Member organizations have asked ECRI for guidance on whether staff who have traveled or otherwise been potentially exposed to COVID-19 should be quarantined at home before being allowed to return to work.

In our response, ECRI emphasizes that, with the situation changing rapidly, organizations should stay abreast of recommendations on return-to-work scenarios from the Centers for Disease Control and Prevention (CDC). Importantly, relying on CDC’s guidance helps organizations avoid the stigmatization or discrimination that could be present if they made determinations of risk based on race or country of origin. Likewise, the organization should be sure to preserve the confidentiality of staff or other individuals with confirmed COVID-19. Based on CDC’s guidance, ECRI encourages organizations to take the following steps.

**Actively encourage sick employees to stay home.** Employees who have symptoms of acute respiratory illness are recommended to stay home and not come to work until they are free of fever (100.4° F [37.8° C] or greater using an oral thermometer), signs of a fever, and any other symptoms for at least 24 hours, without the use of fever-reducing or other symptom-altering medicines (e.g., cough suppressants). Employees should notify their supervisor and stay home if they are sick.

Organizations should ensure that sick leave policies are flexible and consistent with public health guidance and that employees are aware of these policies. Likewise, be in touch with companies that provide your contract or temporary employees about the importance of sick employees staying home and encourage them to develop nonpunitive leave policies.

To help make it easier for staff to adhere to stay-at-home policies, do not require a healthcare provider’s note for employees who are sick with acute respiratory illness to validate their illness or to return to work. Healthcare provider offices and medical facilities may be extremely busy and not able to provide such documentation in a timely way.

In addition to encouraging employees to be mindful of their own health, organizations should maintain flexible policies that permit employees to stay home to care for a sick family member. Employers should be aware that more employees may need to stay at home to care for sick children or other sick family members than usual.

The Pennsylvania Department of Health has published interim guidance for milestones employees should achieve before being allowed to return to work, including at least three days since resolution of fever, resolution of respiratory symptoms, and passing of at least seven days since the initial onset of symptoms.

**Separate sick employees.** CDC recommends that employees who appear to have acute respiratory illness symptoms (i.e., cough, shortness of breath) upon arrival to work or become sick during the day should be separated from other employees and be sent home immediately. Sick employees should cover their noses and mouths with a tissue when coughing or sneezing (or an elbow or shoulder if no tissue is available).

Massachusetts General Hospital has released a 2019 Novel Coronavirus Toolkit, which includes an algorithm the organization can use to determine whether sick staff or other individuals should be isolated.
Emphasize respiratory etiquette and hand hygiene by all employees. Place posters that encourage staying home when sick, cough and sneeze etiquette, and hand hygiene at staff entrances and in other workplace areas where they are likely to be seen.

Provide tissues and no-touch disposal receptacles for use by employees.

Instruct employees to clean their hands often with an alcohol-based hand sanitizer that contains at least 60% to 95% alcohol, or wash their hands with soap and water for at least 20 seconds. Soap and water should be used preferentially if hands are visibly dirty.

Provide soap and water and alcohol-based handrubs in the workplace. Ensure that adequate supplies are maintained. Place handrubs in multiple locations or in conference rooms to encourage hand hygiene.

Visit CDC’s coughing and sneezing etiquette and clean hands webpage for more information.

Environmental cleaning. Organizations should ensure that all frequently touched workspaces are cleaned routinely, following guidelines from CDC and referring to ECRI’s guidance on disinfectants presumed effective against the coronavirus that causes COVID-19. Disposable wipes can provide additional opportunities to disinfect these frequently touched surfaces, which can include doorknobs, computer keyboards, remote controls, and desks.

Employee travel precautions. Although CDC and other federal agency guidance on domestic and international travel continues to evolve, sharp restrictions are recommended. However, some travel may be unavoidable. Encourage staff to review CDC’s Traveler’s Health Notices when making plans and again before and during travel.

Employees should check themselves for symptoms of acute respiratory illness before starting travel and notify their supervisor and stay home if they are sick or become sick during travel. Employees who become sick when traveling outside the United States should follow the organization’s policy for obtaining medical care or contact a healthcare provider or overseas medical assistance company to assist them with finding an appropriate healthcare provider in that country. A U.S. consular officer can help locate healthcare services. However, U.S. embassies, consulates, and military facilities do not have the legal authority, capability, or resources to evacuate or give medicines, vaccines, or medical care to private U.S. citizens overseas.

Employees exposed at work or home. Employees who are well but who have a sick family member at home with COVID-19 should notify their supervisor and refer to CDC guidance for how to conduct a risk assessment of their potential exposure. The same procedure should be followed if an employee is exposed to a coworker with confirmed COVID-19.

If an employee is confirmed to have COVID-19, employers should inform fellow employees of their possible exposure in the workplace but maintain confidentiality as required by the Americans with Disabilities Act (ADA).

To learn how to become a member, contact us: clientservices@ecri.org

The recommendations contained in Ask ECRI do not constitute legal advice. Facilities should consult legal counsel for specific guidance and develop clinical guidance in consultation with their clinical staff.

About ECRI

ECRI is an independent, nonprofit organization improving the safety, quality, and cost-effectiveness of care across all healthcare settings. With a focus on patient safety, evidence-based medicine, and health technology decision solutions, ECRI is the trusted expert for healthcare leaders and agencies worldwide. The Institute for Safe Medication Practices (ISMP) is an ECRI affiliate. Visit ecri.org and follow @ECRI_Org.