



NATIONAL HEALTH
LABORATORY SERVICE



NATIONAL INSTITUTE FOR
OCCUPATIONAL HEALTH

Division of the National Health Laboratory Service



NATIONAL INSTITUTE FOR
COMMUNICABLE DISEASES

Division of the National Health Laboratory Service



Preparing the Workplace for Coronavirus

Screening procedures and follow up

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NIOH

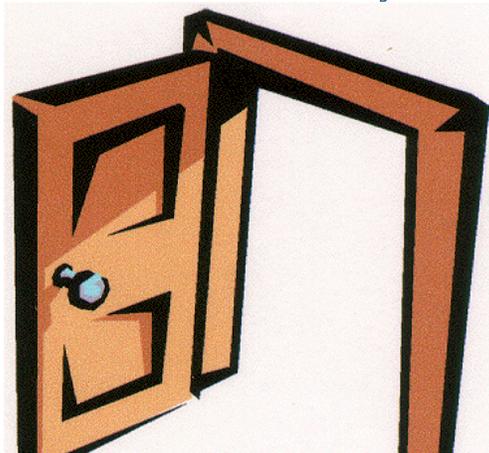
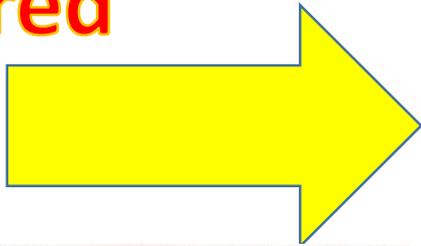
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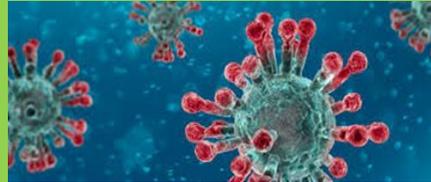
Potential sources of exposure in the workplace

Community
acquired

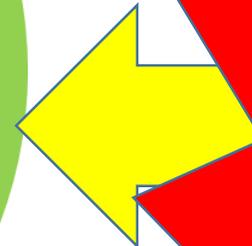


Workplace/
occupationally
acquired

workplace



Spread in
the
workplace
& the
community!



Workers at increased risk for workplace/occupationally acquired COVID-19

- Healthcare workers
- Emergency response and public safety workers
- Post mortem care
- Laboratory workers
- Airline operators
- Retail workers
- Border protection and transport security workers
- Correctional facility workers
- Solid waste and wastewater management workers
- Environmental health workers
- In home repair workers
- Travel to high risk places



What is medical screening?



- Medical screening is designed to detect early signs of work-related illness by administering tests to apparently healthy persons
 - Testing modalities may include such tools as questionnaires, physical examinations, and medical investigations
- Secondary prevention strategy, but may be primary prevention to keep infection out of the workplace
- Used as a mechanisms to determine whether the usual prevention activities in the hierarchy of occupational health controls are effective.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4576833/pdf/nihms721837.pdf>

GOVERNMENT NOTICES • GOEWERMENTSKENNISGEWINGS

DEPARTMENT OF LABOUR

NO. 479

29 APRIL 2020

DEPARTMENT OF EMPLOYMENT AND LABOUR

COVID-19 OCCUPATIONAL HEALTH AND SAFETY MEASURES IN WORKPLACES
COVID-19 (C19 OHS), 2020

DIRECTIVE BY THE MINISTER OF EMPLOYMENT AND LABOUR IN TERMS OF
REGULATION 10 (8) OF THE REGULATIONS ISSUED BY THE MINISTER OF
COOPERATIVE GOVERNANCE AND TRADITIONAL AFFAIRS IN TERMS OF
SECTION 27 (2) OF THE DISASTER MANAGEMENT ACT, 2002 (ACT NO. 57 OF 2002)

Symptom screening as outlined by directive from the DOEL

- 21. Every employer must take measures to 21.1 screen any worker, at the time that they report for work, to ascertain whether they have any of the observable symptoms associated with COVID-19,
 - namely fever, cough, sore throat, redness of eyes or shortness of breath (or difficulty in breathing);
- 21.2 require every worker to report whether they suffer from any of the following
 - additional symptoms: body aches, loss of smell or loss of taste, nausea, vomiting, diarrhoea, fatigue, weakness or tiredness; and
- 21.3 require workers to immediately inform the employer if they experience any of
- the symptoms in sub-clauses 21.1 and 21.2 while at work.

