COVID-19 Overview

For State Agency Administrators and Agency Employees
Session Agenda

01. COVID-19 Overview
02. Definition of a Direct Contact
03. Quarantine Versus Isolation
04. Protecting Staff, Children & Families
05. Reopening RI- Safe Masking Procedures
06. Training & Education
COVID-19 Overview

Facts & Transmission
Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV2) which causes COVID-19 Coronavirus disease, is a new coronavirus with symptoms ranging from mild (or no symptoms) to severe illness.

COVID-19 is spread:

- through close contact (about 6 feet or two arm lengths) with an infected person.
- from respiratory **droplets** when an infected person coughs, sneezes, or talks.
- by touching a surface or object that has the virus on it, and then by touching your mouth, nose, or eyes (*Less risk.*)

Avoid touching your eyes, nose and mouth.

Cover coughs and sneezes with your elbow or with a tissue you throw away.
Symptoms of COVID-19

• Fever or chills
• Cough (new)
• Shortness of breath or difficulty breathing
• Fatigue
• Muscle or body aches
• Headache
• Sore throat
• Loss of taste or smell (new)
• Congestion orrunny nose (new)
• Nausea or vomiting
• Diarrhea


Please stay home and do not enter the workplace if you:

- have had any of the symptoms listed below in the past three days
- are a close contact of a person who tested positive for COVID-19 within the past 14 days

For the safety of our staff and guests, please SELF SCREEN for symptoms of COVID-19. Please do not enter if you have any of the following symptoms:

- fever or chills
- muscle or body aches
- sore throat or runny/stuffy nose
- headache, nausea, vomiting or diarrhea
- fatigue
- cough, shortness of breath or difficulty
- sudden loss of taste or smell

1. You may enter if symptoms experienced can be explained by known allergies or non-infectious illnesses.
2. Does not apply to people who come into contact with people with symptoms of COVID-19 during the course of their daily work while wearing full and appropriate personal protective equipment (PPE).

For questions or concerns, please call the Department of Business Regulation at 401-889-5550 or visit dbr.ri.gov/questioncomplaints/
Direct/Close Contact

What is a “close contact”
A "close contact" is defined as:

Any individual who was within 6 feet of an infected person for at least 15 minutes starting from 2 days before illness onset (or, for asymptomatic patients, 2 days prior to positive specimen collection) through the time when the infected person completes their isolation period.

Fact:

A Contact of a contact of an infected person is not included in contact tracing. Contacts of contacts do not need to quarantine. If the person on quarantine becomes ill due to their exposure, then they are tested and if positive, the contact tracing process starts for this individual.
Determining Close Contacts

Based on CDC guidance, a close contact is someone who was within 6 feet of an infected person for at least 15 minutes (starting 48 hours before illness onset).

What Counts as Close Contact?

- You were within 6 feet of someone who has COVID-19 for a total of 15 minutes or more
- You provided care at home to someone who is sick with COVID-19
- You had direct physical contact with the person (hugged or kissed them)
- You shared eating or drinking utensils
- They sneezed, coughed, or somehow got respiratory droplets on you

Reminders About Quarantine and Close Contacts

- Direct, prolonged contacts must complete a 10-day quarantine period and monitor symptoms for an additional 4 days.
- Contacts tested on day 5 of quarantine can end quarantine on day 7 if that test is negative, but must monitor symptoms for 7 more days.
- Remember, a single negative is a snapshot in time and COVID-19 can develop anytime within 14 days from the date of last known exposure.
Quarantine vs. Isolation
Understanding Isolation vs. Quarantine

- **Isolation** separates sick people with a contagious disease from people who are not sick.
- **Quarantine** separates and restricts the movement of people who were exposed to a contagious disease to see if they become sick.

**Isolation** is for people who are already sick.

- Isolation separates and restricts the movement of sick people so they can't spread disease to healthy people.
- Isolation is a routine procedure in hospitals and healthcare facilities.
- Isolation is usually voluntary, but officials have the authority to isolate people who are sick if necessary.

**Quarantine** is for people who are not sick, but may have been exposed.

- Quarantined people may or may not become sick.
- Quarantined people should stay at home or another location so they don't spread disease to healthy people.
- If you are quarantined and you become ill, you can seek medical treatment from a healthcare provider.
- Quarantine can be voluntary, but officials have the authority to quarantine people who have been exposed to an infectious disease if necessary.
Isolation: “Sick” Individuals

Infected person who had symptoms prior to test/at time of test

Remain on isolation for a minimum of 10 days from SYMPTOM ONSET and 24 hours fever free without use of fever reducing medications like acetaminophen or ibuprofen and overall improvement in symptoms.

