IeDEA
International epidemiologic
Databases to Evaluate AIDS

RETURN TO OFFICE WORK PROTOCOL

1. **COVID Education for Staff**
   a. **Basic information about COVID**

   Corona virus disease (COVID-19) is a highly infectious respiratory disease caused by a newly discovered coronavirus (severe acute respiratory syndrome coronavirus 2 or 'SARS-CoV-2'). The first case of the novel Corona Virus disease was reported in China in November 2019, first appearing as a cluster of atypical pneumonia cases/deaths. COVID-19 was first identified in Wuhan, China in December 2019 and was declared a global pandemic by the World Health Organization (WHO) on 11 March 2020.

   COVID-19 is spread from person to person through small droplets from the nose or mouth expelled when one coughs or exhales droplets; or by touching a surface or object that has been contaminated with these droplets and then touching your eyes, nose or mouth. The most common symptoms of COVID-19 include fever, dry cough, body aches/pains, sore throat and diarrhea. Other newer symptoms include loss of taste, loss of smell and vomiting. The first COVID-19 case in Kenya was confirmed on 13th March, 2020.

   b. **Personal Protective Equipment (what, when, how)**

   Personal protective equipment are specialized clothing or equipment worn by an employee for protection against infectious materials" (OSHA)

   The following types of PPE are used in healthcare settings:

   · Gloves – to protect hands

   · Gowns/aprons – to protect skin and/or clothing

   · Masks and respirators– to protect mouth/nose

   · Respirators – to protect respiratory tract from airborne

   infectious agents

   · Goggles – to protect eyes

   · Face shields – to protect face, mouth, nose, and eyes

   Not all the PPE listed above will be required in our study activities. Study staff will use mostly Face Masks and gloves. Study personnel will wear appropriate PPE at

all times while at their work stations (office, clinic or in the community) and while travelling to these locations.

Face masks

It is now a requirement for all persons to wear face masks when in public spaces. Such situations may arise not only in the work places, but also at clients' residence, when carrying out visits or when using public transport.

It is essential that workers use face masks properly so that they are effective and safe. The following considerations should be observed while putting on, using and removing masks:

- It should fit properly, completely covering the face from bridge of nose to the chin

- Clean hands properly before putting the face mask on or taking it off

- Only touch the cord or elastic at the back of the face mask when removing it, not the front as the front is perceived to have been contaminated.

- If the face mask is disposable, be sure to do so safely in a proper container

- If reusable, wash the face mask as soon as possible after use with detergent at 60°C

- The best way to reduce any risk of infection is good hygiene and avoiding direct or close contact with any potentially infected person.

How to put on a mask

Some masks are fastened with ties, others with elastic. If the mask has ties, place the mask over your mouth, nose and chin. Fit the flexible nose piece to the form of your nose bridge; tie the upper set at the back of your head and the lower set at the base of your neck.

If a mask has elastic head bands, separate the two bands, hold the mask in one hand and the bands in the other. Place and hold the mask over your nose, mouth, and chin, then stretch the bands over your head and secure them comfortably; one band on the upper back of your head, the other below the ears at the base of the neck.

Adjust the mask to fit. Remember, you don't want to be touching it during use so take the few seconds needed to make sure it is secure on your head and fits snuggly around your face so there are no gaps.
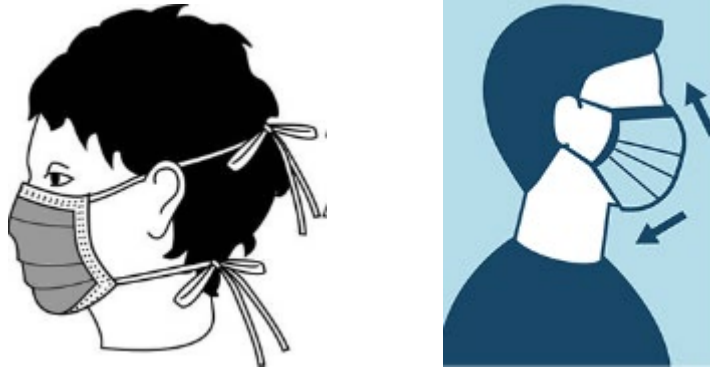
The above photos show a properly donned mask

How to safely remove a Mask

1. Wash your hands with soap and running water or use a hand sanitizer

2. Untie the bottom, then top tie (for a mask fastened with ties)

3. Remove from face without touching the front of the mask

4. Discard in a specific closed bin for single use masks or if reusable drop in a bucket with hot water and soap, wash and dry in the sun for approximately 5 hours

5. Wash your hands with soap and running water or use a hand sanitizer

Gloves

Be sure to select the type of glove needed for the task in the size that best fits you.

