



UC Health  
1111 Broadway, Suite 1400  
Oakland, CA 94607  
Phone: (510) 987-0147  
<http://www.ucop.edu>

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President Drake  
Chancellors  
Director – Lawrence Berkeley National Laboratory  
Vice President – Agriculture and Natural Resources

RE: Exposure definitions and testing priorities

Per recent discussions with the Infection Prevention and Occupational Health working groups, please reference the attached matrix of workplace exposure/risk definitions from the CDC and the State.

The system-wide Infection Prevention and Occupational Health working groups have provided guidance on how these definitions should be applied in health care and community settings, generally and specifically within the UC system. The matrix also includes testing prioritization.

Please share this information as needed.

Sincerely,

*Carrie Byington*

Carrie Byington, MD  
Executive Vice President  
UC Health  
@carrie\_byington

cc: UCOP Management Review Team

Agency or Location	Exposure/Risk Definition	Essential On-Site Workers (Health Care Setting)	Other Workers (Community Setting)	Testing Priorities
CDC	<p>See next columns.</p> <p><i>A test-based strategy is <a href="#">no longer recommended</a> to determine when to <a href="#">discontinue transmission-based precautions</a>. Symptom-based strategy depends on severity of illness (10 days since exposure/24 hours without fever/improved symptoms for mild to moderate illness; 20 days/24 hours/improved symptoms for severe or critical illness and immunocompromised patients)</i></p>	<p>See <a href="#">here</a> (last updated 5/29/20): HCW with prolonged (15 minutes or any period for AGPs), close (within 6 feet) contact with a COVID-positive patient, visitor, or HCP should be excluded from work for 14 days after last exposure (except in cases of staffing shortages), where: (i) HCW was not wearing a respirator or facemask; (ii) HCW was not wearing eye protection if the COVID-positive person was not wearing a cloth face covering or facemask; or (iii) HCW not wearing all recommended PPE (gown, gloves, eye protection, respirator) while performing an AGP. No work restrictions for others but should follow all recommended infection prevention and control practices. If any symptoms, immediately self-isolate and report to occ health/IP.</p>	<p>See <a href="#">here</a> (last updated 6/4/20): Individual in close contact (&lt;6 feet for ≥ 15 minutes) with exposure to a COVID-positive person (regardless of source control) should: (i) stay home 14 day after last exposure and maintain social distance of at least 6 feet from others at all times; (ii) self-monitor for symptoms including temperature 2 times per day; (iii) avoid contact with people at higher risk for severe illness; (iv) immediately contact PCP; and (v) self-report to occ health if symptoms develop.</p>	<p>Recommendations are <a href="#">here</a> (last updated 7/17):</p> <ol style="list-style-type: none"> <li>1. Symptomatic individuals</li> <li>2. Asymptomatic individuals with recent known or suspected exposure</li> <li>3. Asymptomatic individuals for surveillance in special settings per state/local DPH recommendations (e.g., health care setting, congregate housing, prisons, nursing homes)</li> <li>4. Individuals tested to determine resolution</li> <li>5. Individuals tested for public health surveillance</li> </ol>
Governor's Office CDPH Cal/OSHA	<p>Undefined – current <a href="#">CDPH testing guidance</a> refers to “close contacts of confirmed cases” as a Tier 2 testing priority (after hospitalized individuals who are symptomatic and DPH-led investigation and management of outbreaks) but does not define the term.</p> <p>Undefined – current <a href="#">Cal/OSHA guidance</a> defines an “exposure incident” as one where employee is not equipped with “appropriate respiratory protection” when they provide care to a COVID-positive patient or PUI; perform high-hazard procedures, or provide other high-risk procedures such as taking nasopharyngeal or oropharyngeal swabs; exposure incidents require investigation, notification, and evaluation by a licensed HCP</p>	<p>California has defined <a href="#">essential sectors and workers</a>. Direct health care workers and those who support health care facilities and operations are among those who are essential.