Infected person who is asymptomatic (did not have symptoms at time of test)

Remain on isolation for a minimum of 10 days from SWAB DATE as long as infected person remains asymptomatic.
Quarantine: “Well” Individuals

(for people who are exposed to an infected person while this infected person was infectious)

Direct contacts with a definitive end to exposure (e.g., workplace)

Household members may have ongoing exposure if infected person is unable to isolate in a separate bedroom and bathroom

To calculate quarantine end dates, use the quarantine calculator found online at: https://covid.ri.gov/covid-19-prevention/quarantine-and-isolation
**Quarantine Instructions**

**Release from Quarantine Options:**

- Ten days from last known exposure without a COVID-19 test.

- Seven days from last known exposure with a COVID-19 test obtained on Day 5 of quarantine.

- Either of these options require active symptom monitoring for the remaining four to seven days.

- When traveling, contact your supervisor and Human Resources to discuss quarantine options.

*If you get symptoms of COVID-19, isolate at home, call your healthcare provider, and get a COVID-19 test. Learn more at [health.ri.gov/covid/whattodo](http://health.ri.gov/covid/whattodo)*
**Positive Case Procedure**

- When RI Department of Health (RIDOH) is notified of an infected person via lab report, RIDOH obtains patient information via interview or other data collection methods.

- The infected person is put on **ISOLATION**. 48 hours (2 days) prior to symptom onset, or test date if asymptomatic, until 10 days after onset/test date is considered the **infectious period**. This is the period when the case can potentially spread the virus to others.

- Direct contacts are collected from 2 days prior to either onset or test date (whichever came first). Contacts are put on **QUARANTINE**.

- Workplaces are notified and assist in the investigation. Workplaces reiterate RIDOH guidance to staff if an infected person worked while infectious.

- HR/Administration is notified each time a staff member is identified as part of the organization and assists with organizing cleaning and other measures to help prevent the spread of illness.
Inform Employees, Increase Vigilance, and Maintain Confidentiality

Reducing stress and preventing further spread among employees within the workplace is largely reliant on good communication from Agency Directors, management, human resources, and fellow employees.

Key Messages:

- Remind staff that everyone has a responsibility to report test results or potential exposures relative to COVID-19 to their workplace.

- Reinforce with employees that confidentiality must be maintained and that discrimination or stigma in the workplace will not be tolerated.

- Ensure staff are aware that information on COVID-positive staff has been reported to RIDOH and that leadership will be working to assess all risks of exposures.

- Reiterate the definition of a direct, prolonged contact as well as outline prevention measures being taken to reduce employee fear and worry.

- Communicate symptom screening procedures and any employer policies that support employees who need to stay home because they are experiencing symptoms.

How employees can prevent close contact while at work:

- Wear masks at all times and maintain six feet of distance from others
- Keep interactions with others in the workplace to 10 minutes or less
- Avoid eating together, refrain from sharing food, drink, or utensils, and close break rooms
- Wipe down hard surfaces with EPA-approved cleaner several times each day
- Refrain from sharing office or personal items
- Avoid carpooling and socializing outside of work
Protecting Staff and Maintaining Safety
Protecting Staff From Exposure—Agency Responsibilities

1. Daily Staff COVID-19 Screening
2. Agencies with Field Staff COVID-19 Screening
3. Minimizing Contact and Limiting Exposures
4. Office Building Infection Control
Daily Staff COVID-19 Screening

Each staff member is screened daily for symptoms, travel and possible contact with a known infected person. (https://www.reopeningri.com/resource_pdfs/COVID19_Screening_Tool_English-NEW.pdf)

Out of state travel: Negative test + monitor symptoms

Out of country travel or contact with a known infected person: 14-day quarantine

Symptoms (without known contact): Staff must be fever free 24 hours and be free of symptoms prior to return

- A negative COVID-19 test is not recommended for return
- A test is recommended if COVID-19 is suspected
Each family member/child/patron/facility member is screened prior to visit for symptoms, travel and contact with a known case. ([https://www.reopeningri.com/resource_pdfs/COVID19_Screening_Tool_English-NEW.pdf](https://www.reopeningri.com/resource_pdfs/COVID19_Screening_Tool_English-NEW.pdf))

Out of state travel: Postpone visit/check in, if can do so safely until negative test result obtained