Medical monitoring strategies for COVID-19



- **Self-monitoring**

- Employees monitor themselves for fever by taking their temperature twice a day and symptoms of COVID-19 (e.g., cough, shortness of breath, sore throat, myalgia, malaise)
- They should be provided with a plan for whom to contact if they develop fever or respiratory symptoms

- **Active monitoring**

- Regular communication with potentially exposed employee to assess for the presence of fever or symptoms of COVID-19
- For employees with high exposure in the workplace
- Communication should occur at least once each day
- Can be delegated by occupational health or infection control program

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html>

Example of a screening tool



Surname			First Name			Date of Birth	
Contact Cell number			E-mail address			Category of Essential Worker (Select from addendum 1)	
Alternative contact number						Job Title	
Next of Kin or Alternative Contact (Please provide name, relationship and contact details)							
Work address & details:							
Home address:							
Days post exposure	1	2	3	4	5	6	7
Date: DD/MM							
Document morning + evening	AM / PM	AM / PM	AM / PM	AM / PM	AM / PM	AM / PM	AM / PM
Temperature (no meds)							
Respiratory rate							
Pulse rate							
Symptoms (Circle Y or N)	Daily	Daily	Daily	Dai			
Fever/Chills	Y / N	Y / N	Y / N	Y			
Cough	Y / N	Y / N	Y / N	Y			
Sore throat	Y / N	Y / N	Y / N	Y			
Shortness of breath	Y / N	Y / N	Y / N	Y			
Body aches	Y / N	Y / N	Y / N	Y			
Redness of the eyes	Y / N	Y / N	Y / N	Y			
Loss of smell OR loss of taste	Y / N	Y / N	Y / N	Y			
Nausea/vomiting/diarrhoea	Y / N	Y / N	Y / N	Y			
Fatigue/ weakness	Y / N	Y / N	Y / N	Y			
At Home or work?	H / W	H / W	H / W	H			
Clinical and Progress Notes and Exposure History:							



Covid19 Screening

Have you experienced any of the following symptoms over the last 14 days?

All fields other than "Body Temperature" are mandatory

Body Temperature

Do you have unexplained body pain/aches?

Yes No

Select

Do you have a fever?

Yes No

Do you have cough?

Yes No

Select

Do you have shortness of breath / chest discomfort?

Yes No

Provide detail (if you answered Yes to any of the above).

