COVID-19 FAQs for UCSF Employees, Faculty & Students

Table of Contents

COVID Exposure and Risk
1. What do we consider low, medium, high risk coronavirus exposures at UCSF?
2. What should I do if I’ve had unprotected exposure to someone with confirmed COVID-19?
3. What types of workplace exposures have led to COVID-19 cases among employees at UCSF?

Triage & Testing
4. What types of issues can the COVID-19 Hotline help me with?
5. When is COVID-19 testing recommended for UCSF employees?
6. Why aren’t we testing all employees who are exposed to a COVID-19 confirmed patient or employee?
7. Why can’t I get tested at UCSF if I had contact with someone who was identified as a “close contact” to someone with confirmed COVID-19 (“contact of a contact”)?
8. Will COVID testing and care be billed to my insurance or covered by UCSF Occupational Health Services?
9. What should I expect after a negative COVID-19 test result?
10. What should I expect after a positive COVID-19 test result?

Obtaining Return to Work Clearance from Occupational Health Services
11. How does UCSF establish its return-to-work screening and clearance criteria, and why does it change so often?
12. If I tested negative, can I proceed with my scheduled patient care duties immediately?
13. What do I do as a manager/director if my employee has not been cleared for work and my unit is experiencing a critical staff shortage?

Health Care Workers Testing Positive and Contact Tracing
14. If I test positive for COVID, what should I do next to protect people around me?
15. What does “contact tracing” mean for me? What will happen next?
16. Will my manager/supervisor be told that I’m COVID-positive?
17. What criteria is used to define someone as a “significant” contact?
18. Will my identity be revealed to people I identify as being significant contacts?
19. Under what circumstances will the contacts get tested?
COVID Exposure and Risk:

1. **What do we consider low, medium, high risk coronavirus exposures at UCSF?**
   
   Risk of exposure is assessed by Occupational Health through a detailed interview. Close contacts are those that were **< 6 feet away for more than 15 minutes**. Interactions that were farther than 6 feet away or shorter duration are considered to have minimal risk for COVID-19 transmission. UCSF classifies exposure risks for close contacts as follows:

<table>
<thead>
<tr>
<th>PPE WORN BY PERSON WITH COVID-19</th>
<th>PPE WORN BY PERSON EXPOSED TO COVID-19</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unmasked</td>
<td>Face mask and NO eye protection</td>
</tr>
<tr>
<td>Face mask with or without eye protection</td>
<td>Face mask AND eye protection</td>
</tr>
<tr>
<td>Unmasked</td>
<td>High Risk Exposure</td>
</tr>
<tr>
<td>Face mask with or without eye protection</td>
<td>Medium Risk Exposure</td>
</tr>
<tr>
<td></td>
<td>Low Risk Exposure</td>
</tr>
</tbody>
</table>

   **What does this mean for me as an employee?**

<table>
<thead>
<tr>
<th>EXPOSURE TYPE:</th>
<th>ACTION FOR EMPLOYEE:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low Risk Exposure:</td>
<td>Get tested, continue to work with symptom monitoring twice a day, including temperature.</td>
</tr>
<tr>
<td>Medium Risk Exposure:</td>
<td>Return to work immediately if no symptoms. COVID Testing Day 4 and Day 9 after last exposure; continue home quarantine (except travel to/from work) &amp; symptom monitoring for 14-days</td>
</tr>
<tr>
<td>High Risk Exposure:</td>
<td>Return to work after 10 days from last day of exposure with a negative COVID test. COVID Testing between 7-9 days; continue home quarantine days 11-14 with symptom monitoring</td>
</tr>
<tr>
<td>Aerosol Generating Procedures or Events:</td>
<td>Get tested, quarantine at home for 14 days, and monitor symptoms twice a day, including temperature. It is similar to high risk exposures, but the contact duration may have been shorter than 15 minutes.</td>
</tr>
</tbody>
</table>

2. **What should I do if I’ve had unprotected exposure to someone with confirmed COVID-19?**

   We recommend that you call the COVID-19 Hotline (415-514-7328) to discuss the unprotected exposure; if the knowledge of the positive COVID test occurs during the night and you are scheduled to work the next day, you need to inform your supervisor that you are unable to come to work until you discuss your case with OHS staff. If you call the COVID-19 hotline after hours, follow the prompts to be directed to the on-call OHS clinician.
You will not pass the Daily Screener without first being interviewed and cleared by Occupational Health. If you meet the definition of exposure, and we determine that you had a low risk exposure, and are asymptomatic, you will be able to return to work, with symptom monitoring 2x/day, including taking your temperature. If you had a medium or high risk exposure at work, you will be required to home quarantine for 14-days, with symptom monitoring during your quarantine. We have recently instituted COVID testing during this quarantine period. In selected circumstances, if there is a critical staffing shortage, asymptomatic employees with a medium risk work exposure may be returned to work, after testing negative for COVID. For household exposures, these are considered high risk exposures; isolation from the household contact is required for at least 14 days before returning to work.

