COVID-19: Guidance for Employees and Managers

This guidance is based on the best information currently available and will be updated when appropriate. Please visit dshs.texas.gov/coronavirus and cdc.gov/coronavirus for updates.

This guidance is intended for employees and managers of organizations in Texas. This guidance is based on recommendations from the Centers for Disease Control and Prevention (CDC) and may not always follow your employer’s HR policy. Seek additional guidance from your HR Department.

1. I have had potential exposure* to COVID-19. What should I do?
   - An employee with potential exposure to COVID-19 SHOULD NOT report to their worksite.
   - The employee should contact their supervisor to notify them of the potential exposure.
   - The employee should contact their local health department to undergo a risk assessment.
   - The employee should not return to work until the risk assessment is completed by the local health department and clearance is given.
   - Employees should notify their supervisor of their return-to-work date.

   *A potential exposure could be travel-related, contact to a known COVID-19 case, through a healthcare encounter, or through community interactions.

2. I am at a work event associated with work (such as a conference or workshop) and another employee appears ill. What should I do?
   - Attendees should notify organizers if they suspect another attendee at the event is ill.
   - Organizers should send the ill staff member home and encourage that person to be evaluated by their healthcare provider as appropriate.
   - CDC recommends that employers separate and immediately send home employees who appear to have acute respiratory illness symptoms (such as a cough or shortness of breath) when they arrive at work or become sick during the day.
• 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). Employees should then throw the tissue in the trash and wash their hands afterward.

3. **One of my direct reports has been ill and is ready to return to work. They have had cough and nasal symptoms, and I am concerned about COVID-19. What should I do?**

• For staff who do not have confirmed COVID-19 but have a respiratory illness, supervisors should consult with their HR department as appropriate and are recommended to follow the CDC non-test-based strategy to allow staff back to work. Per the CDC, individuals can leave home after these three things have happened:
  o The person has had no fever for at least 72 hours (that is three full days of no fever without the use medicine that reduces fevers) AND
  o other symptoms have improved (for example, when the person’s cough or shortness of breath have improved) AND
  o at least 7 days have passed since the person’s symptoms first appeared.

• Per the CDC, 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 may not be able to provide such documentation in a timely way.

• Employees with confirmed COVID-19 should return to work based upon guidance from their local health department and healthcare provider.

• Guidance about returning to work will differ for healthcare providers and they should follow return to work practices and work restrictions outlined by CDC and their employer.

4. **I have an employee who came to work sick, and I am concerned about COVID-19. What should I do?**

• For employees who arrive to work sick or become sick during the day, supervisors should follow HR policy and send staff home.
• CDC recommends that employers separate and immediately send home employees who appear to have acute respiratory illness symptoms (such as a cough or shortness of breath) when they arrive at work or become sick during the day.
• 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). Employees should then throw the tissue in the trash and wash their hands afterward.
• Supervisors should contact their leadership for additional guidance if they are concerned about COVID-19 in the workplace.
• Cleaning and disinfecting the workspace should follow the CDC Environmental Cleaning and Disinfection Recommendations Interim Recommendations for US Community Facilities with Suspected/Confirmed Coronavirus Disease 2019.

5. **Should managers be sharing information regarding co-workers with possible or confirmed cases of COVID-19 with staff? Should staff who worked with or around that person self-quarantine and get tested if they have symptoms?**

- Following HR policy, managers should notify staff of a potential exposure. A potential exposure would include contact with a person under investigation for COVID-19 or contact with a person with who is confirmed to have COVID-19.
- Per the CDC, if an employee is confirmed to have COVID-19, employers should inform fellow employees of their possible exposure to COVID-19 in the workplace but maintain confidentiality as required by the Americans with Disabilities Act (ADA).
- Employees exposed to a co-worker with confirmed COVID-19 should refer to CDC guidance for how to conduct a risk assessment of their potential exposure.
- See also Question 1 regarding employees with potential exposure to COVID-19.
- Cleaning and disinfecting the workspace should follow the CDC Environmental Cleaning and Disinfection Recommendations Interim Recommendations for US Community Facilities with Suspected/Confirmed Coronavirus Disease 2019.

6. **What about clients, children and families we work with who are confirmed or pending a test result for the virus? What are the protocols for caseworkers who have been exposed to these clients? Should they self-quarantine and possibly get tested if they start to get sick? What guidance should caseworkers be providing these families/clients related to self-quarantine?**

- DSHS recommends that agencies and businesses review the following guidance for public health workers and others who make home visits or provide other services to individuals in a home or community setting:

- See Question 1 regarding employees with potential exposure to COVID-19.
- Families and clients with a confirmed or pending test should receive guidance from their healthcare provider and local health department.

7. What about other professionals who work with our clients and families? If they test positive or have a pending test for COVID-19, do we share that information with caseworkers and families who may have been exposed to that professional and, if so, should they self-isolate and/or get tested if they get sick?

- Following HR policy, managers should notify staff and clients/families of a potential exposure. A potential exposure would include contact with a person under investigation for COVID-19 or contact with a person with who is confirmed to have COVID-19.
- Employees, such as caseworkers, with a potential exposure with confirmed COVID-19 should refer to CDC guidance for how to conduct a risk assessment of their potential exposure.
- See Question 1 regarding employees with potential exposure to COVID-19.
- Clients with potential exposure to COVID-19 should contact their local health department for guidance.

8. What about other co-workers in the office we learn have the virus or may be pending a test? Can we tell others in the work area, regardless of which agency, organization or department, to self-quarantine and possibly get tested if they get sick?

- Following HR policy, managers should notify staff of a potential exposure. A potential exposure would include contact with a person under investigation for COVID-19 or contact with a person with who is confirmed to have COVID-19.
- Per the CDC, if an employee is confirmed to have COVID-19, employers should inform fellow employees of their possible exposure to COVID-19 in the workplace but maintain confidentiality as required by the Americans with Disabilities Act (ADA).
- Employees exposed to a co-worker with confirmed COVID-19 should refer to CDC guidance for how to conduct a risk assessment of their potential exposure.
- See Question 1 regarding employees with potential exposure to COVID-19.
• Cleaning and disinfecting the workspace should follow the CDC Environmental Cleaning and Disinfection Recommendations Interim Recommendations for US Community Facilities with Suspected/Confirmed Coronavirus Disease 2019.

9. What about contractors? Can we share the information about a contractor who is a person under investigation or a confirmed COVID-19 case with other staff in the work unit area, so they can self-quarantine and get tested if they get sick?

• Following HR policy, managers should notify staff of a potential exposure. A potential exposure would include contact with a person under investigation for COVID 19 or contact with a person with who is confirmed to have COVID 19.
• Per the CDC, if an employee is confirmed to have COVID-19, employers should inform fellow employees of their possible exposure to COVID-19 in the workplace but maintain confidentiality as required by the Americans with Disabilities Act (ADA).
• Employees exposed to a co-worker with confirmed COVID-19 should refer to CDC guidance for how to conduct a risk assessment of their potential exposure.
• See Question 1 regarding employees with potential exposure to COVID-19.
• Cleaning and disinfecting the workspace should follow the CDC Environmental Cleaning and Disinfection Recommendations Interim Recommendations for US Community Facilities with Suspected/Confirmed Coronavirus Disease 2019.

Because the novel coronavirus (the virus that causes COVID-19) response is rapidly changing, this is interim guidance.

Reliable Information Sources
Find up-to-date novel coronavirus information at dshs.texas.gov/coronavirus, and on DSHS’s Facebook, Twitter and Instagram at @TexasDSHS. Also visit the CDC’s website at cdc.gov/coronavirus.

Resources:


