



This interim guidance is intended to assist in determining the *assessment of risk, monitoring recommendations, and work restrictions* that are indicated for **SHA** healthcare workers (HCWs) with potential workplace exposures to COVID-19. Tables included outline the different exposure scenarios with associated risks whether the HCW is **FULLY IMMUNIZED** vs **PARTIALLY IMMUNIZED/UNIMMUNIZED**.

Mask = medical grade mask

For purposes of this risk classification, anything other than a medical grade mask is deemed as "no mask"

Principles on which this risk matrix is based:

- The **SHA** healthcare setting is considered a much more controlled environment compared to that of the community and SHA HCW are more aware of the types of interactions they are having with clients as part of the Point of Care Risk Assessment (PCRA) therefore, significantly decreasing the chances of transmission.
- **SHA** HCW's are trained and provided direction in Personal Protective Equipment (PPE) donning/doffing, hand hygiene, recommended safety guidelines, and other Infection Prevention and Control practices, and are therefore expected to do this correctly as compared to the members of the public. [PPE Guidelines for Staff in All Health Care Settings during COVID-19](#)
- Pre/Asymptomatic is defined as the absence of symptoms that increase the chance of transmission of infectious respiratory secretions: COUGH, SNEEZING, VOMITING. These cases that do not specifically have these symptoms have a much lower likelihood of transmitting the virus in an otherwise controlled setting.

Definitions:

SHA Healthcare Worker (HCW) is defined as:

- SHA Employees, Physicians, Medical Residents and contractors working within SHA owned and operated facilities and identified affiliates (per contracts). This includes HCW's supporting programs that may require them to be in various locations such as homecare and mobile services.

Fully immunized, if at the time of exposure:

- It has been 14 days or more after the 2nd dose (2 dose COVID-19 immunization series); **OR**
- 14 days or more after the 1st dose of a one dose COVID-19 immunization series

Partially immunized, if at the time of exposure:

- It has been 14 days or more after the 1st dose (2 dose COVID-19 immunization series); **OR**
- Less than 14 days after receiving the 2nd dose (2 dose COVID-19 immunization series)

Unimmunized, if at the time of exposure:

- It has been less than 14 days since receiving the 1st dose (any COVID-19 immunization); **OR**
- The HCW has not received any COVID-19 immunization

Close Contact/High risk exposure is defined as a HCW who:

- HCW **who is not fully immunized** and who provided direct physical care to a case, or a laboratory worker handling COVID-19 specimens, **without** consistent and appropriate use of recommended PPE and infection prevention and control practices.
- Anyone **who is not fully immunized** and lives with a case, has direct physical contact with a case or is exposed to their infectious body fluids, including the case's caregiver, intimate partner, child receiving care from the case, etc.
- Anyone **who is not fully immunized** and has shared an indoor space (e.g. same room) with a case for a prolonged period of time, including closed spaces and crowded places, (e.g. social gatherings, workplaces, etc.), **without** adhering to appropriate individual-level and setting specific risk mitigation measures.
- Anyone **who is not fully immunized** and has had a close-range conversation with a case or has been in settings where a case engaged in singing, shouting, or heavy breathing (e.g. exercise), **without** adhering to appropriate individual-level and setting-specific risk mitigation measures.

Non-Close Contact/Low risk exposure is defined as a HCW who:

- **Fully immunized individuals** in the above-mentioned high-risk exposure (close contact) situations would be considered to have a low risk exposure and be managed accordingly
- HCW (**regardless of vaccination status**) who provided direct physical care to a case, or a laboratory worker handling COVID-19 specimens, **with** consistent and appropriate use of recommended PPE and infection prevention and control practices.
- Anyone (**regardless of vaccination status**) who has shared an indoor space (e.g. same room) with a case, including closed spaces and crowded places (e.g. social gatherings, workplaces, etc.), **with** adherence to appropriate individual-level and setting-specific risk mitigation measures.
- Anyone (**regardless of vaccination status**) who has had a close-range conversation with a case or has been in a setting where a case engaged in singing, shouting, or heavy breathing (e.g. exercise), **with** adherence to appropriate individual-level and setting-specific risk mitigation measures.

Adequate distance: In general, 2m is considered adequate distance but activities with high respiratory effort require a minimum of 3m distance. When assessing if an adequate distance was maintained, consider the capacity of the room, the number of individuals in the space, and activities such as eating.