How to wear Gloves

1. Wash your hands with soap and running water or hand sanitizer

2. Select appropriate type and size

3. Inspect for nonconformities

4. Insert hands into gloves

5. Extend gloves over long sleeve clothing

How to remove Gloves

1. Grasp outside edge near wrist

2. Peel away from hand, turning glove inside-out

3. Hold in opposite gloved hand

4. Slide ungloved finger under the wrist of the remaining glove

5. Peel off from inside, creating a bag for both gloves

6. Discard appropriately in a designated foot operated bin

7. Wash your hands with soap and running water or hand sanitizer
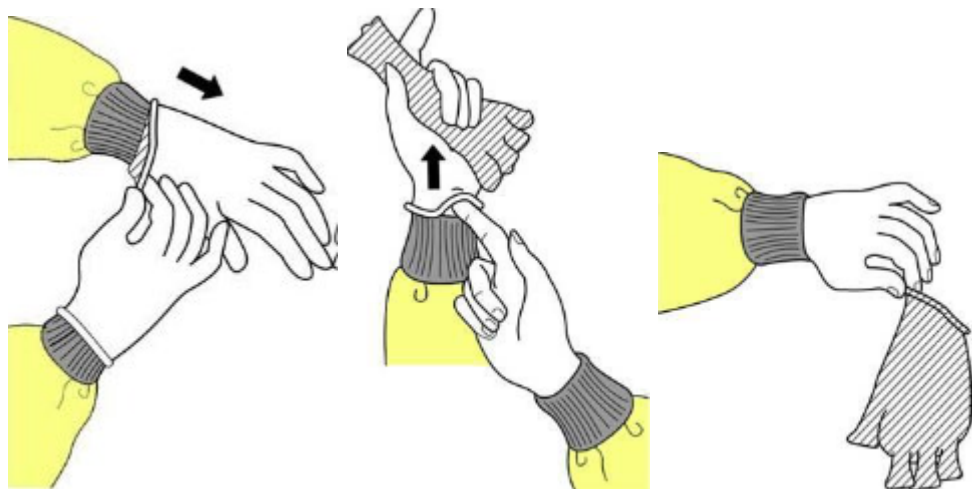
c. **Handwashing (when and how)**

Staff must wash their hands with soap for at least 20 seconds in running water or use hand sanitizer of at least 70% alcohol if soap and water are not readily available. If hands are visibly dirty, staff will wash their hands with soap and water in preference to hand sanitizer.

When to wash hands

- **Before and after work shifts**
- **Before and after breaks**
- **After blowing nose, coughing or sneezing**
- **After using the washrooms**
- **Before eating food**
- **After putting on or removing masks and/or gloves**

How to wash hands

- **Wet your hands with clean, running water (warm or cold), turn off the tap, and apply soap.**
- **Lather your hands by rubbing them together with the soap. Lather the backs of your hands, between your fingers, and under your nails.**
- **Scrub your hands for at least 20 seconds. (You can Hum the "Happy Birthday" song from beginning to end twice).**
- **Rinse your hands well under clean, running water.**
- **Dry your hands using a clean towel or air dry them.**

2. **Symptom screen for staff**
   a. **Timing and frequency (daily, first thing in the morning)**
   The Project will follow the Ministry of Health's recommendations to screen staff for   symptoms in advance of any activities involving in-person contact.

Staff are asked to self-screen daily for the symptoms outlined below. If any symptoms are positive, the staff should report their symptoms to their supervisor, stay at home and follow MOH guidance for reporting and self-quarantine.

b. **List of symptoms to be assessed**

- Low grade fever (>37.5 ° C)
- Fever or chills, Cough, Shortness of breath or difficulty breathing, Fatigue, Muscle or body aches, Headache, New loss of taste or smell, Sore throat, Congestion or runny nose, Nausea or vomiting, Diarrhea

c. **Temp check and symptom screening**
All staff coming into the office will go through the hospital's daily screening area every morning. Using thermo guns, daily temperature will be taken and questions will be asked to identify COVID-19 – related symptoms.

