposure Risks (see Table 1 and Table 2)

High-Risk Exposure:

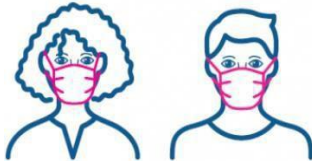
1. Close contact with an individual with COVID-19 infection while NOT wearing a facemask.
2. Close contact with COVID-19-positive individual who was NOT wearing a facemask, while exposed HCW was only wearing a facemask or respirator but no eye protection.
3. HCW wore surgical mask but not N95 respirator during aerosol-generating medical procedure (AGMP) on a COVID-19-positive patient.
4. HCW wore facemask but not N95 in the room within 30 minutes following an AGMP.
5. HCW was missing any of the following PPE during AGMP or in the room within 30 minutes following AGMP: N95, gloves, gown, or eye protection.

Low-Risk Exposure:

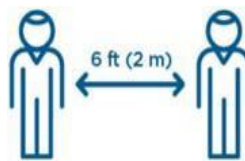
1. Unprotected interaction with COVID-19-positive individual for less than 15 minutes or at a distance greater than 2 meters (i.e. no use of PPE but does NOT meet criteria for close contact due to duration and nature of contact).
2. Close contact with COVID-19-positive individual who was wearing an approved facemask while exposed HCW was also wearing an approved facemask or respirator (but no eye protection, gloves or gown).

You are protected if:

Both people are masked







Unmasked but maintain physical distancing



If you have had a breach in your PPE when caring for a COVID-19-positive known or suspect patient: fill out an [incident report](#) and [contact](#) the HS COVID-19 Centre to report and determine next steps.

Table 1: Risk level for close contact in the occupational setting:

EXPOSED INDIVIDUAL	COVID-19 POSITIVE INDIVIDUAL	
Level of Personal Protective Equipment (PPE)	WITH Approved** Facemask	WITHOUT Facemask or Inappropriate Facemask
 WITH approved Facemask and Eye Protection <i>No gloves or gown</i>	Low	Low
 WITHOUT Eye Protection <i>No face shield/goggles</i> <i>With approved facemask</i>	Low	High
 WITHOUT Facemask <i>No or inappropriate facemask</i> <i>With or without eye protection</i>	High	High
 WITHOUT any PPE <i>No facemask & eye protection</i> <i>Inappropriate facemask & eye protection</i>	High	High

Please review hospital PPE for definitions. Click [here](#).

HCWs must wear a facemask and proper eye protection when providing direct patient care.

Aerosol Generating Medical Procedures (AGMPs):

For the IPAC Recommendations for Management of AGMPs, follow this link:

http://documents.uhn.ca/sites/UHN/Pandemic/COVID-19/ClinicalProtocols/AGMP_Guidance_Document.pdf

Table 2

HCW Personal Protective Equipment	Presence in the room during an AGMP or in the 30 minutes following procedure
None	High
No respiratory protection (i.e. no facemask or respirator)	High
Facemask (not N95 respirator)	High
No eye protection (i.e. no goggles or face shield)	High
No gown or gloves	High

Reporting of Occupationally Acquired Infections

In accordance with the Health Services and Safety Act and its regulations, an employer must provide written notice within four days of being advised that a worker has an [occupational illness](#). This includes an occupationally acquired infection, and/or a Workplace Safety and Insurance Board (WSIB) claim that must be filed by or on behalf of the worker with respect to an occupational illness, including an occupational infection, to the:

- Ministry of Labour,
- Joint Health and Safety Committee (or health and safety representative), and
- Union Partners (if applicable).

Occupationally acquired infections and illnesses are reportable to the WSIB.

Work Restrictions after Occupational Exposure

1. High-Risk Exposure

- Most HCWs must remain off-site from UHN for 10 days following their last exposure and continue to self-monitor for the development of COVID-19 symptoms. A COVID-19 test must be obtained as soon as possible and on Day 7 after exposure.
- During a Human Health Resource Crisis, individuals with a high risk exposure may be asked to return to work under strict guidelines (ex: rapid antigen testing and work self isolation). This direction will be determined by Health Services, IPAC, and program leadership and on a case-by-case basis.

2. Low Risk Exposure:

- HCWs may continue to work, but must self-monitor for COVID-19 symptoms. A COVID-19 test is not required.

If **symptoms develop**, use the online webform <http://tinyurl.com/HSCOVIDAassessmentandRTW> to report your symptoms and obtain a COVID-19 PCR test.

Non-occupational Exposure

A non-occupational exposure may have occurred when a HCW has been in close contact with:

1. An **asymptomatic** individual who has been diagnosed with COVID-19 infection within 10 days prior to the COVID-19 positive individual's test date.
2. A **symptomatic** individual who has been diagnosed with COVID-19 infection within 48 hours prior to the COVID-19 positive individual's symptom onset.
3. An individual within the HCW's household develops symptoms of COVID-19.

