

# **Interim Guidance for State Agencies Responding to COVID-19**

SARS-CoV-2 is a novel coronavirus that has emerged and caused Coronavirus Disease (COVID-19). Public health experts continue to learn about SARS-CoV-2, but based on current data and similar coronaviruses, spread from person-to-person happens most frequently among close contacts (those within about six feet for a time period of 10 minutes) via respiratory droplets.

# 1. What are the symptoms of COVID-19?

a. Fever, new or worsening cough, or shortness of breath.

## 2. How does COVID-19 spread?

- a. COVID-19 is spread by:
  - i. <u>Close contact</u>: defined as (a) being within approximately 6 feet (2 meters) of a COVID-19 case for a prolonged period of time (more than; close contact can occur while caring for, living with, visiting, or sharing a healthcare waiting area or room with a COVID-19 case, or (b) having direct contact with infectious secretions of a COVID-19 case (e.g., being coughed on).
  - ii. Touching a surface or object with the virus and then touching mouth, nose or eyes.

# 2. Does wearing a mask prevent someone from being exposed to COVID-19?

- a. No. The IDPH has not found a mask to prevent exposure to COVID-19; they should not be used as a preventative measure.
- b. Masks should be saved for <u>patients</u> with COVID-19 and <u>medical staff</u> and used as directed by the manufacturer and medical professionals.

# 3. What should employees do after they receive a diagnosis?

a. If the employee is diagnosed with COVID-19 or potential COVID-19, initially, the employee will continue on approved time off with pay. The employee should alert their supervisor. If the employee has tested positive for COVID-19, the employee should remain under home isolation precautions from seven days after symptoms started and until 72 hours after fever is gone and symptoms have improved, whichever is longer, in accordance with direction from local public health.

# 4. As a supervisor, after learning of my employee's potential COVID-19 symptoms or diagnosis, what should I do?

- a. Remain calm.
- b. Supervisors should work with the agency-designated COVID-19 Point Person to complete the COVID-19 Exposure Incident Report, gathering sufficient information for DPH review and response. The Incident Report should be emailed to the COVID-19 Exposure Response Statewide Team at CMS.COVID-19.IncidentReports@illinois.gov.
- c. Supervisors may always exercise discretion and caution for instance, working to ensure distance between employees, moving workstations if an employee recently has been sick,

sending home employees who feel sick, and promoting compliance with public health guidance.

# 5. As a supervisor, if I learn of a case or potential case of COVID-19, who should I tell? What about employees' private medical information?

- a. When dealing with employee medical information, employers, including supervisors, have a general duty of confidentiality. As such, supervisors should not discuss an employee's medical information with anyone other than the supervisor's chain-of-command, the COVID-19 Point Person, HR, or Labor Relations. An employee's medical information should be kept in the utmost confidence and only discussed as needed for legitimate business reasons.
- b. Completion and submission of the COVID-19 Exposure Incident Report will ensure that the necessary information is transmitted to the COVID-19 Exposure Response Statewide Team, comprised of agency personnel, CMS Labor Relations, CMS Bureau of Property Management, and appropriate DPH staff for prompt assessment and direction.

# 6. If an agency learns one of its employees has tested positive for COVID-19, what should it do?

- a. Completion of the COVID-19 Exposure Incident Report will ensure that the necessary information is transmitted to the COVID-19 Exposure Response Statewide Team, comprised of agency personnel, CMS Labor Relations, CMS Bureau of Property Management, and appropriate DPH staff for prompt assessment and direction.
- b. Incident Reports should immediately be sent to <a href="mailto:CMS.COVID-19IncidentReports@Illinois.gov">CMS.COVID-19IncidentReports@Illinois.gov</a> for assessment and direction from the COVID-19 Exposure Response Statewide Team.
- c. After assessment and direction is received from the COVID-19 Response Statewide Team, the agency will be responsible for implementing the direction given, which may include providing specific communication to other individuals in the workplace.

