



Practical implementation- experiences in dealing with
COVID-19 positive employees in the workplace

Symptoms screening

- Self – Assessment (paper-based vs app)



Verification

- On entry by Security vs Line Manager



Clinical assessment

- By a Health professional +/- referral (virtual vs physical)



Symptoms monitoring: quarantine/ isolation and RTW

Positive employees
High risk/ close contacts

Scenario 1

At home

1. Contact tracing

- Identify all possible contacts based on last day at work + 3-5 days prior to the test
 - Interview affected employee, review surveillance camera, stratification strategies and work activities
- Assess the Risk and categorize contacts -close contact/ high risk vs indirect / low risk
- Self- quarantine of high risk/ close contact for 8 vs 14 days (EAP support and on-going symptoms monitoring)

2. Assess the needs for decontamination

3. Incident investigation

Scenario 2

On Entry

1. Clinical Assessment, referral for testing and self-quarantine- pending results
2. Positive results
 - Contact tracing and quarantine
 - Decontamination needs assessment
 - Incident investigation

Scenario 3 Multiple Cases

1. Challenge with contact tracing and estimating degree of exposure
2. Consider
 - Total closure of site
 - ? Mass testing
 - Public Health thread
 - Negative Results: Low risk can RTW
 - If high number of high risk, ? day 8 testing
3. Decontamination
4. Incident investigation