Work Restrictions after Non-Occupational Exposure

1. For HCWs in close contact with a household member or someone in the community who is a confirmed case of COVID-19:

- Remain at home, notify your manager and complete this form to request a PCR using this webform <http://tinyurl.com/HSCOVIDAassessmentandRTW>
- Most HCWs must remain off-site from UHN for 10 days following their last exposure and continue to self-monitor for the development of COVID-19 symptoms. A COVID-19 test must be obtained as soon as possible and on Day 7 after exposure.
- During a Human Health Resource Crisis, individuals with a high risk exposure may be asked to return to work under strict guidelines (ex: rapid antigen testing and work self isolation). This direction will be determined by Health Services, IPAC, and program leadership and on a case-by-case basis.

2. For HCWs who were in close contact with a household member or someone in the community who is symptomatic and has a pending COVID-19 test result:

- HCWs may report to work but must follow [self-isolation at work guidelines](#) until the close contact's results are back as negative. If result is positive, follow step 1 above.

If symptoms develop: use the online webform <http://tinyurl.com/HSCOVIDAassessmentandRTW> to report your symptoms and obtain a COVID-19 PCR test.

Return to Work (RTW) Clearance

1. If HCW tested positive for COVID-19:

- HCWs will be cleared to return-to-work if:
 - i. 10 days self-isolation period is completed. Date of **symptoms onset** is considered as day 0.

- ii. The HCW has been afebrile for 24 hours and any GI symptoms (abdominal pain, diarrhea, nausea, vomiting) are resolved for 48 hours

- **Asymptomatic** HCWs will be cleared to RTW if:

10 days self-isolation period is completed after positive test by PCR or rapid antigen test

→ **Note:** HCWs who have completed their 10-day self-isolation and remain **symptomatic MUST** notify their manager that they are unable to return to work. UHN employees will be connected with a disability case coordinator (DCC) for continued follow up

2. If HCW tested negative for COVID-19:

- The HCW are expected to return to work when symptoms, including fever, resolve or are at least significantly better for at least 24 hours; in the case of GI symptoms (nausea, vomiting, diarrhea, abdominal pain) symptoms must be resolved for 48 hours.
- If your test is negative and you continue to have symptoms you must notify your manager and contact Health Services that you will remain off work by completing this form
<https://forms.uhn.ca/PublicForms/Form/Covid19Hotline>
- If after testing negative, the HCW's symptoms persist, they are to follow regular sick policy.

3. If HCW tested indeterminate for COVID-19:

- HCW must self-isolate until they receive further direction from HS COVID- 19 Centre.

AND

- HCW will be re-evaluated for symptoms and re-tested for COVID-19 as soon as possible to determine relevance.

4. Asymptomatic HCWs who have a pending COVID-19 test result:

- May continue to work unless otherwise directed by the HS COVID-19 Centre or their local Public Health unit.

COVID-19 and your Child/Household Member

	Contact	Come to work?	Next steps
Scenario A Your child/household member has symptoms of COVID-19 but does <u>not</u> have a confirmed COVID-19 positive test.	Local Public Health Unit/family doctor on how to best care for your child/household member.	Yes , as long as you are asymptomatic.	Self-monitor for symptoms of COVID-19. → If you develop symptoms, call the HS COVID-19 Centre. Follow the self-isolation while working guidelines if your child/household member's test is pending, and you are asymptomatic.
Scenario B Your child/household member has symptoms of COVID-19, but the test results are pending.	Local Public Health Unit/family doctor on how to best care for your child/household member.	Yes , as long as you are asymptomatic.	Continue to self-monitor for the development of symptoms and maintain all public health measures such as wearing a mask and physical distancing. → If you develop symptoms, contact the HS COVID-19 Centre.
Scenario C Your child/household member is confirmed as COVID-19 positive (either laboratory confirmed or Public Health considers them a probable case)	HS COVID-19 Centre	No , not until you receive further guidance from the HS COVID-19 Centre.	All employees living with someone with a confirmed positive result of COVID-19 must stay home and quarantine (for 10 days), following the recommendations of Public Health and HS COVID-19 Centre return-to-work protocols.

