DATE: January 5, 2022

TO: Top Management

FROM: Mark Washington, City Manager

SUBJECT: City Manager Administrative Order 2021–04 (UPDATED): Policy and Guidance Regarding Worksite Reporting and Return-to-Work Procedures

While vaccinations become more widely available to our employees and to the public, we understand that COVID-19 remains a significant public health concern. As new variants become more widespread and activity increases with warmer weather, it is imperative that we stay vigilant in suppressing the potential spread of the virus.

Workplace protocols originally implemented in April of 2020 remain largely in place, with some slight modifications based on updated guidance from federal, state and county health authorities.

Worksite Reporting and Return-to-Work Procedures

1. Any employee shall not be permitted to report to their workplace under the following conditions:

   a. Receives a COVID-19 diagnosis from a physician
   b. Receives a presumptive positive test for the COVID-19 virus
   c. Receives a laboratory-confirmed COVID-19 diagnosis
   d. Displays symptoms consistent with the COVID-19 virus, to include
      i. Fever of 100.4 F or higher
      ii. Difficulty breathing or shortness of breath
      iii. Persistent dry cough
      iv. Any one of the above symptoms, combined with
         1. Body aches
         2. Sore throat
         3. Runny nose
         4. Fatigue
         5. Headache
6. Loss of taste and smell

2. Any employee, regardless of vaccination status, with a positive or presumptive diagnosis of COVID-19 shall not return to the workplace until they have isolated for five (5) days following a positive test or onset of symptoms. If asymptomatic after five (5) days, the employee may leave isolation and return to work. The employee must continue to wear a mask around others for five (5) additional days and remain compliant with the City’s Administrative Order for Masking in the Workplace.
   a. An employee who stays home with symptoms, but does not receive a test or medical diagnosis should also follow these guidelines.

3. An employee who stays home with symptoms, but receives a diagnosis other than COVID-19 should observe current return-to-work practices based on that diagnosis.
   a. This is typically 24 hours after the employee exhibits no fever without taking fever-reducing medications for those with cold or flu-like symptoms.
   b. The same rule shall apply for an employee sharing a home with someone who displays symptoms, but receives a diagnosis other than COVID-19.

4. If an employee is exposed to or in close contact with someone known to have COVID-19, the quarantine guidelines are determined by vaccination status:
   a. If the employee has received a supplemental booster shot OR has completed the primary series of Pfizer or Moderna vaccine within the last six (6) months OR has completed the primary series of J&J vaccine within the last two (2) months:
      1. The employee does not need to quarantine. They should wear a mask around others for ten (10) days and test on day five (5) if possible.
      2. If the employee develops symptoms at any time they should get a test and stay home and adhere to guidance in Section 2 of this Order.
   b. If the employee has completed the primary series of Pfizer or Moderna vaccine more than six (6) months ago and has not received a supplemental booster shot OR has completed the primary series of J&J over 2 months ago and has not received a supplemental booster shot OR is unvaccinated:
      1. The employee should stay home in quarantine for five (5) days. If the employee remains asymptomatic they may return to work after the five (5) day quarantine period. It is highly encouraged that the employee receives a test on day five (5) if possible.
      2. The employee should continue to wear a mask around others for five (5) additional days.
3. If the employee develops symptoms at any time they should get a test and stay home and adhere to guidance in Section 2 of this Order.

For the purposes of this Order, “close contact” means being in household contact or having close contact within six (6) feet of an individual with confirmed COVID-19 for a prolonged period of time (10+ minutes) within a 24 hour time period. The time frame for having contact with an individual includes the period of time 48 hours before the individual became symptomatic.

If close contact exposure has occurred:

   c. The employee shall notify their supervisor of the situation.
   d. The supervisor should determine if the employee’s duties can be conducted at home, using telecommuting.
      i. If telecommuting is a viable option, the employee and supervisor will work with Labor Relations to make appropriate arrangements.
      ii. If telecommuting is not a viable option, the employee will be required to self-quarantine for five (5) calendar and return to work in accordance with 4b of this Order.
   e. If the exposure is determined to have taken place inside the workplace, the employee may be eligible for administrative leave time (ADL) during the quarantine period and should work with Risk Management and Labor Relations to make a determination on eligibility.

5. An employee confirmed to be boosted or fully vaccinated by Risk Management is not required to quarantine as a result of close contact, provided 14 days have passed since the full course of vaccination has been completed and the series was completed within the last 6 months. However, fully vaccinated employees who suspect they have had close contact should notify their supervisor of the circumstances.

6. During this COVID-19 response, an employee returning to work from a COVID-19 diagnosis is not to visit MED-1 for clearance to return to the workplace.
   a. Alternatively, employees should make every reasonable attempt to secure an Authorization to Return to Work from their primary care physician or through a Blue Cross Blue Shield telemedicine doctor.
   b. All return to work documents must be submitted to the Risk Management Office with a copy to the employee’s supervisor.

7. Supervisors must maintain information about employee illness as a confidential medical record, consistent with ADA/HIPAA guidelines.
8. Employees are encouraged to use available telemedicine options to receive medical guidance and diagnoses whenever possible.

9. These procedures may be amended as emergent circumstances require.

You are directed to implement these changes by Monday, January 10, 2022. Please work with your Deputy City Manager, Assistant City Manager or Managing Director to resolve any questions or concerns.

cc: Eric DeLong
    Doug Matthews
    Allison Farole