## 7. If an employee fears they have been exposed to COVID-19, what should they do?

- a. If an employee learns that someone with whom they did not have direct contact (within 6 feet for more than 10 minutes) was in the same location as them (but not within 6 feet for more than 10 minutes) and has a confirmed case of COVID-19, the employee should self-monitor for signs and symptoms of COVID-like illness for a period of 14 days after the exposure. Unless and until COVID-19-like symptoms develop, the employee need not self-isolate and may continue to come to work.
  - If COVID-19-like symptoms develop, they should notify their supervisor of their condition, notify their healthcare provider and seek guidance from their local public health department.
  - ii. Like all other Illinoisans complying with Gov. Pritzker's Executive Order, State employees should stay at home as much as possible. When they *must* leave home, they should maintain social distancing (staying 6 feet or more from other individuals) as much as possible.
  - iii. In the event worsening signs/symptoms of COVID-19-like illness (e.g. difficulty breathing, persistent pain or pressure in the chest), the employee should immediately contact their physician to arrange to be safely seen for evaluation.
- b. If employees learn that they have had <u>close contact</u> (closer than 6 feet for more than 10 minutes) with a confirmed case of COVID-19, the employee should notify their employer, and

follow the direction the agency receives from the appropriate COVID-19 Exposure Response Statewide Team.

- 8. After notification of potential exposure to a positive or presumptively positive case of COVID-19, should an employee call ahead to the doctor before going in?
  - a. Yes, you should call your doctor before going into his/her office.
  - b. If you have mild symptoms and are pregnant or immunosuppressed or are an older adult with chronic health conditions, you should consult with your physician.
  - c. If you become unwell with mild symptoms, you should isolate yourself at home and remain home for 7 days from onset of symptoms, leaving isolation only if you have been fever-free and feeling well for 72 hours. If you have fever, cough, trouble breathing or other flu-like symptoms that are not better or are worsening after 24 to 48 hours, consult your primary healthcare provider. The symptoms of COVID-19 are cough, fever, sore throat, and shortness of breath.
  - d. If you go to the doctor, call ahead to tell them about your symptoms and that you were potentially exposed to a presumptively positive case of COVID-19.
- 9. What is social distancing?
  - a. Social distancing means remaining out of community settings, avoiding public transportation (such as buses, subways, taxis, ride sharing, trains), and maintaining at least 6 feet in distance from others. Public health guidance and Gov. Pritzker's Executive Order require that people who can stay home do stay home as much as possible.
- 10. What is the contact information for the Illinois Department of Public Health?
  - a. Call the IDPH Hotline at 1-800-889-3931 or email dph.sick@illinois.gov.
- 11. Where can an employee or supervisor access more information about COVID-19?
  - a. IDPH's COVID-19 FAQ.
  - b. CDC Interim Guidance for Risk Assessment of COVID-19.
  - c. Monitor for illness using the HCW Employee Monitoring Tool.
  - d. Evaluate for COVID-19 against the COVID-19 Testing Decision Matrix.

# Exhibit 1 – Risk Categories

Note – these are interim and subject to change.

Table 1: Risk Categories for Exposure to Laboratory-Confirmed Cases of COVID-19

Risk Level	Geographic (Travel-associated) Exposures	Exposures identified through Contact Investigation
High	Travel from Hubei Province, China	Living in same household as, being an intimate partner of, or providing care in a nonhealthcare setting (such as a home) for a person with symptomatic laboratory-confirmed COVID-19 infection without using recommended precautions for home care and home isolation
Medium	Travel from mainland China outside Hubei Province or Iran	Close contact with a person with symptomatic laboratory-confirmed COVID-19
	Travel from a country with widespread sustained transmission  Travel from a country with sustained community transmission  Country-level risk classifications	On an aircraft, being seated within 6 feet of a traveler with symptomatic laboratory-confirmed COVID-19 infection (distance equals approximately 2 seats in each direction)
	Country level risk classifications	Living in same household as, an intimate partner of, or caring for a person in a nonhealthcare setting (such as a homme) to a person with symptomatic laboratory-confirmed COVId-19 infection while consistently using recommended precautions for home care and home isolation
Low	Travel from any other country	Being the same indoor environment (e.g., a classroom, a hospital waiting room) as a person with symptomatic laboratory-confirmed COVID-19 for a prolonged period of time but not meeting the definition of close contact
No identifiable risk	Not applicable	Interactions with a person with symptomatic laboratory-confirmed COVID-19 infection that do not met any of the high-, medium-, low-risk conditions above, such as walking by the person or being briefly in the same room