Out of country travel or contact with a known case: Postpone visit/check in until 14 day quarantine complete if can do so safely. *A negative test is not a substitution for quarantine.*

Symptoms (without known contact): Postpone visit/check in until fever free x 24 hours and person is free of symptoms. If COVID-19 is suspected recommend to consult PCP, get tested, postpone visit 10 days from symptom onset if can do so safely.
Minimizing Contact and Limiting Exposures

- Treat everyone as if they could be infectious.
- Masks at all times when around others and unable to socially distance.
- Frequent hand hygiene is critical.
- Outside poses less risk vs. inside.
- Minimize time in vehicles with others, number of people at visits, and close contact with those when visiting a home, supervising visits and while in the office.

Wash your hands frequently with soap and water.
If unavailable, use sanitizer with at least 60% alcohol.
Mask Wearing

- Your mask should fit snugly but comfortably over your nose, mouth, and chin without any gaps.

- Always wash your hands after handling or touching a used mask. Wash and dry cloth face coverings after use each day.

**RECOMMENDED**

- **Face mask** worn the right way and at least two layers thick

  * N-95 respirators are critical supplies that should be reserved for healthcare providers and other first responders
Masks should not be worn by children younger than age two, anyone who has trouble breathing, or anyone who is unconscious, incapacitated, or otherwise unable to remove the mask without help.

**NOT RECOMMENDED**
- Face shield alone
- Loose-fitting bandana
- Face mask with valve
- Face mask worn the wrong way
- Neck gaiter only one layer thick
Office Building Infection Control

- Wear masks at all times when around others.
- Stay home when ill or on quarantine. Avoid “break rooms” and crowds, consider eating lunch outside or in car.
- Remain >6 ft apart at all times.
- Wipe down hard surfaces with EPA approved cleaner.
- Do not share office items or personal items. Minimize staffing and time spent in office if feasible and safe.

Addressing COVID-19 Through Air Circulation

- Air exchanges 4-6 per hour
- Keep relative humidity at 40-60%
- Use appropriate air filtration such as MERV 13 or higher

For more information visit: [https://health.ri.gov/covid/indooraircirculation/](https://health.ri.gov/covid/indooraircirculation/)
Adhering to Shared Common Area and Break Room Recommendations

- Close common areas, if possible. If not, encourage fellow employees to avoid these areas, when possible. Encourage each other to eat meals or take breaks alone, and when possible, outdoors or in their own workspaces.

- Work with supervisors to limit the number of people allowed in common areas at the same time. For a smaller space, permit no more than 1-2 people at a time. Help ensure signage with capacity limits is posted.

- Help rearrange or remove furniture, and/or mark spaces in common areas to ensure that people stay at least six feet apart from each other.

- Discourage fellow employees from eating food together or sharing food with each other.

Visit www.reopeningri.com for more information.
Training & Education
Promote DOA COVID-19 Employee Toolkit

www.employeehandbook.ri.gov

Educate Supervisors and COVID-19 Agency Leads

Use a combination of local and national training tools to inform supervisors.

By the end of the training all Supervisors will:

1. know the basics of COVID-19 (symptoms, prevention, history, etc.)
2. know the difference between isolation and quarantine.
3. know the difference in guidelines between a direct contact and positive case.
4. who the COVID-19 representative is for their agency.
5. know how to do contact tracing.

Educate Employees and Subcontractors

Use basic education and multi-media messages (e.g., videos) to explain changing guidance, promote prevention, highlight employee supports, and reduce stigma and discrimination.

www.hr.ri.gov
Training Resources for Supervisors & COVID-19 Agency Leads

COVID-19 Contact Tracing Training from Johns Hopkins University

1. Basics of COVID-19
2. Basics of contact tracing for COVID-19
3. Steps to investigate cases and trace their contacts

Additional RI-Specific Information

1. Who the COVID-19 representative is for your agency?
2. What the RRT is and their purpose?
3. Know the HR Toolkit and be able to answer questions from the FAQs provided.
Training Resources for Employees & Subcontractors

General COVID-19 Training

1. Johns Hopkins Training (Understanding the COVID-19 Pandemic)
2. Recommended: Modules 1, 2, 4, and 5

RI-Specific Training

1. Review the COVID-19 Employee Toolkit.
2. Watch video by Dr. McDonald (RIDOH Medical Director) on the basics of COVID-19.
3. Review HR FAQs.
4. Know the COVID-19 contact for their agency.
For questions, please contact Human Resources at 401-222-2160.