Recommendations Based on COVID-19 Exposure Risk

High Exposure Level:

HCWs in the *high-risk* category will undergo self-isolation and restrictions from work in any healthcare setting until 14 days after their last exposure. If they develop a **fever*** OR symptoms consistent with COVID-19 they should arrange for immediate testing. SHA PH, OHS/EH, or designate will then contact the HCW to provide an assessment and/or direction for to returning to work based on the results of the test.

Moderate Exposure Level: HCW in the *moderate* category are part of a high risk exposure but are fully vaccinated so are not deemed a close contact. HCWs in this category should follow all the same recommendations as a HCW in the *low-risk* category. However, Asymptomatic Fully Immunized HCWs in this category are required to seek testing immediately.

Low-risk Exposure Level:

HCW in the *low-risk* category should self-monitor and track movements and contacts (for potential contact tracing purposes) until 14 days after the last potential exposure. Some HCW's work in an environment where it is assumed they are always a non-close contact when at work (work with Covid-19 patients) and should perform continuous self-monitoring and tracking. Asymptomatic HCWs in this category are not restricted from work. These HCWs should check their temperature twice daily and remain alert for symptoms consistent with COVID-19. They should complete their fitness for work mandatory screening to ensure they are afebrile and asymptomatic before leaving home and reporting for work. If they develop fever* or symptoms consistent with COVID-19 they should self-isolate (separate themselves from others) and arrange for immediate testing. If the HCW is at work they should notify their supervisor for next steps before leaving work to isolate. SHA PH, OHS/EH, or designate will then contact the HCW to provide an assessment and/or direction for to returning to work based on the results of the test.

No-risk Exposure Level:

Proper adherence to currently recommended infection control practices, including all recommended PPE ([PPE for Staff in All Health Care Settings during COVID-19](#)) should protect HCW who have prolonged direct contact with patients infected with COVID-19. However, to account for any inconsistencies in use or adherence that could result in unrecognized exposures, HCW should still perform self-monitoring and fitness for work mandatory screening as described under the low-risk exposure category.

Privacy & Confidentiality - To ensure compliance with the Public Health Act and Health Information Protection Act (HIPA), it is the responsibility of the HCW to inform their supervisor that they will be absent from work and when they are able to return.

***Fever** is either measured temperature > 38.0°C or subjective fever. Note that fever may be intermittent or may not be present in those who are elderly, immune-suppressed, or taking certain medications (i.e.: NSAIDs). Clinical judgement should be used to guide testing of HCWs in such situations.

Adapted from Interim U.S. Guidance for Risk Assessment and Public Health Management of Healthcare Personnel with Potential Exposure in a Healthcare Setting to Patients with Coronavirus Disease 2019 (COVID-19); BC Centre for Disease Control of BC Healthcare Worker Exposure Risk Assessment Tool; Alberta Health Services Infection Prevention & Control Management of Patient and Healthcare Workers Following Exposures to Covid-19.

Self-Isolation Exemption:

Modified Self-Isolation (Partially Immunized/Unimmunized SHA HCWs): If the self-isolation period of a HCW or Physician impacts the ability for SHA to deliver service a Modified Self-Isolation Exemption may be requested by the Operational Leaders on an individual basis. The application package can be found on [MyConnection](#) or [Leader Resources](#). **Operations must exhaust all efforts before applying for a Modified Self-Isolation Exemption for a HCW or Physician.**

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NOTE: The risk level for exposures can be elevated if:

- Other infection control practices were not met (i.e.: hand hygiene, 4 moments)
- It is determined that there was a risk of elevated exposure
- Breach in PPE (N95 becomes unsealed, eye protection dislodged or inconsistent use of mask by case)
- Not wearing gloves and gown if there was extensive body contact with the client's body fluids.

STEP 1: Determine Exposure details

STEP 2: Determine type of PPE worn by HCW

STEP 3: Determine type of PPE worn by Case

STEP 4: Determine Contact Type & Risk Level

STEP 5: Implement recommended measures

FULLY IMMUNIZED HCWs (see definition on page 1)

