

Date: Tuesday January 4, 2022

**Title:** Updated interim Guidance for managing Healthcare Personnel (HCP) with SARS-CoV-2 Infection or Exposure to SARS-CoV-2

<u>Situation</u>: SARS-CoV-2 continues to impact our community and healthcare facilitiesWith the rise of the Omicron variant additional interim guidance for managing HCP impacted by SARS-CoV-2 have been released by CDC.

## Background:

The OSHA Emergency Temporary Standard that was released on 6/21/2021 addressed exposure and illness protocols for healthcare settings – this ETS expired on 12/21/2021 COVID-19 Healthcare ETS | Occupational Safety and Health Administration (osha.gov)

OSHA announces today that it intends to continue to work expeditiously to issue a final standard that will protect healthcare workers from COVID-19 hazards, and will do so as it also considers its broader infectious disease rulemaking. However, given that OSHA anticipates a final rule cannot be completed in a timeframe approaching the one contemplated by the OSHAct, OSHA also announces today that it is withdrawing the non-recordkeeping portions of the healthcare ETS. The COVID-19 log and reporting provisions, 29 CFR 1910.502(q)(2) (ii), (q)(3)(ii)-(iv), and (r), remain in effect. These provisions were adopted under a separate provision of the OSHAct, section 8, and OSHA found good cause to forgo notice and comment in light of the grave danger presented by the pandemic. See 86 FR 32559.

Current NMHS practice is to restrict staff from work after a positive SARS-CoV-2 test result for 10 days after symptom onset or, if asymptomatic, from test date.

Staff that are asymptomatic but exposed to SARS-CoV-2 are expected to come to work and wear a mask at all times. If they become symptomatic they need to contact EH immediately for evaluation and to set up testing if deemed appropriate.

NMHS Employee Health is only approving to have staff with respiratory symptoms tested at this time – as directed by NMHS Pathology department.

## Assessment:

This document is confidential and protected from disclosure pursuant to the privileges granted by:

<sup>(1)</sup> The Health Care Quality Improvement Act set forth at: Neb. Rev. Stat. §§71-7904 to 71-7913 in Nebraska, and/or:

<sup>(2)</sup> Iowa Code Ann. § 147.135 and Iowa Admin. Code r. 645-9.6 (272c), concerning confidential and privileged peer review materials in Iowa.

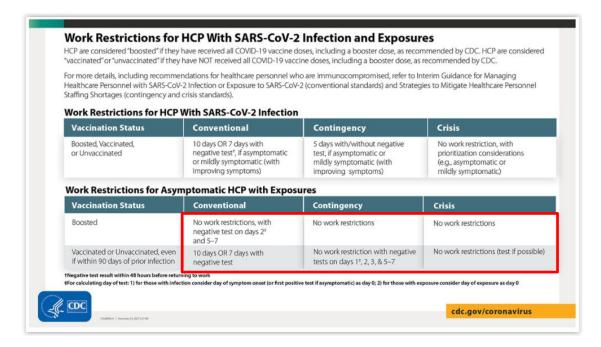
In response to the withdrawal of the OSHA COVID-19 Healthcare ETS, CDC published updated guidance for managing HCP with SARS-CoV-2 infection or exposure on December 23, 2021.

Please review the following websites:

Conventional standards: <u>Interim Guidance for Managing Healthcare Personnel with SARS-CoV-2</u> Infection or Exposure to SARS-CoV-2 | CDC

Contingency and Crisis standards: <u>Strategies to Mitigate Healthcare Personnel Staffing Shortages</u> | CDC

This table provides a *very brief* summary of the contents of the webpages:



Employee Health and NMHS Pathology departments expressed concern about the direction for testing in the red box. Testing based on exposures at that scale would be difficult for EH to obtain/manage, it would likely overwhelm the MPC testing sites, and would quickly deplete our supplies used for running tests in the lab.

Home based testing kits were discussed and it was determined that these would not be a viable option due to limited availability of the tests and the inaccuracies of the tests with the Omicron variant.

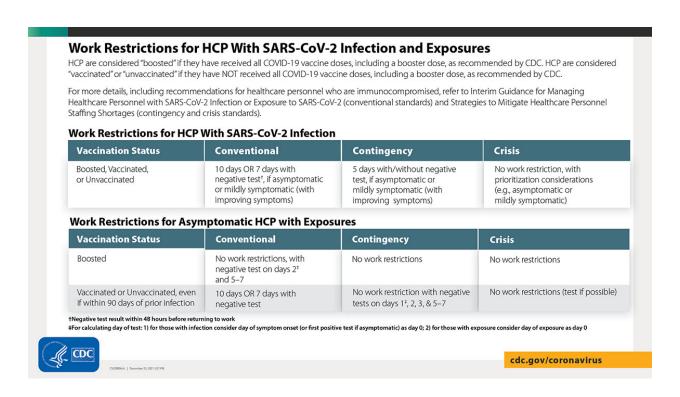
This document is confidential and protected from disclosure pursuant to the privileges granted by:

<sup>(1)</sup> The Health Care Quality Improvement Act set forth at: Neb. Rev. Stat. §§71-7904 to 71-7913 in Nebraska, and/or:

<sup>(2)</sup> Iowa Code Ann. § 147.135 and Iowa Admin. Code r. 645-9.6 (272c), concerning confidential and privileged peer review materials in Iowa.

## Recommendation:

The ID providers and Infection Prevention departments recommend that NMHS should follow the CDC Interim Guidance for managing healthcare personnel and adopt **contingency recommendations** at leadership's discretion. However, due to testing limitations, the ID group supports pathology's assessment and recommends continuing with NMHS' current testing protocols – specifically only testing employees with symptoms.



This document is confidential and protected from disclosure pursuant to the privileges granted by:

<sup>(1)</sup> The Health Care Quality Improvement Act set forth at: Neb. Rev. Stat. §§71-7904 to 71-7913 in Nebraska, and/or:

<sup>(2)</sup> Iowa Code Ann. § 147.135 and Iowa Admin. Code r. 645-9.6 (272c), concerning confidential and privileged peer review materials in Iowa.