

RELAXED QUARANTINE RULES PUT WORKERS, PATIENTS, AND COMMUNITY AT RISK



Dept. of Health Shortens Quarantine Time for Healthcare Workers, Contrary to World-wide 14 Day Quarantine Standard

Healthcare worker safety — and public health — took another blow on Monday, March 16, when the New York State Department of Health issued a directive, releasing healthcare facilities from the 14-day quarantine requirement for staff who have been exposed to SARS-CoV-2/COVID 19.

The Department of Health's advisory stated that "HCP [health care professionals] who are asymptomatic contacts of confirmed or suspected [COVID-19] should self-monitor twice a day (temperature, symptoms), and undergo temperature monitoring and symptom checks at the beginning of each shift and at least every 12 hours."

LOOSENED QUARANTINE STANDARD CREATES DANGEROUS EXPOSURES

According to the DOH, if you are a healthcare worker who has been exposed to COVID-19 and are asymptomatic, you should continue working.

The advisory also states that HCP with confirmed or suspected COVID-19 can return to work after maintaining isolation for at least 7 days after the onset of illness, provided they have been fever-free for at least 72 hours fever-free, with other symptoms improving. This means an infected HCP can return to work after less than the 14-day quarantine required for the general public.

NYSNA believes these are dangerous practices that can result in further spread of COVID-19 to healthcare colleagues and patients.

Just like the CDC rollbacks around personal protective equipment (PPE) this change in protocol is not based on science, but driven by pressure from employers, who in large part are unprepared to protect core staff from exposure to the virus.

Most facilities jumped on the bandwagon and started applying these dumbed-down standards and announcing that exposed, un-symptomatic staff were to return to work and self-monitor their temperatures.

Meanwhile, a new study in the *Annals of Internal Medicine* has reaffirmed the need for the current standard of 14-day quarantine. These findings indicate that about 97.5 percent of people who develop symptoms of SARS-CoV-2 infection will do so within 11.5 days of exposure. Researchers estimated that for every 10,000 individuals quarantined for 14 days, only about 101 would develop symptoms after being released from quarantine.

“New study on COVID-19 estimates 5.1 days for incubation period. Median time from exposure to symptoms affirms earlier estimates and supports CDC’s current 14-day quarantine period.”
—Science Daily, March 10, 2020.”

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Wyckoff Hospital was hard-hit in the early stages of the COVID-19 crisis. Hospitals across the state are at risk of being overwhelmed by COVID-19 because our facilities, along with city, state, and federal leaders, were unprepared for a disaster like this. Lawmakers at every level need to take extraordinary measures to secure the supply chain for proper protective equipment and testing materials, as well as respect scientifically proven precautions like the 14-day quarantine standard. (Left to right, night shift Wyckoff ICU RNs preparing for a shift: Rosalyn Ramirez, Therese Tomlinson, Erin Benzy, Anju William, Jose Balarezo, Lyle Rodis)

Research also demonstrates that infected people without symptoms are shedding and transmitting the virus, with the heaviest viral shedding in the early stages.

By having exposed workers return to duty earlier than the 14 days, an unknown number of patients, visitors and staff will be exposed to the virus. The rollbacks on protective equipment protections and slow adoption of administrative controls around screening and care will multiply the risks associated with the relaxed quarantine standard.

TAKE IT FROM THE EXPERTS

Singapore and Hong Kong are two countries that have dealt swiftly and effectively with the virus. They segregate patients with COVID-19 symptoms in separate facilities with dedicated staff. They use aggressive contact tracing to quickly identify staff and others who have had contact with PUI and confirmed cases. They quarantine staff who've had close contact based on the following formula: "In Hong Kong close contact "means fifteen minutes at a distance of less than six feet and without the use of a surgical mask; in Singapore, thirty minutes." (*The New Yorker*, March 21, 2020).

Why aren't our facilities following protocols that have been proved effective on the ground in other countries?

NYSNA has protested the NYS DOH decision, and NYSNA Executive Director Pat Kane met with Howard Zucker, the head of NYS DOH several times last week to raise our concerns of relaxed PPE and quarantine standards, as well as to demand the state provide uniform, binding infection control standards.

At the same time, we need an action plan for our worksites. It includes:

- **File a COVID-19 Protest of Assignment:** <http://bit.ly/covidpoa>
- **Email covidpoa@nysna.org or Text your Rep to let us know if you have been exposed to COVID-19.**
- **File an incident report and file for workers compensation (you are eligible if confirmed COVID-19).**
- **LBU's need to demand to meet with management** about the rolled back quarantine requirements. Discuss or invoke bargaining over quarantine provisions including the 14 day period of time that protect everyone.

"Healthcare workers are at a much higher risk of being infected, especially in the absence of protection."

—Xihong Lin, Department of Biostatistics and Department of Statistics, Harvard University and Broad Institute

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