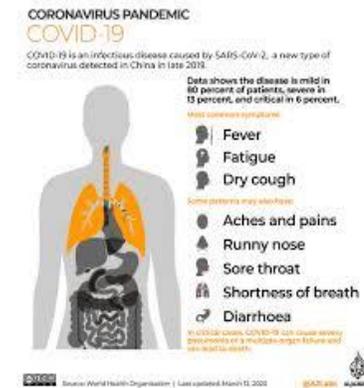
Types of screenin



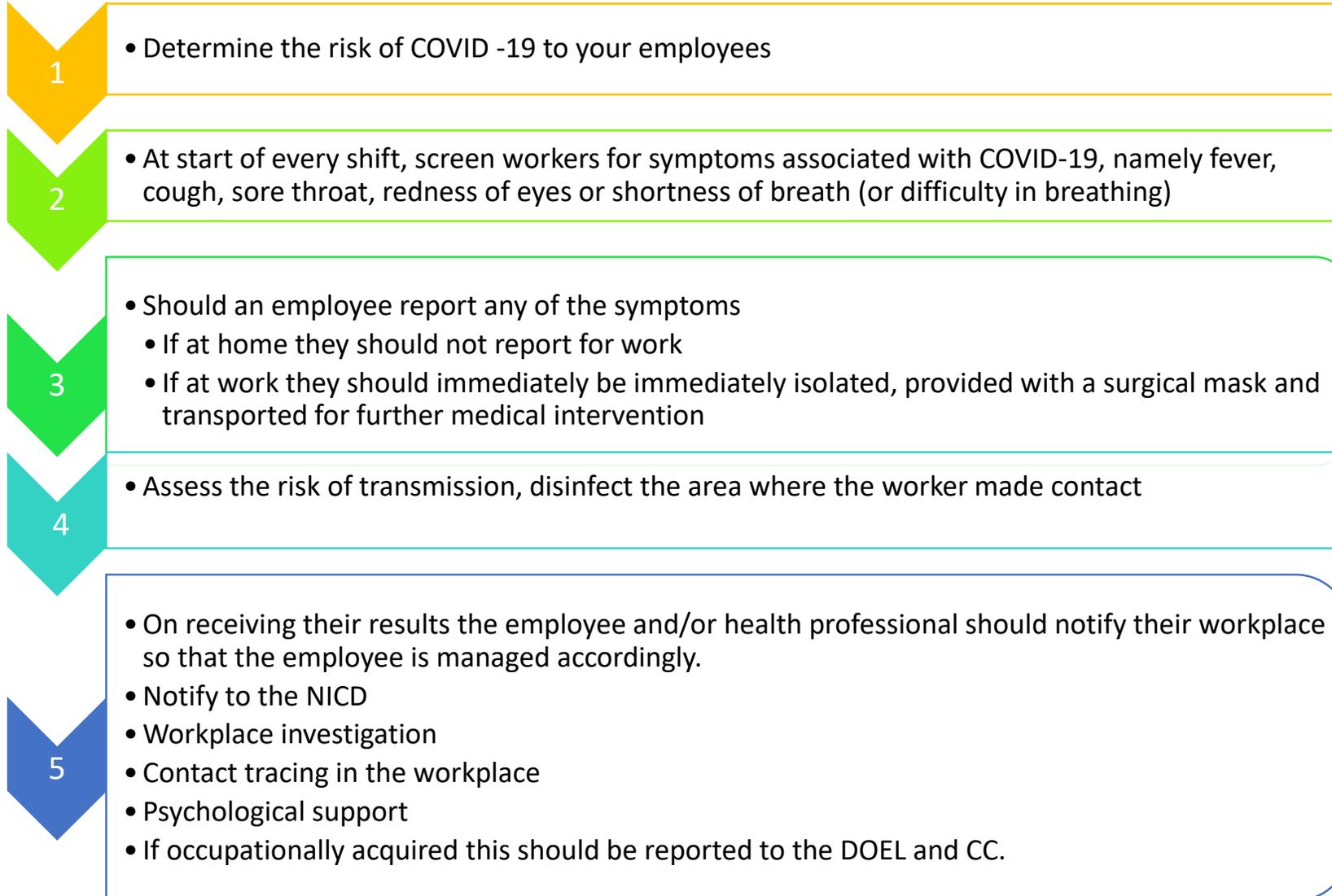
- **Symptom questionnaire**

- **Temperature screening**

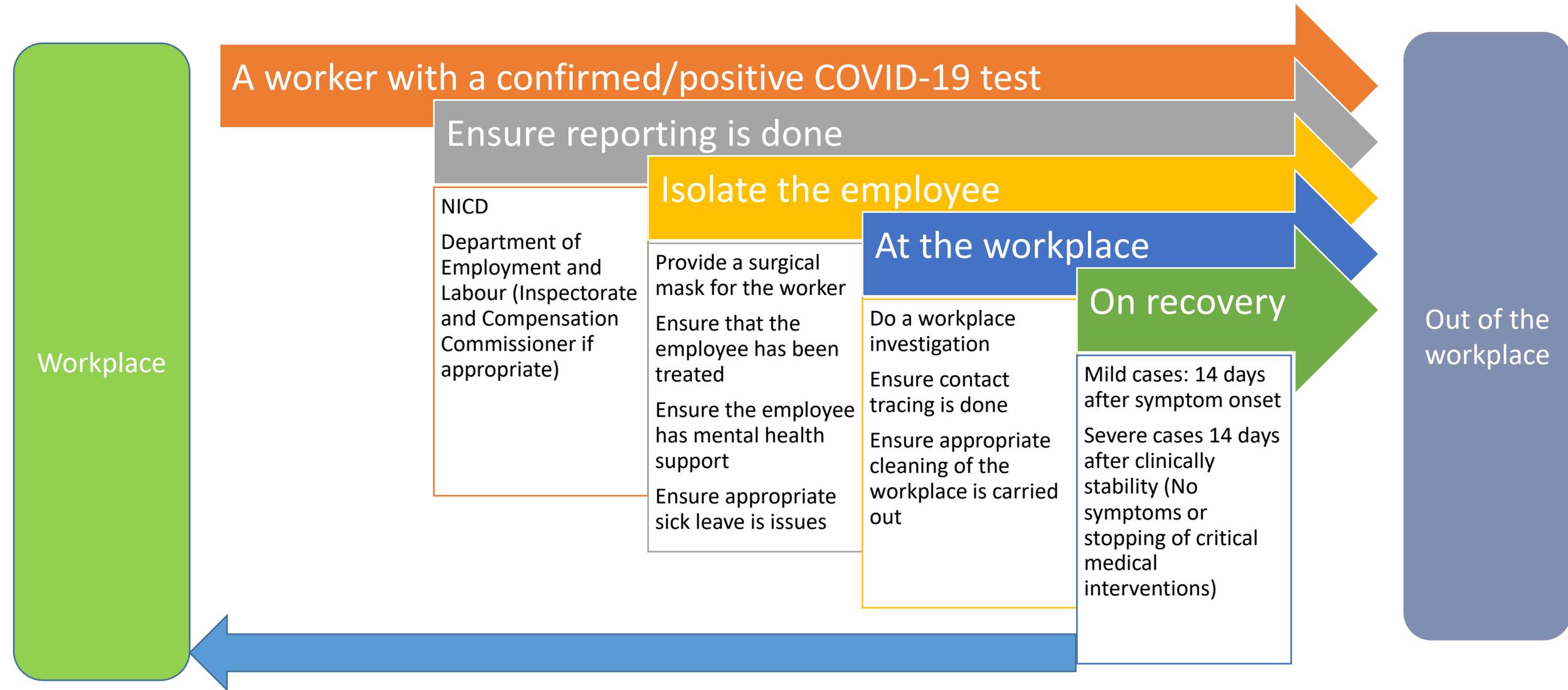
- Fever is either measured temperature $>38^{\circ}\text{C}$ or subjective fever
- Fever may be intermittent or may not be present in some patients, such as those who are elderly, immunosuppressed, or taking certain medications (e.g., NSAIDs)
- Clinical judgement should be used to guide testing of patients in such situations
