

# GOVERNMENT OF THE DISTRICT OF COLUMBIA DEPARTMENT ON DISABILITY SERVICES

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# DDS TRANSMITTAL# 21-13

TO:	All Developmental Disabilities Administration (DDA) Providers
FROM:	Shasta Brown, Acting Deputy Director, Quality Assurance and Performance Management Administration
DATE:	December 30, 2021
RE:	Guidance on Healthcare Personal monitoring, restriction, and return to work

The Department on Disability Services (DDS), Developmental Disabilities Administration (DDA), releases this transmittal to outline the DC Department of Health (DOH) updated guidance for healthcare personnel (HCP) monitoring restriction, and return to work, effective December 28, 2021. The provider community are required to follow DOH HCP guidance and recommendations related to universal masking, eye protection, and HCP exposure, monitoring, and work restriction for COVID-19. The guidance applies to all paid and unpaid HCP who has the potential of exposure to due close contact of person who test positive of COVID-19. The applicable settings are an Intermediate Care Facility (ICF) and Residential Habilitation. However, it is highly recommended that Supporting Living settings follow the guidance and best practice.

#### Provided below are the key points:

- 1. HCP who has symptoms should stay home. If symptoms develop at work, keep face mask on, isolate, notify supervisor, and leave the homes.
- 2. HCP must wear a face mask (medical, or surgical), except for temporary removal of the mask to eat, drink, or change mask.
- 3. HCP must wear eye protection in accordance with the guidance.
- 4. Continue to educate HCP on signs and symptoms of consistent with COVID-19
- 5. Screen all HCP at the beginning of their shift
- 6. HCP Providers must email <u>coronavirus.hai@dc.gov</u>, the respective Quality Resource Specialist (QRS), the Service Coordinator (SC), and the DDS Waiver Unit, if applicable.
- 7. HCP providers must have/update internal policies to address HCP monitoring, restriction and return to work due to COVID-19

GOVERNMENT OF THE DISTRICT OF COLUMBIA



8. HCP Providers must implement capacity strategies in sequence (i.e. implement contingency strategies before using crisis strategies.

## **HCP Exposure Definition**

**Exposure:** HCP who was less than 6 feet of a person who tested positive for COVID-19 for a cumulative total of 15 minutes or more over a 24-hour period, while that person who was infectious and the HCP were not wearing a facemask.

#### Work Restrictions (no staffing shortages)

#### **Boosted HCP**

- No work restriction unless directed by DC Health
- Test on day 2, and 5-7 days after exposure
- Monitor for symptoms.
- Contact supervisor if HCP develop symptoms; testing performed

#### Vaccinated (not Boosted) or unvaccinated HCP

- Remove from schedule for 10 days after exposure or 7 days with negative COVID-19 test after exposure
- Monitor for symptoms
- Contact supervisor if HCP develop symptoms; testing performed

#### Work Restrictions (staff shortages)

#### **Contingency**

#### **Boosted HCP**

- No work restriction unless directed by DC Health
- Test on day 2, and 5-7 days after exposure
- Monitor for symptoms.
- Contact supervisor if HCP develop symptoms; testing performed

#### Vaccinated (not Boosted) or unvaccinated HCP

- No work restriction unless directed by DC Health
- Test on days 1,2,3, and 5-7 days after exposure
- Monitor for symptoms
- Contact supervisor if HCP develop symptoms; testing performed



# <u>Crisis</u>

## Boosted HCP

- No work restriction unless directed by DC Health
- Monitor for symptoms.
- Contact supervisor if HCP develop symptoms; testing performed

Vaccinated (not Boosted) or unvaccinated HCP

- No work restriction unless directed by DC Health
- Test on days 1,2,3, and 5-7 days after exposure
- Monitor for symptoms
- Contact supervisor if HCP develop symptoms; testing performed

#### *Returning to work after COVID-19 infection* Symptomatic HCP with or without a positive COVID-19 test:

HCP with mild to moderate illness (not severely immunocompromised)

- At least 10 days after the first symptoms have passed
- At least 24 hours have passed since last fever.
- Symptoms have improved

HCP with severe to critical illness or severally immunocompromised

- At least 10 days and up to 20 days after the first symptoms have passed
- At least 24 hours have passed since last fever.
- Symptoms are improving
- Consider consulting with infectious disease experts.

# Asymptomatic HCP with positive COVID-19 test

Conventional Capacity:

Option 1

- At least 10 day have passed since the date of the positive test results. Option 2
  - At least 7 days have passed since the date of the positive test results
  - Negative test within 48 hours prior to return to work

Contingency Capacity:

- At least 5 days have passed since the date of the positive test results
- Negative test within 48 hours prior to return to work

Crisis Capacity:

• May continue to work

Severely immunocompromised:

GOVERNMENT OF THE DISTRICT OF COLUMBIA



• At least 10 days and up to 20 days after the first symptoms have passed

In addition to the updated guidance from DC DOH, the Mayor issued two new order due to the increase in spread of the Omicron variant. At this time, the provider community is excluded from the booster requirement in the Mayor's Order 2021-147. However, providers are required to adhere to the Mayor's order 2021-148, which requires people to show proof of vaccination for entering certain indoor establishment and facilities. Effective, January 15, 2022, providers must ensure staff and people who receive support have a copy of his/her vaccination card when they are in the community.

Please visit <u>coronavirus (dc.gov)</u> for the updates related to the corona virus.

If you have questions, please contact Shasta Brown at 202-730-1754 or <a href="mailto:shasta.brown@dc.gov">shasta.brown@dc.gov</a> .