

Novel Coronavirus (COVID-19) Guidance for Active Screening of Employees at 24/7 State-Operated Facilities

The Washington State Department of Health has developed guidance to assist 24/7 state-operated facilities in response to the 2019 novel coronavirus disease (COVID-19) outbreak. 24/7 state-operated facilities include: veterans homes, correctional, behavioral health, developmental disability and juvenile rehabilitation facilities. While operating in compliance with other applicable law, these facilities will modify processes to come into compliance with these protocols and will communicate agency process changes to staff and others. 24/7 state-operated facilities have experience managing respiratory infection outbreaks among residents, and staff should at a minimum apply the same outbreak management principles to COVID-19. Additionally, facilities should actively screen employees to prevent resident and staff exposure to COVID-19.

Stay up-to-date:

Monitor public health updates from:

- [Local Public Health Department](#)
- [Washington State Department of Health](#)
- [Centers for Disease Control and Prevention Situation Summary](#)

Employee Screening

- 24/7 state-operated facilities will conduct active screening of all employees to prevent resident and staff exposure to COVID-19.
- Agencies will operate in compliance with DOH guidelines.
- Signs should be posted at building entrances and in reception areas alerting employees to active screening protocols, including requests for:
 - Temperature information
 - Standard questions about symptoms consistent with COVID-19
- Additionally, visible signage should educate employees about COVID-19 and the importance of practicing infection prevention and control measures, including:
 - Frequent handwashing or, if a sink is not readily available, use of alcohol-based hand sanitizer
 - Appropriate use of personal protective equipment (PPE)
 - Sneezing/coughing into a tissue or elbow

- Putting used tissues in a plastic-lined waste receptacle and washing hands immediately after
- Avoiding handshakes
- See [CDC Print Resources](#) for posters to print

Active screening of employees:

- Active screening must take place each time an employee reports to work.
- Employees should be directed to specified checkpoints for active screening.
- Screening will be performed by staff who have been trained on the screening protocol.
- Active screening consists of temperature information and a standardized questionnaire. Facilities may use their discretion in allowing staff to provide this information.
 - When temperature checks are performed, a device that has been approved for use by each facility will be used.
 - Staff should refer to the instructions on the packaging or the manufacturer’s website for guidance on how to properly take an employee’s temperature, as steps vary by brand and model.
- The employee screening questionnaire includes the following questions:
 1. Since your last day of work, have you experienced a new cough that you cannot attribute to another health condition?
 2. Since your last day of work, have you experienced new shortness of breath that you cannot attribute to another health condition?
 3. Since your last day of work, have you experienced a new sore throat that you cannot attribute to another health condition?
 4. Since your last day of work, have you experienced new muscle aches that you cannot attribute to another health condition or a specific activity such as physical exercise?
 5. Since your last day of work, have you had a temperature at or above 100.4° or the sense of having a fever?
 6. Within the last 14 days, have you had close contact, without the use of appropriate PPE, with someone who is currently sick with suspected or confirmed COVID-19? (*Note: Close contact is defined as within 6 feet for more than 10 consecutive minutes*)
 - Employees who have had close contact with a suspected or confirmed COVID-19 case but have answered “no” to all other questions and do not have a temperature greater than or equal to 100.4° may work if they:
 - Actively monitor for symptoms consistent with COVID-19 and, if

symptoms develop, immediately cease work, notify their supervisor and self-isolate.

- Adhere to cough etiquette and hand hygiene.
- Wear a facemask at all times while in the facility, if there is a sufficient supply of facemasks, until 14 days after the date of exposure or until a suspected case's testing comes back negative.

Criteria for screening out an employee:

- If an employee has a temperature greater than or equal to 100.4°, entry to the facility will be denied.
- If an employee answers “yes” to having new onset of cough, shortness of breath, sore throat or muscle aches, entry to the facility will be denied and the employee will be referred for secondary screening.
 - Secondary screening is not appropriate for employees who have a temperature greater than or equal to 100.4°.

Secondary screening:

- The purpose of secondary screening is to determine employee fitness for duty.
- Ideally, secondary screening should be performed by staff who have medical training or a background in infection control procedures.
- Secondary screening will be performed as soon as possible, preferably before sending the employee home, based on the availability of staff trained on the secondary screening protocol.
- Secondary screenings must be documented and maintained.
- Employees who pass secondary screening must be actively screened each time they report to work.

Criteria for passing secondary screening:

- Employees who have been symptom-free for at least 72 hours and have not had close contact with a confirmed case of COVID-19.
- Employees who 1) self-disclose that their symptoms are related to a health condition other than COVID-19, such as allergies or asthma, and do not feel sick, and 2) have not had close contact with a confirmed case of COVID-19, unless there are other concerning health-related matters.
- Employees will be cleared for work when:
 - The employee passed their secondary screening immediately after their initial active screening.
 - The secondary screening occurred after the employee went home, and the

employee does not have a temperature greater than or equal to 100.4° and does not have a new cough, shortness of breath, sore throat or muscle aches.

Employees who have been screened out:

- For employees with confirmed COVID-19, refer to DOH's [return to work guidance](#), updated March 20, 2020.
- For asymptomatic employees with high or medium risk exposure to a confirmed case of COVID-19 as [defined by the CDC](#), refer to DOH's [return to work guidance](#), updated March 20, 2020.
- All employees must be actively screened upon their return to work.
- Refer to State HR's [Guidance for Supervisors](#) for more information on how to answer employee questions related to COVID-19 and how to determine pay and leave status for employees who have been screened out.

More COVID-19 Information and Resources

Stay up-to-date on the [current COVID-19 situation in Washington](#), [Governor Inslee's proclamations](#), [symptoms](#), [how it spreads](#), and [how and when people should get tested](#). See our [Frequently Asked Questions](#) for more information.

The risk of COVID-19 is not connected to race, ethnicity or nationality. [Stigma will not help to fight the illness](#). Share accurate information with others to keep rumors and misinformation from spreading.

- [WA State Department of Health 2019 Novel Coronavirus Outbreak \(COVID-19\)](#)
- [WA State Coronavirus Response \(COVID-19\)](#)
- [Find Your Local Health Department or District](#)
- [CDC Coronavirus \(COVID-19\)](#)
- [Stigma Reduction Resources](#)

Have more questions about COVID-19? Call our hotline: **1-800-525-0127**. For interpretative services, **press #** when they answer and **say your language**. (Open from 6 a.m. to 10 p.m.) For questions about your own health, COVID-19 testing, or testing results, please contact your health care provider.