- Medical evaluation may be recommended for lower temperatures ($< 38^{\circ}\text{C}$) or other symptoms (e.g., muscle aches, nausea, vomiting, diarrhoea, abdominal pain headache, runny nose, loss of taste and smell fatigue) based on assessment by OMP.



Recommended procedure

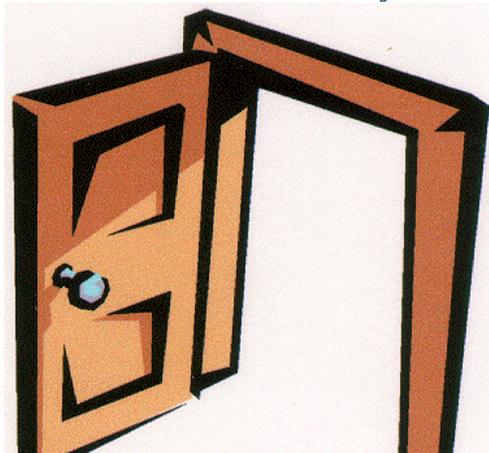
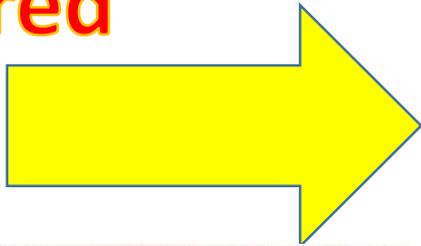


Necessary steps to follow in the workplace when a worker is diagnosed with COVID-19