If screening is not available at the hospital entrance or if in doubt, the study will do it own screening of staff in their work stations.

d. **Criteria for sending someone home**
If a staff member has an elevated temperature or screens positive for symptoms at the hospital's daily screen, the staff member will be released to stay at home. They are expected to follow MOH guidelines for self-quarantine and notification of public health officials. Staff should use sick leave and will be allowed to return to work per MOH guidelines.

3. **Sick leave**

Sick leave is the approval for an employee to be absent from duty due to illness. This includes both weekends and public holidays.

a. **When may Research staff stay home?**

Research staff will be allowed to stay home under the following circumstances:

- If she/he has symptoms of COVID-19 (see section 10), confirmed positive test and put on home based care (see section II)
- When he/she has a history of contact with a confirmed COVID-19 positive patient and is placed under quarantine

- If she/he belongs to a group of vulnerable population including: using immunosuppressants or are severely immunosuppressed, diabetes mellitus, hypertension, heart disease, above 58 years age.
- When she/he has a history of travel to a high risk COVID-19 area.
- COVID-19 related mental health problem which is suspected to be aggravated by work environment.

b. **What is the policy around taking sick leave**

According to AMPATH human resource policy, every employee is entitled to leave for recuperative purposes at an agreed time approved by the supervisor. However, if it happens that an employee presents with signs and symptoms of COVID-19 (refer to section II), a quick action will be taken to ensure that the research staff has taken a sick leave immediately. The leave will be approved by the immediate supervisor then the PI and submitted to the Head of RSPO and must be supported by a medical report from a certified doctor/clinician. If sick off coincides with the annual leave both shall run concurrently. The staff will seek COVID-19 care and treatment as advised by the doctor as well as observing the MOH guidelines for self-quarantine and notification of public health. The staff will be allowed to resume her/his duties after full recovery confirmed by a certified doctor(Having preferably -two negative COVID-19 test results (but one test 14 days after the first confirmed test result may suffice in current background of reduced test kit availability) or seven (7) days after symptoms have completely resolved).

4. **Work from home policy**

Working from home is encouraged to reduce the risk of transmission of COVID-19 within the place of work. This will minimize exposure during travel and congestion in offices. It is aimed at achieving the study goals by executing duties/activities remotely. This will be allowed after prioritized office-based study activities are completed.

a. **Criteria for working from home**

The PIs or their designates are expected to work with the study staff to determine their ability to work from home. This will include having:

Identify study activities that can be worked on remotely e.g. data entry and verification, phone based interviews etc.

Clear expectation from the staff outlined as per the study protocol. This includes instructions for the study staff's daily work schedule, targets to achieve and reporting procedures. The PI or their designate will continually evaluate whether the plans are working and make revisions as needed.

Proper technology: The study staff must have a working computer /tablet with updated antivirus and encryption software, working phone and the ability to access required servers to work remotely.

Secured connection: Staff should have enough airtime for calls and internet bundles/WIFI to access databases remotely for study activities. The study coordinator should be able to work with the staff to estimate how much airtime is required for a specific period and task.

Effective communication program: Staff working from home should have a reliable method with which the supervisor can contact them at any time during the work day. This may include video conferencing, calls, texts, phone calls or email. They should be able to attend all required conference calls and supervisory support sessions.

NB: Those research projects with many staff sitting in one office and not able to observe the social distancing rule may work from home in rotation.

Remote workers must be able to maintain regular working hours (Monday-Friday, 8am-5pm)

Remote workers must adhere to study SOPs

b. Supervision of work from home

Supervision of research staff work will continue remotely. The Study Coordinator or PI may choose any of the following supervision strategies:

Initiating daily or bi-weekly communication with the research staff via phone calls.

Creating a central network where all documents or activities are uploaded (e.g shared folders, goggle drives).

Requiring the remote worker to submit weekly work plans.

Submit weekly progress reports on work done that week to the PI or their designate and whether weekly work plan targets were met.