3. What types of workplace exposures have led to COVID-19 cases among employees at UCSF?

Most of our workplace exposures occur in the breakroom, where there is shared eating space, and employees are not wearing their face coverings. Most of our community exposures are from large family gatherings or community events, where there is food served, people are not consistently social distancing, and masks are not worn 100% of the time. Travel is showing up more recently as a risk factor, traveling to areas with higher COVID cases. Also, carpooling to and from work is environmentally a good recommendation, but remember to wear your mask at all times, and keep your car windows open. At work, we highly recommend staggering of breaks throughout the shift, so that break rooms are not crowded. Employees may want to eat smaller amounts more frequently to keep food intake periods to less than 15 minutes. If you want to socialize during your breaks, eat first, and then don your mask to socialize with others, again keeping 6 feet apart. In the community, continue to social distance and wear a face covering. Continue to use meticulous hand hygiene, and avoid touching your eyes, mouth and nose with your hands.

Triage & Testing:

4. What types of issues can the COVID-19 Hotline help me with?

The Patient & Employee COVID-19 Hotline serves as a centralized entry point for COVID-19 care and Occupational Health review, and stays up-to-date with the latest clinical guidelines for health care workers to minimize transmission of infections. The Hotline is staffed by Health Care Navigators, Triage & Advice Nurses, and schedulers who will screen you for symptoms and coronavirus exposures, schedule you for testing if clinically indicated, interview you for contact tracing if you are an employee who tests positive for coronavirus, and provide you with formal clearance once you have met criteria to safely return to work.

Below are a few common reasons for calling the COVID-19 hotline:

- You have new or worsening symptoms and would like to be evaluated for testing (please note: employees with symptoms need to stay home until cleared by the COVID-19 Hotline and Occupational Health)
● You recently traveled outside the U.S or had prolonged, unprotected contact with an individual with confirmed COVID-19 at home, in the community, or in the workplace
● You were denied entry to work after completing the daily digital health screener or entry screener
● You are a new GME resident, faculty member, or employee joining UCSF and have been instructed to get tested for COVID-19 before reporting to work

5. When is COVID-19 testing recommended for UCSF employees?

As of July 2020, UCSF Occupational Health recommends COVID-19 testing if:
● You are experiencing new, worsening or persistent symptoms of possible COVID-19
● You have a household member who had confirmed COVID-19 in the last 14 days
● You have been assessed by Occupational Health to have had a low, medium or high risk exposure in the workplace in the last 14 days (see definitions in #1)
● You are a new employee/trainee/student. Individuals eligible for testing are identified through Human Resources, Graduate Medical Education office (residents and fellows), Student Health Service (students) and Campus Life Services (campus housing, summer camp staff, child care staff). Individuals must complete testing during the period of 3 to 7 days prior to on-site activities, and those declining testing must complete a 14-day quarantine before on-site entry and activities.
  ○ If you are living in campus housing, you may also be asked to have a 2nd test 5-7 days after the first test.
● You are selected as part of random sample testing of asymptomatic, on-site employees/trainees. Across the three major UCSF campus sites (Parnassus Heights, Mission Bay and Mount Zion), UCSF has defined 9 Lots from which approximately 130 individuals (identified through real-time screening and badge reader data) will be selected randomly and requested to submit self-administered anterior nasal swab specimens for testing each month.

6. Why aren’t we testing all employees who are exposed to a COVID-19 confirmed patient or employee?

UCSF OHS follows recommendations for assessment and treatment of health care workers exposed to COVID-19 published and updated by the CDC and SF Department of Public Health. COVID-19 testing is recommended—when testing supplies are adequate—for all “Close Contacts” (defined below) to aid in contact tracing. However, a negative test does not eliminate the requirement for a “Close Contact” to quarantine for 14 days. If you are not a “Close Contact”, testing is NOT recommended routinely, but the exposed individual should monitor their symptoms twice daily for 14 days post-exposure, and get tested if symptoms develop. You may call the COVID-19 Hotline (415-514-7328) to discuss your case and explore testing options that are available to you.

“Close contact” at UCSF is defined by CDC as people having at least 15 minutes of unprotected, close contact (within 6 feet) with the COVID-19 confirmed person either 48 hours before the person
developed symptoms, or if there are no symptoms, 48 hours before the date of testing. “Close contact” criteria can also be met if an aerosol-generating procedure was performed--of any duration of time--without proper PPE.