STEP 1 HCW EXPOSURE DETAILS	STEP 2 PPE WORN BY HCW	STEP 3 PPE WORN BY CASE	STEP 4 CONTACT TYPE & RISK LEVEL	STEP 5 RECOMMENDATIONS
Transient interactions (e.g. walking by the case or being briefly in the same room)	N/A	N/A	Not a Contact	<ul style="list-style-type: none"> • NO exposure, no work restrictions • Continual self-monitoring for COVID-19 symptoms • Fitness for work mandatory screening • If symptoms develop stay home & seek testing
Provided direct physical care to a case	Mask worn; AND +/- eye protection	Mask worn	Non-close Contact (Low Risk)	<ul style="list-style-type: none"> • NO work restrictions • Continual self-monitoring for COVID-19 symptoms • Fitness for work mandatory screening • If symptoms develop stay home & seek testing
Had a close-range conversation with a case or has been in settings where a case engaged in singing, shouting or heavy breathing (i.e. exercise)				
Shared an indoor space (same room) with a case for a prolonged period of time (more than 15 minutes cumulative in 24 hours); AND <i>adequate distance*</i> was maintained				
Had a direct exposure of infectious body fluids (coughed, sneezed, vomited on) from the case, but it DID NOT ENTER eyes, nose or mouth				
Lab worker handling COVID-19 specimens		N/A		
Aerosol generating medical procedure (AGMP) (during procedure; OR settle time)	N95 worn; AND eye protection worn	+/- mask		
Provided direct physical care to a case	NO mask; AND +/- eye protection	NO mask	Non-close Contact (Moderate Risk)	<ul style="list-style-type: none"> • NO work restrictions • Continual self-monitoring for COVID-19 symptoms • Fitness for work mandatory screening • If Asymptomatic seek testing as soon as possible following exposure • If symptoms develop stay home & seek testing
Had a close-range conversation with a case or has been in settings where a case engaged in singing, shouting or heavy breathing (i.e. exercise)				
Shared an indoor space (same room) with a case for a prolonged period of time (more than 15 minutes cumulative in 24 hours); AND unable to maintain <i>adequate distance*</i>				
Had a direct exposure to the eyes, nose or mouth with infectious body fluids (coughed, sneezed, vomited on) from the case				
Lab worker handling COVID-19 lab specimens		N/A		
AGMP (during procedure; OR settle time)	NO N95 worn; OR N95 and no eye protection	+/- mask		

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STEP 1: Determine exposure details

STEP 2: Determine type of PPE worn by HCW

STEP 3: Determine type of PPE worn by Case

STEP 4: Determine Contact Type & Risk Level

STEP 5: Implement recommended measures

PARTIALLY IMMUNIZED/UNIMMUNIZED HCWs (see definition on page 1)

STEP 1 HCW EXPOSURE DETAILS	STEP 2 PPE WORN BY HCW	STEP 3 PPE WORN BY CASE	STEP 4 CONTACT TYPE & RISK LEVEL	STEP 5 RECOMMENDATIONS
Transient interactions (e.g. walking by the case or being briefly in the same room)	+/- mask; AND +/- eye protection	+/- mask	Not a Contact	<ul style="list-style-type: none"> • NO exposure, no work restrictions • Continual self-monitoring for COVID-19 symptoms • Fitness for work mandatory screening • If symptoms develop stay home & seek testing
Provided direct physical care to a case	Mask worn; AND +/- eye protection	Mask worn	Non-close Contact (Low Risk)	<ul style="list-style-type: none"> • NO work restrictions • Continual self-monitoring for COVID-19 symptoms • Fitness for work mandatory screening • If symptoms develop stay home & seek testing
Had a close-range conversation with a case or has been in settings where a case engaged in singing, shouting or heavy breathing (i.e. exercise)				
Shared an indoor space (same room) with a case for a prolonged period of time (more than 15 minutes cumulative in 24 hours); AND <i>adequate distance*</i> was maintained				
Had a direct exposure of infectious body fluids (coughed, sneezed, vomited on) from the case, but it DID NOT ENTER eyes, nose or mouth				
Lab worker handling COVID-19 specimens				
Shared an indoor space (same room) with a case for a prolonged period of time (more than 15 minutes cumulative in 24 hours); AND unable to maintain <i>adequate distance*</i>				
AGMP (during procedure; OR settle time)				
Provided direct physical care to a case	NO mask; AND +/- eye protection	NO mask	Close-Contact (High Risk)	<ul style="list-style-type: none"> • EXCLUDE from work • Self-isolate at home for 14 days after last day of exposure • Seek testing as soon as possible • Continual self-monitoring for COVID-19 symptoms • Get tested if symptoms develop
Had a close-range conversation with a case or has been in settings where a case engaged in singing, shouting or heavy breathing (i.e. exercise)				
Shared an indoor space (same room) with a case for a prolonged period of time (more than 15 minutes cumulative in 24 hours); AND unable to maintain <i>adequate distance*</i>				
Had a direct exposure to the eyes, nose or mouth with infectious body fluids (coughed, sneezed, vomited on) from the case				
Lab worker handling COVID-19 lab specimens				
AGMP (during procedure; OR settle time)				
	NO N95 worn; OR N95 and no eye protection	+/- mask		