<p>Scenario D Your child/household member is asymptomatic and <u>not</u> known to be positive for COVID-19 and any of the following happens:</p> <ul style="list-style-type: none"> → Your child/household member receives a 'ping' from the COVID-19 alert app, → Your school/daycare and/or Public Health notifies you that your child/household member has potentially been exposed to someone who has tested positive, → Public Health notifies you that your child/household member is a close contact of someone who has tested positive, or → Your child's school/daycare identifies an outbreak and your child/children are sent home to quarantine for 10 days 	<p>Local Public Health Unit/family doctor on how to best care for your child/household member</p>	<p>If you are asymptomatic, you may come to work, in the following circumstances:</p> <ul style="list-style-type: none"> → COVID-19 testing of exposed individual is deemed unnecessary by Public Health. → COVID-19 test results are pending in exposed individual. → COVID-19 test results return negative in exposed individual. 	<ul style="list-style-type: none"> → Carefully self-monitor and monitor your child/household member for any COVID-19 symptoms. → Follow COVID-19 testing direction of Public Health. → If your child/household member develops symptoms, follow steps in scenario A. → If your child/household member tests positive for COVID-19, follow steps in scenario C.
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COVID-19 Alert App: Directions for HCWs

HCWs who have been alerted by the app are to continue to work, [contact](#) the HS COVID-19 Centre, and will have an exposure assessment completed by an HS COVID-19 Centre clinician. This assessment will determine the risk level of the HCW.

HCWs are to turn off their App at work.

Guidance for HCWs who work in multiple facilities

UHN Health Services has updated their guidance on physicians, staff and learners working on outbreak units within and external to UHN. If the HCW works at UHN and another facility and the external unit/facility is on outbreak, the HCW will:

PREVIOUS STATE/As Applicable

1. **As much as possible**, dedicate your work to only the outbreak unit.
2. **If the HCW worked on the outbreak unit more than 5 days before the outbreak declaration and chooses UHN as their primary employer:**

The HCW can work UHN until the outbreak is declared over, and no quarantine period away from UHN is required.

3. **If the HCW worked on the outbreak unit**
 - within 5 days prior to the outbreak being declared
 - OR
 - during outbreak
 - AND
 - chooses UHN as their primary employer

Isolate for 10 days away from the outbreak unit/facility and remain asymptomatic prior to returning to work at UHN, if the HCW worked on the outbreak unit:

CURRENT STATE

4. **In the event of a human resources shortage related to COVID -19 there are times when restricting movement could be detrimental to patient care**, employees, physicians, learners will be allowed to move from outbreak units if the following guidelines are met:
 - HCWs must be asymptomatic

- HCW will inform their Manager/Supervisor/Principal Investigator/Division or Department Head that they are moving from an outbreak unit
- HCW will follow the outbreak enhanced testing measures that have been outlined for the outbreak
- HCW will follow [work self-isolation guidelines](#)
- HCW will participate in rapid antigen testing (RAT) prior to each shift and test negative prior to arriving on-site at UHN
- HCW will wear a properly fitted N95 mask for the duration of their shifts

These guidelines are to be followed until the individual has been away from the outbreak unit for 10 days or the outbreak has been declared over, whichever comes first.

This guidance is for **UHN workplaces only**. Please follow up with your other institutions Health Services/Occupational Health department to determine their working requirements. HCWs who also work in long-term care must refer to the current guidelines for Long-Term Care employees.

Prophylaxis for Exposed Individuals

There is no current prophylactic treatment for COVID-19. COVID-19 vaccines cannot be used for post-exposure prophylaxis.

Reporting Vaccination to Health Services:

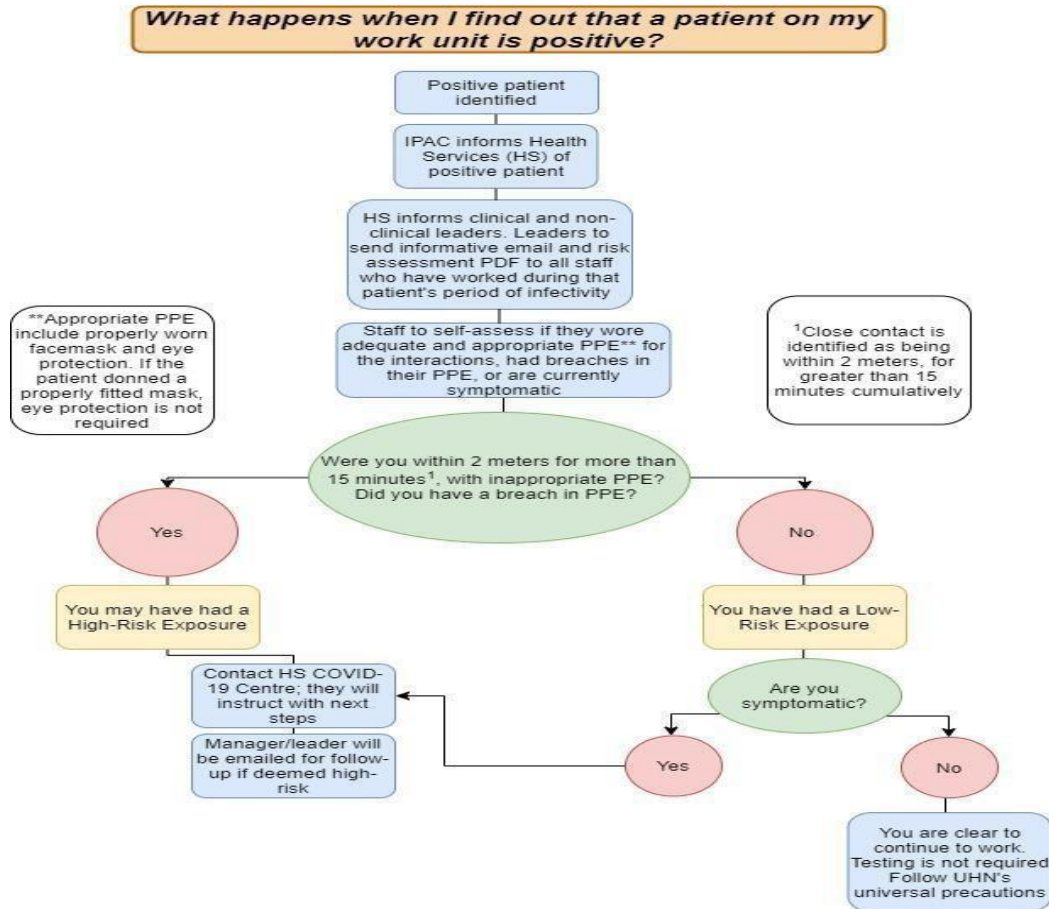
Members of TeamUHN must send a notification of vaccination after each dose of COVID- 19 vaccine to Health Services.