7. Why can’t I get tested at UCSF if I had contact with someone who was identified as a “close contact” to someone with confirmed COVID-19 (“contact of a contact”)?

A “contact of a contact” is someone who was exposed to someone else who had their own close (<6 feet), prolonged (>15 minutes), unprotected exposure to someone with confirmed COVID-19. If you have been around someone who was identified as a close contact to a person with COVID-19, closely monitor yourself for any symptoms of COVID-19. You do not need to self-quarantine unless you develop symptoms or if the person identified as a close contact develops COVID-19.

At UCSF, COVID-19 testing is not clinically indicated for a “contact of a contact” for multiple reasons. Most importantly, the timing of any testing is important; if done too early, it will not accurately reflect the potential exposure of concern, and if negative, could provide false reassurance. Testing is currently in high demand, and resources need to be prioritized between both our patient and employee populations.

While UCSF is unable to offer universal COVID-19 testing, you may explore other community testing resources such as those listed here [https://coronavirus.ucsf.edu/testing].

8. Will COVID testing and care be billed to my insurance or covered by UCSF Occupational Health Services?

UCSF will provide access to COVID testing through Occupational Health Services. Testing is covered by UCSF if it is ordered by the Occupational Health Service or the COVID Hotline. If the test is ordered by a colleague or as part of a medical visit, your insurance will be billed. If medical care is needed, employees should ensure that they are seeking care that is covered through their insurance, as any visit with a provider (including in-person or video visits with the UCSF Respiratory Screening Center (RSC) will be billed to an employee’s insurance.

9. What should I expect after a negative COVID-19 test result?

If you got tested at one of UCSF’s COVID-19 testing locations and have activated your MyChart account, you will receive your result automatically within 48-72 hours. In addition, you will receive an email from Occupational Health with a few questions about your symptoms and any new exposures. If you meet criteria for returning to work, you will receive an email with a clearance letter so that you can resume your regular duties at work. Please note that if you have residual symptoms and you work with any high risk patient populations, you may be asked to continue quarantine and symptom monitoring until criteria for returning to work are met.
10. **What should I expect after a positive COVID-19 test result?**

Testing positive for COVID-19 with symptoms or after an exposure means that you have coronavirus and you may spread the virus to other individuals.

Home: To reduce the risk of spreading the virus, limit your movements through self-isolation. This includes stay home except to get medical care, separate yourself from the other people in your home, make sure your health care providers know you are positive, wear a face mask around people, and have people in your home wear a mask, clean your hands often and avoid sharing personal household items, cover your coughs and sneezes and clean all “high-touch” surfaces every day.

Work: You will be called by a UCSF OHS nurse who will tell you your test results, and how to keep yourself and others safe. You will be off work for 10 or 20 days depending on your illness severity and medical conditions. Return to work clearance may be granted once you’ve been fever-free for at least 24 hours without the use of fever-reducing medications, there is improvement in your symptoms (like cough or shortness of breath), and it has been at least 10 days since your symptoms started. Additional COVID-19 testing is not required for you to come back to work. Antibodies develop between 1 and 3 weeks after symptoms begin, and this blood test is done in some cases, but there is no evidence that the presence of antibodies confers immunity to reinfection.

Your contacts: All the people at work with whom you have been in close contact from 2 days before you developed symptoms until your test was positive will be contacted. They will be tested if they have had an exposure, or if they report symptoms of COVID-19.

### Obtaining Return to Work Clearance from Occupational Health Services

11. **How does UCSF establish its return-to-work screening and clearance criteria, and why does it change so often?**

We monitor CDC guidelines and SFDPH requirements for health care workers closely and adapt our policies as new evidence emerges. Our COVID-19 testing and return to work guidance also takes into account factors like availability of testing supplies, critical staff shortages, and prevalence of COVID-19 in the community.

12. **If I tested negative, can I proceed with my scheduled patient care duties immediately?**

You must receive a Clearance Letter from OHS before returning to any patient care duties. If you have any residual symptoms or work with any high risk patient populations, you may be asked to continue quarantine and symptom monitoring until criteria for returning to work are met in order to reduce the risk of transmission of any other illnesses. If you need immediate return-to-work clearance after hours,
you may call the COVID-19 Hotline (415-514-7328) and follow the prompts to speak with an on-call provider.

13. **What do I do as a manager/director if my employee has not been cleared for work and my unit is experiencing a critical staff shortage?**

If you have a critical staffing shortage and the absence of employees will negatively impact patient care, escalate your concern to your senior leadership team (director or above) for approval.