</p> <p>CDPH <a href="#">Mitigation Playbook</a> permits employees to continue to work post-exposure, with self-monitoring as long as they remain asymptomatic; requires testing and furlough if symptoms appear.</p>	<p>CDPH guidance on <a href="#">workplace outbreak management</a> directs employers to instruct employees to stay home if they have symptoms, were diagnosed with COVID-19, or are awaiting results. Guidance expressly does <i>not</i> address healthcare or congregate living settings.</p> <p>Joint state industry guidance still suggests return to work not less than 10 days after symptoms first appeared, no fever for 72 hours, improved symptoms; or 10 days post-testing if asymptomatic. See, e.g., <a href="#">Office Workspaces Guidance</a>. More restrictive guidance will prevail in case of conflicts.</p>	<p>Tier 1:</p> <ul style="list-style-type: none"> <li>- Hospitalized individuals with COVID symptoms</li> <li>- DPH-led investigation and management of outbreaks</li> </ul> <p>Tier 2:</p> <ul style="list-style-type: none"> <li>- All other symptomatic</li> <li>- Close contacts of confirmed cases</li> <li>- Asymptomatic but high risk (e.g., health care setting, congregate living, first responders)</li> </ul> <p>Tier 3:</p> <ul style="list-style-type: none"> <li>- Other essential workers with frequent contacts with the public</li> </ul> <p>Tier 4 (only when CDPH determines testing TAT has dipped to &lt; 48 hours):</p> <ul style="list-style-type: none"> <li>- Others who are asymptomatic but believe they are at risk</li> <li>- General surveillance</li> </ul>
UC System	<p>See next columns.</p>	<p>No quarantine or furlough of essential employees in the event of an exposure is required as long as exposed person remains asymptomatic and actively monitored, subject to local occupational health and IP consultation, and consistent with local health orders. <i>Please note: some UC Health systems may allow for face coverings in lieu of face masks.</i></p> <p><b>No Exposure:</b></p> <ul style="list-style-type: none"> <li>- Both persons &gt; 6 feet apart and wearing a face mask</li> <li>- Uninfected person wearing at least a face mask or respirator and eye protection</li> <li>- AGP performed with proper PPE</li> </ul> <p><b>Exposure:</b></p> <ul style="list-style-type: none"> <li>- &gt; 15 minutes and &lt; 6 feet part without dual masking or where the exposed uninfected person is not wearing face mask and eye protection</li> <li>- AGP without proper PPE</li> </ul>	<p>Exposure defined by CDC (above) and local public health department guidance. Some UC Health systems and campuses may use the health care exposure definitions for the community in lieu of the CDC community exposure definition. A possible alternative would be adopting the health-care definition such as the following:</p> <p><b>No Exposure:</b></p> <ul style="list-style-type: none"> <li>- Both persons &gt; 6 feet apart and wearing face coverings</li> </ul> <p><b>Exposure:</b></p> <ul style="list-style-type: none"> <li>- &gt; 15 minutes and &lt; 6 feet part without dual masking/face covering</li> </ul> <p>14-day quarantine of exposed individuals from date of exposure</p>	<ol style="list-style-type: none"> <li>1. Symptomatic patients, employees, trainees should be tested (essential on-site employees prioritized over non-essential or off-site employees)</li> <li>2. Asymptomatic workers who have been exposed may or may not routinely be offered testing 5-10 days post-exposure depending on testing capacity, according to the following guidance: <ul style="list-style-type: none"> <li>- Testing should be offered for essential on-site workers who have been exposed.</li> <li>- Further testing in exposed asymptomatic non-essential or off-site workers may be considered for testing per site discretion and test availability etc. These employees have to complete 14 day quarantine regardless of testing.</li> </ul> </li> <li>3. Symptomatic persons are priority over any asymptomatic testing.</li> </ol>

\* See CDC Summary Strategies to Optimize the Supply of PPE During Shortages: <https://www.jointcommission.org/-/media/tjc/documents/covid19/summary-strategies-to-optimize-the-supply-of-ppe-during-shortages--cdc.pdf> (last updated 7/16/2020).