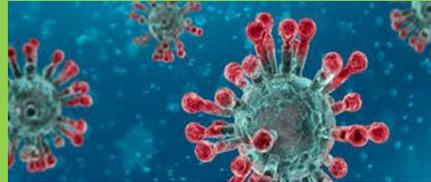
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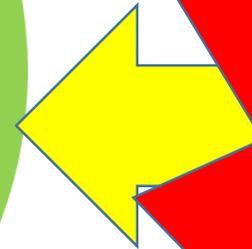


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Workplace management of workers with high risk exposure to COVID-19

- close contact
- within 1 metre
- for >15 minutes
- without PPE /
- failure of PPE /
- direct contact with respiratory secretions



Essential worker

- Workplace investigation done and exposure assessed as high risk
- Confirmed by the line manager
- Cleaning initiated
- Reporting
 - NICD
- Self quarantine for a minimum of 7 days with daily symptoms screening
Ideally for 14 days if no staff shortages
Ensure mental health support
- Return to work at the earliest on the 8th day after a negative PCR test and no symptoms especially if staff shortages and work restrictions

Non essential worker

- Workplace investigation done and exposure assessed as high risk
- Confirmed by the line manager
- Cleaning initiated
- Reporting
 - NICD
- Self quarantine for a minimum of 14 days
Ensure mental health support
- Return to work on day 15 if no symptoms occur

Refer for testing

Symptoms develop

- >1 metre away from a COVID-19 confirmed case
- for <15 minutes OR
- within 1 meter but
 - wearing PPE
- Also consider lower risk if COVID case was wearing a surgical mask (source control).

Worker exposed to low risk in the workplace

Workplace investigation done and exposure assessed as low risk

The risk is confirmed by the line manager

Continues to work but self monitors temperature and symptoms daily for 14 days

Symptomatic

Refer for testing

Return to work- exclude from work until:

- Test-based strategy.
 - Resolution of fever without the use of fever-reducing medications, and
 - Improvement in respiratory symptoms (e.g., cough, shortness of breath), and
 - Negative results of COVID-19 testing from at least two consecutive swab specimens collected ≥ 24 hours apart
- Non-test-based strategy.
 - At least 3 days (72 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications and improvement in respiratory symptoms (e.g., cough, shortness of breath); and,
 - At least 10 days have passed since symptoms first appeared

Return to work

- All employees on returning to work after isolation or quarantine period, should follow general work restrictions that include:
 - undergo medical evaluation to confirm that they are fit to work
 - wearing of surgical masks at all times while at work for a period of 21 days from the initial test
 - implement social distancing measures as appropriate
 - adherence to hand hygiene, respiratory hygiene, and cough etiquette
 - continued self-monitoring for symptoms
 - seek medical re-evaluation if respiratory symptoms recur or worse
 - in the case of health workers avoiding contact with severely immunocompromised patients

Workplace protocols that need to be in place

- In the event of a symptomatic person to be referred to testing and treatment-isolation, contact tracing
- In the event of a positive employee in the organization
- Return to work protocol of infected employee
- Restriction of infected employees in the workplace following return to work
- Social distancing
- Hygiene

Minimise risks of transmission in the workplace – MUST BE SAID AGAIN!



- Communication and awareness important
- Review the HRA and the hierarchy of controls
- No mass testing. Screen daily and test only symptomatic ones
- Minimise risks in the workplace.
 - Social distancing
 - Promote regular and thorough handwashing by employees, contractors and customers
 - Respiratory hygiene
 - Avoid touching your face, especially while working.
- Advise workers on self-assessment, symptom reporting and sick leave policies
- Screening and identification of potentially affected employees, limit contact and movement
- Encourage / insist that symptomatic persons stay away / self isolate
- Have occupational health input to manage the program internally

If you suspect you have been exposed to COVID-19

- ▶▶ Alert your supervisor and occupational health clinic immediately
- ▶▶ If you are experiencing symptoms, inform your health care provider about any contacts and recent travel to areas affected by COVID-19

Workplace queries:



info@nioh.ac.za

0800 212 175

For more information contact NICD: 080 002 9999

www.nicd.ac.za or www.nioh.ac.za