



Issued February 10, 2021

**Guidance for Personnel in Clinical and Direct Care Settings to Return to Work  
Following COVID-19 Exposure or Infection or Travel**

This guidance applies to all facilities and services operated, licensed, or otherwise authorized by OASAS.

A. Asymptomatic Staff Exposed to COVID-19

Consistent with recent CDC guidance, providers may allow clinical and direct support professionals or other facility staff who have **been exposed to a confirmed case of COVID-19** to return to work after ten (10) days of quarantine if **no symptoms** have been reported during the quarantine period and if the all of the following conditions are met:

1. Personnel who have been in contact with confirmed or suspected cases are **asymptomatic**;
2. Personnel must continue symptom monitoring through Day 14. Self-monitoring should be completed twice a day (i.e. temperature, symptoms), and undergo temperature monitoring and symptom checks at the beginning of each shift, and at least every 12 hours during a shift;
3. Personnel must be counseled to continue strict adherence to all recommended non-pharmaceutical interventions, including hand hygiene and use of surgical masks;
4. To the extent possible, direct care professionals and clinical staff working under these conditions should be assigned preferentially to individuals at lower risk for severe complications, as opposed to higher-risk patients (e.g. severely immunocompromised, elderly);
5. Personnel allowed to return to work under these conditions should maintain self-quarantine through Day 14 when not at work;
6. At any time, if the personnel who are asymptomatic has contact with a positive case and working under these conditions develop symptoms consistent with COVID-19, they should immediately stop work and isolate at home. All staff with symptoms consistent with COVID-19 should be immediately referred for diagnostic testing for SARS-CoV-2.

## B. Asymptomatic Exposed Staff During a Staffing Shortage

Providers may allow **clinical and direct support professionals or other facility staff** who have **been exposed to a confirmed or suspected case of COVID-19** to return to work **before ten (10) days of quarantine** if **no symptoms** have been reported during the quarantine period and if all of the following conditions are met:

1. Furloughing such personnel would result in staff shortages that would adversely affect the health and safety of individuals served by the facility;  
**The provider agency must complete an OASAS attestation, acknowledging that the agency has implemented or attempted staffing shortage mitigation efforts and is experiencing a staffing shortage that threatens provision of essential care services and that all of the below factors and requirements will be or are being met.** The attestation form can be found [here](#) and should be submitted to the OASAS Regional Office (RO) at [StateWideRO@oasas.ny.gov](mailto:StateWideRO@oasas.ny.gov) before asymptomatic exposed staff are approved to return to any work location. One attestation may be submitted by each provider operating program(s) within these parameters but must list the locations/sites where staffing shortages require that exposed staff return to work before 10-day quarantines are completed.
2. Personnel who have been in contact with confirmed or suspected cases are **asymptomatic**;
3. Personnel must continue symptom monitoring through Day 14. Self-monitoring should be completed twice a day (i.e. temperature, symptoms), including temperature monitoring and symptom checks at the beginning of each shift, and at least every 12 hours during a shift;
4. Personnel must be counseled to continue strict adherence to all recommended non-pharmaceutical interventions, including hand hygiene and use of surgical masks;
5. Personnel must be advised that if any symptoms develop, they should immediately stop work, self-isolate at home, and contact their local public health authority or their healthcare provider to report this change in clinical status and determine if they should seek testing;
  - Note that personnel who test positive for COVID-19 must isolate and contact their Local Health Department (section D below);
6. To the extent possible, **direct care professionals and clinical staff** approved to work under these conditions should be assigned preferentially to individuals at lower risk for severe complications, as opposed to higher-risk patients (e.g. severely immunocompromised, elderly); AND
7. Personnel approved to return to work under these conditions should maintain self-quarantine through Day 14 when not at work.

### C. Staff Who Travel Out of State

- 1) **Staff (clinical, administrative, other) providing in person direct patient care services**, who are asymptomatic and are returning from travel to a non-contiguous state or a country or territory subject to a CDC Level 2 or higher COVID-19 risk assessment level, or for which the COVID-19 risk level is designated by the CDC as unknown, may return to work consistent with the essential worker requirements set forth in the NYDOH travel advisory.

Travelers who leave New York State for **less than 24 hours** do not need to obtain a diagnostic test before departing and do not need to quarantine upon return. However, such travelers must fill out the traveler form upon entry and must obtain a diagnostic test on the fourth day after arrival in New York. A copy of this form can be found at: <https://coronavirus.health.ny.gov/covid-19-travel-advisory#traveler-health-form>

Travelers who leave New York State for **>24 hours** to a non-contiguous state or a country or territory subject to a CDC Level 2 or higher COVID-19 risk assessment level or for which the COVID-19 risk level is designated by the CDC as unknown may return to work consistent with the essential worker requirements set forth in the Department's travel advisory, however such **HCP shall receive a diagnostic test for COVID-19 within 24 hours of arrival in New York and again on the fourth day after their return**. See guidance document [here](#).

- 2) For any traveler, **including staff (clinical, administrative, other) NOT providing in person, direct patient care services**, to New York State from a noncontiguous state, US territory or CDC level 2 and higher country, the 11/3/20 guidelines for travelers to test-out of the mandatory 10-day quarantine are below:

For travelers who were out-of-state for more than 24 hours:

- Travelers must obtain a test within three days of departure, prior to arrival in New York.
- The traveler must, upon arrival in New York, quarantine for three days.

On day 4 of their quarantine, the traveler must obtain another COVID test. If both tests come back negative, the traveler may exit quarantine early upon receipt of the second negative diagnostic test.

Travelers who leave New York State for **less than 24 hours** do not need to obtain a diagnostic test before departing and do not need to quarantine upon return. However, such travelers must fill out the traveler form upon entry and must obtain a diagnostic test on the fourth day after arrival in New York. A copy of this form can be found at: <https://coronavirus.health.ny.gov/covid-19-travel-advisory#traveler-health-form>

Providers may locate the guidance document issued by the New York State Department of Health titled "Interim Guidance for Quarantine Restrictions on Travelers Arriving in New York State Following Out of State Travel" at: <https://coronavirus.health.ny.gov/covid-19-travel-advisory>

### D. Staff with Confirmed or Suspected COVID-19

Providers may allow personnel with **confirmed or suspected COVID-19**, whether **direct care professionals, clinical staff or other facility staff**, to return to work only if all the following conditions are met:

1. To be eligible to return to work, **personnel with confirmed or suspected**

**COVID-19 must have maintained isolation for at least 10 days after illness onset, must have been fever-free for at least 72 hours without the use of fever reducing medications, and must have other symptoms improving;**

2. Personnel who are severely immunocompromised, as a result of medical conditions or medications, should consult with a healthcare provider before returning to work. Providers should consider seeking consultation from an infectious disease expert for these cases;
3. If a staff member is asymptomatic, but tested and found to be positive, they must maintain isolation for at least 10 days after the date of the positive test and, if they develop symptoms during that time, they must maintain isolation for at least 10 days after illness onset and must have been at least 72 hours fever-free without fever reducing medications and with other symptoms improving.

General questions or comments about this guidance can be sent to [AddictionMedicine@oasas.ny.gov](mailto:AddictionMedicine@oasas.ny.gov)