Table 2: Summary of Contacts of Asymptomatic Exposed to COVID-19

Risk Level	Geographic (Travel-associated)	Exposures identified through Contact
1 Cala	Exposures	Investigation
High	<ul> <li>Quarantine (voluntary or under public health orders) in a location determined by public health</li> <li>No public activities</li> <li>Daily active monitoring</li> <li>Controlled travel</li> </ul>	<ul> <li>Immediate quarantine (or isolate if symptomatic)</li> <li>Assessment to determine need for medical evaluation</li> <li>Controlled travel</li> </ul>
Medium	Close contacts: Recommendation to remain at home or in a comparable setting Practice social distancing Active monitoring Postpone long-distance travel on commercial conveyances Travels from Countries with widespread transmission: Recommendation to remain at home or in a comparable setting Practice social distancing Active monitoring Postpone long-distance travel on commercial conveyances Travel from Countries with community transmission Practice social distancing Self-observation	Self-quarantine (unless symptomatic then self-isolate) Seek health advice to determine if medical evaluation is necessary (which should be guided by clinical presentation and diagnostic testing by PUI definition) Controlled travel while symptomatic person wearing face mask
Low	No restriction on movement	Self-quarantine, social distancing
	Self-observation	Seek health advice to determine if medical evaluation is necessary (which should be guided by clinical presentation and diagnostic testing by PUI definition)     Post-pone commercial conveyances until no longer symptomatic
No identifiable risk	None	<ul> <li>Self-quarantine, social distancing</li> <li>Seek health advice to determine if medical evaluation is necessary (which should be guided by clinical presentation and diagnostic testing by PUI definition)</li> <li>Post-pone commercial conveyances until no longer symptomatic</li> </ul>

**Note:** The public health management recommendations made above are primarily intended for jurisdictions not experiencing sustained community transmission. In jurisdictions not experiencing sustained community transmission, CDC recommends that post-exposure public health management for asymptomatic exposed individuals continue until 14 days after the last potential exposure; however, these decisions should be made based on the local situation, available resources, and competing priorities. These factors should also guide decisions about managing symptomatic exposed individuals.

# Exhibit 2: Releasing Cases and Contacts

# RELEASING COVID-19 CASES AND CONTACTS FROM ISOLATION AND QUARANTINE



Interim guidance as of March 24, 2020. Subject to change.

# CASES (confirmed and possible)

Must be isolated for a minimum of 7 days after symptom onset and can be released after afebrile and feeling well (without fever-reducing medication) for at least 72 hours.

Minimum 7 days Onset date Case released from isolation (or specimen collection date if + Afebrile and onset unclear) feeling well for at least 72 hours

Note: Lingering cough should not prevent a case from being released from isolation.

- Examples:

   A case that is well on day 3 and afebrile and feeling well for 72 hours must remain isolated until day 7.
- · A case that is still symptomatic on day 7, and symptoms last until day 12, cannot be released until day 15.

### HOUSEHOLD/RESIDENTIAL CONTACTS\*

Must be quarantined for 7 days after the case has been afebrile and feeling well (because exposure is considered ongoing within the home) and for a minimum of 14 days.

If a household contact develops symptoms, follow directions for

Case's onset date Minimum 14 days (or specimen Case is afebrile Household collection date if onset unclear) and feeling well contact is released from quarantine

This means that household contacts may need to remain at home longer than the initial case.

- A case is well 3 days after onset. The household contact must remain quarantined until day 14.
   A case is well 7 days after onset. The household contact can be released on day 14.
- · A case is well 14 days after onset. The household contact can be released on day 21.

### NON-HOUSEHOLD CLOSE CONTACTS\*

Must be quarantined for 14 days from the date of last contact with the case.



\*HCWs should discuss returning to work with their employer. See also HCW monitoring guidance: https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html

# Who should I call about COVID-19?

# I want to know more about COVID-19, who should I call?

For general questions about COVID\_19, you can call the IDPH COVID-19 Hotline at 1-800-889-3931 or email DPH SICK@ inois.gov. Please note that the Hotline does not make decisions about who should be tested for COVID-19



- I am not feeling well and have respiratory symptoms, what should I do?

  Pliase stay home for at least 7 days after you first became ill, or 72 hours after your fever has resolved and symptoms are improving, whichever is longer

  You should consult with your health care provider if you have:

  Fever, cough, trouble breathing, or other flu-like symptoms that are not better or are worsening after 24 4 8 hours.

- Mild symptoms and are pregnant or immunosuppressed or are an older adult with chronic

- Please don't call the health department about getting testing

  Your health care provider will determine if you should be tested, and will call the health
- department if needed

  Health departments do not collect specimens for COVID-19



### I think I need immediate medical attention, who should I call?

- If you need immediate medical attention, who should I call?
   If you need immediate medical attention, and you think you may have COVID-19, please call ahead to your health care provider before going in for care. This will allow them to take the right steps to protect themselves and other patients
   If you think you are having a medical emergency, call 911; If you have been exposed to COVID-19, notify dispatch personnel so emergency medical services personnel can take steps to protect themselves.