If it is determined that safe patient care cannot be delivered with your staffing levels, then notify the OHS team which employee(s) need to return to work. OHS will re-interview the employee to ensure that they are without symptoms, and re-issue clearance. Only those with medium risk exposures may be recalled under a critical staffing shortage. Twice per day symptom monitoring is required.

**Health Care Workers Testing Positive and Contact Tracing**

14. **If I test positive for COVID, what should I do next to protect people around me?**

Testing positive for COVID (SARS CoV-2) with symptoms or after an exposure means that you have coronavirus and you may spread the virus to other individuals. You need to reduce the risk of spreading the virus by limiting your movements through self-isolation. There are a series of actions you will need to take for the 10-20 days that are detailed at this [CDC website](https://www.cdc.gov), and include:

- Stay home except to get medical care
- Separate yourself from the other people in your home (home isolation)
- Call ahead before visiting your health care providers
- Wear a face mask around people. If you are caring for people in your home, place a mask on them
- Cover your coughs and sneezes; clean your hands often; avoid sharing personal household items
- Clean all “high-touch” surfaces everyday

15. **What does “contact tracing” mean for me? What will happen next?**

Contact tracing means that we identify people who may have been in contact with you or other people with positive tests. The purpose of contact tracing is for early identification of other people who may have COVID infections so that they can be alerted and tested, and to prevent further spread of infection. Occupational Health Services will contact all employees with a positive COVID test.

During your phone call with the OHS nurse, you will be asked to list your work contacts from 48 hours before your symptoms started, your work dates since that time, and your use of personal protective equipment at work. Travel and household contacts will also be assessed. As is typically done in
infectious diseases contact tracing, your name as the index case will be shared with each contact during a phone interview conducted by the OHS nurse, to determine if they were exposed to you. Please know that the OHS nurses take the confidentiality of your status very seriously and your information will only be shared when absolutely necessary to prevent the spread of COVID to others.

16. Will my manager/supervisor be told that I’m COVID-positive?

Your manager/supervisor may be informed of your COVID status in order to help identify possible contacts. Your manager/supervisor will need to know if you are not able to work, if you cannot work with immunocompromised patients, if your manager was exposed, and/or when you are cleared to return to work. Contact tracing is a cornerstone for public health in order to break the transmission of infection. COVID is a reportable illness to public health, so there will be a need to review your activities and contacts in order to alert contacts of the possibility of infection. Occupational Health Services will interview you in detail. At that point, a determination will be made about who else needs to be notified.

We hold confidentiality about medical conditions as a fundamental principle in Occupational Health. We are committed to protecting your health information and no one will know the specifics of your medical conditions. In an epidemic, we balance the privacy protections of the Health Insurance Portability and Accountability Act (HIPAA), and safety in the worksite rules from the Occupational Safety and Health Act (OSHA Act). In pandemics like with coronavirus, there may be a safety obligation to tell people in the workplace, including the unit leader, that a colleague has tested positive for the virus.

When our employees test positive for COVID-19, the result is reported to the San Francisco Department of Public Health. In addition, a memo from UC Health states that “The following guidance applies to UC health care personnel (HCP) (all paid/unpaid personnel at UC medical centers, clinics, student health and counseling centers) who have the potential for exposure to patients or infectious materials. To better protect employees and patients, HCP who test positive for COVID-19 at an outside facility are required to immediately self-report the positive test result to the Occupational Health program. This information must be kept separate from employees’ personnel files. The information may be used exclusively to perform contact tracing or other activities as directed by Occupational Health or Infection Prevention teams to address employee and patient safety and to perform other permissible health care operations.” Discretion is important to us, and only those who need to know for safety purposes will be informed.

17. What criteria is used to define someone as a “significant” contact?

A contact is defined as exposure to an employee or patient who tests positive for COVID for more than 15 minutes and within less than 6 feet. The OHS nurse will contact you to find out about the circumstances of your exposure, use of PPE and advise if you need follow-up monitoring and/or testing.

18. Will my identity be revealed to people I identify as being significant contacts?

Source: UCSF Occupational Health Services

12/14/2020
Yes, according to the Cal/OSHA Aerosolized Transmissible Disease Standard, all contacts must be notified of a potential exposure. The name of the employee who has tested positive is handled confidentially, and is not communicated in a group email, nor in any written communication.

19. **Under what circumstances will the contacts get tested?**
Not all contact with someone who had a positive test is considered an exposure, and the current policy is to test contacts with low, medium or high risk exposures, and anyone with COVID symptoms.