Please use the [Health Services Report Your COVID-19 Vaccine form](#) to report your vaccination.

Exposure Process – Positive Patient Pathway

1. Positive patient is identified
2. IPAC informs HS COVID-19 Centre of positive patient and period of infectivity. IPAC discloses areas that may have been affected.
3. IPAC and/or HS COVID-19 Centre professional sends email to clinic/unit manager, clinical and non-clinical managers, and managers of specialized services whose staff may have been exposed to the patient.
4. Managers forward the exposure notification email and exposure risk self-assessment [PDF](#) to all staff who may have been impacted. Staff must self-assess their risk level and identify if they may have been exposed.
5. If staff identify they may have had a high-risk close contact interaction, or are symptomatic, they must [contact](#) the HS COVID-19 Centre.

If HCW's have had a **breach in their PPE, inadequate PPE, or inappropriate PPE**, they must [contact](#) the HS COVID-19 Centre for assessment.



The Positive Employee Process

1. HS COVID-19 Centre is informed of a **positive employee**.
2. HS notifies IPAC and Safety Services for patient follow-up.
3. HS COVID-19 clinician completes a **COVID-19-positive staff assessment** and conducts contact tracing. This is when **close contacts** are identified.
4. The positive employee's manager and clinical director are made aware of the positive employee and are sent an email with education to share with staff.
5. All **close contacts are contacted** and an **exposure assessment** is completed.
6. The positive employee and staff who experienced a high-risk exposure will be followed by the HS COVID-19 Centre until it is safe for them to return to work.

If HCWs have had a **breach in their PPE, inadequate PPE, or inappropriate PPE** they must [inform Health Services using this link](#) or tinyurl.com/HSCOVIDAassessmentandRTW

Testing Process

Testing initiatives in an outbreak setting are determined by IPAC and Health Services and are unique to each outbreak. The need for and timing of repeat prevalence testing in an outbreak setting will be determined by IPAC and Health Services, based on concern for ongoing COVID-19 transmission or if a variant of concern is identified in the outbreak setting.

Additional Information

- [Public Health Ontario Public Resources](#)
- Public Health Agency of Canada's [Public Health Management of Cases and Contacts for COVID-19](#)
- Public Health Agency of Canada's [IPAC for COVID-19: Interim Guidance for Home Care Settings](#)
- Public Health Agency of Canada's [COVID 19: For Health Professionals](#) website
- Centers for Disease Control and Prevention's [COVID-19 website](#)
- European Centre for Disease Prevention and Control's [COVID-19 website](#)
- Ministry of Health's [COVID-19 website](#)
- Provincial Infectious Diseases Advisory Committee's [Tools for Preparedness: Triage, Screening and Patient Management of Middle East Respiratory Syndrome Coronavirus \(MERS-CoV\) Infections in Acute Care Settings](#)
- [Government of Canada's COVID-19 Affected Areas list](#)
- World Health Organization's [Disease Outbreak News website](#), and [COVID-19 website](#)
- Canada Recovery Sickness Benefit <https://www.canada.ca/en/revenue-agency/services/benefits/recovery-sickness-benefit.html>
http://intranet.uhn.ca/departments/human_resources/ei_cerb_sick_payment.asp
- UHN Human Resources Payroll Coding for COVID-19
http://documents.uhn.ca/sites/UHN/Human_Resources/General_Information/Redeployment/paycode_notice.pdf
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