Interim Recommendations for Critical Infrastructure Workers Who Have Had Exposure to a Person with Suspected or Confirmed COVID-19

GUIDANCE AS OF 4/10/20

The following recommendations do not apply to health care workers who have had exposure to a person with suspected or confirmed COVID-19. For health care worker recommendations, please refer to MDH COVID-19 Recommendations for Health Care Workers (https://www.health.state.mn.us/diseases/coronavirus/hcp/hcwrecs.pdf).

Critical Infrastructure Workers

On April 9, 2020, CDC released Interim Guidance for Implementing Safety Practices for Critical Infrastructure Workers Who May Have Had Exposure to a Person with Suspected or Confirmed COVID-19 (https://www.cdc.gov/coronavirus/2019-ncov/community/critical-workers/implementing-safety-practices.html). This CDC guidance applies to critical infrastructure workers as defined by federal criteria. Exclusion of asymptomatic critical-infrastructure workers for prolonged periods may affect the continuity of operations of essential functions in certain work sectors, such as law enforcement. The CDC guidance sets forth practices by which COVID-19-exposed workers can continue to be in a workplace if they remain asymptomatic. MDH has reviewed CDC guidance and has the following interim recommendations for Minnesota employers and employees.

MDH Interim Recommendations

MDH recognizes that critical infrastructure workforce challenges must be balanced with the need to prevent further spread of COVID-19 within workplaces and in the larger community. At this time, with the exception of specific settings with whom MDH is working directly with to limit disease transmission while ensuring adequate staffing (such as a correctional facility experiencing an outbreak), MDH recommends the following approach for critical infrastructure workers:


- These precautions include staying home until 14 days after last exposure; maintaining social distancing of at least 6 feet from others at all times; self-monitoring for symptoms (check temperature twice a day and watch for fever, cough or shortness of breath); avoiding contact with people at higher risk for severe illness (unless they live in the same home and had the same exposure) and self-isolating if symptoms develop.
There is growing evidence of transmission risk from infected people without symptoms or before the onset of recognized symptoms. Therefore, people who have contact with suspected or confirmed COVID-19 infection should take precautions to the extent possible, even if they have no symptoms.

MDH should be consulted to discuss implementation of safety practices in the workplace if a specific critical infrastructure employer has a local, acute shortage of staff, has exhausted other staffing options, and has determined that excluding COVID-19-exposed workers from the workplace would represent a crisis for the continuity of critical operations. Practices that employers may need to implement include:

- Pre-screening of employee by employer for temperature measurement and the presence of any respiratory symptoms (i.e., cough, shortness of breath, or sore throat), and subsequent exclusion from work if symptoms present.
- Regular employee self-monitoring under supervision of the employer’s occupational health program.
- Using face masks/cloth face coverings as a source control measure.
- Practicing diligent hand hygiene.
- Avoiding sharing items such as headsets, other equipment, food, and utensils.
- Maintaining social distancing of at least 6 feet from others, including during break times; staggering break and meal times and preventing congregation.
- Working with their facility maintenance personnel to increase air exchanges in rooms.
- Ensuring that employees immediately go home (or not report to work, if they become ill at home) if they develop respiratory symptoms or a subjective (feeling feverish) or measured temperature (≥100°F).
- Following MDH recommendations that any employee with symptoms consistent with COVID-19 should isolate themselves at home until:
  - At least 7 days have passed since symptoms first appeared; AND
  - At least 3 days (72 hours) have passed since recovery, defined as resolution of fever without the use of fever-reducing medications and improvement in respiratory symptoms (e.g., cough, shortness of breath).

Minnesota Department of Health
625 Robert St N St. Paul, MN 55164
651-201-5414
www.health.state.mn.us

4/10/20

To obtain this information in a different format, call: 651-201-5414.