5. **Procedures for Social distancing by venue**

Limiting face-to-face contact with others is the best way to reduce the spread of coronavirus disease 2019 (COVID-19). Social distancing also called Physical distancing means keeping space between yourself and other people outside of your home.

a. **Office**
- The Country Coordinator and Project Managers are responsible for ensuring that 1.5 to 2 meters of space can be maintained between staff within the office by;
- Implementing working on a shift schedule
- Re-arranging furniture in such a way that physical distance is maintained at all times
- Adding physical barriers/dividers between work stations
- Whenever possible, allow staff to work remotely i.e. from home
  - For example: an office measuring 12 by 19 feet (app. 3.7*5.8 meters) can accommodate 4 members of staff.
  - Furniture will be rearranged placing shelves and physical barriers in-between staff. There are only 3 staff members in this particular office.
  - In another office measuring 19 by 19 feet (app. 5.8*5.8 meters) – will be able to accommodate 7 members of staff with Furniture such as shelves between tables. There are only 5 members of staff in this office.
  - At the moment – all staff will be able to work from the office, working remotely will be on a case by case basis. Projects coordinators are responsible for review of work from home as needed.
  - Both offices will be re-arranged and there will be no need to work in shifts.
  - If staff members are not able to fit into the office space as above examples, then measures such as working in a shift schedule and remote working will be recommended.
- All personnel are required to wear face masks at all times in office spaces
- Avoid hugs, handshakes and other physical contact

- Limiting public access to office spaces by placing a ribbon barrier at the door of every research office space to set a boundary for staff and the public.
- Ensuring increased air circulation as much as possible for example by opening windows and doors.
- The Project will provide personnel working in the offices, clinics or laboratory with access to face masks. The Project Coordinator/Program Managers will be responsible for distribution of face masks to project staff. A one week supply of masks will be picked from the office once a week (Mondays) by every staff member. Staff members will be scheduled a time when masks will be picked to avoid congestion at the pick-up point.

b. **Clinic**

Studies will adhere to the MOH's social distancing guidelines at all work sites. Studies looking into working at clinics will work to adhere to social distancing at the facility as implemented by the counties through the facility in-charges. Studies will defer all restrictions as regulated by the individual host clinics. In addition, studies will adhere to the basic guidelines as outlined below;

- Both Staff and Patients should wear masks at all times.
- Staff to avoid handshakes or other physical contact.
- Scheduling a limited number of study patients per day.
- Creating 1.5-2 meters sitting arrangements for patients in an open air area.
- Seeing one study patient at a time in a room.
- Ensuring increased air circulation as much as possible for example by opening windows and doors.
- Opting to work in tents outside.

Proposed Checklist (Edit as needed by project);

- ✓ Working with other programs/projects to see how the clinic patient flow will work during study activities such as enrolments and follow-up visits.
- ✓ Generating patient schedules prior to every clinic visit.
- ✓ Call patients prior to them visiting the facility.
- ✓ Having study patients come on days when the usual clinics are not running or has less than usual patients scheduled.
- ✓ Weekly or monthly review of implementation of the above checklist.

c. **Community**

Staff will work in conjunction with community leaders and liaisons to know what the requirements are in a particular community for social distancing. Study staff

will adhere to the MOH's social distancing guidelines at all work sites. The following will be done;

- Limiting gatherings of not more than 15 people.
- Holding meetings in an open air area.
- Avoiding entry into households.
- Observe social distancing of 1.5-2 meters between persons.
- Avoid handshakes or other physical contact.
- Whenever possible – utilize tele/video conferencing for meetings.

6. **Personal Protective Equipment (PPE)**

All PPE will be appropriately disposed (into hazardous waste containers) to avoid the potential of contamination. Gloves and masks will be disposed of in biohazard-bagged bins within MTRH.

- Staff will dispose of used PPE in biohazard bins located at all floors and clinics within Moi Teaching and referral hospital as per hospital protocols.
- Staff working in the field are requested to ensure proper disposal of used PPE to reduce the contamination. This can be done by wrapping used PPE prior to disposal.
- Study coordinators will make arrangements with health facilities in communities where study staff will be posted to request for assistance in disposing used PPE.

a. **Ordering and Inventory Maintenance**
- All required PPEs identified will be procured through ATP requisitions by Study Coordinators.
- Study Staff will be in their workstations only when the required PPEs are made available.
- All study coordinators will supervise disbursement of PPEs and maintain supplies inventory to avoid wastage.
- Coordinators will be required to estimate the amount of PPE inventory requirements for a period of 30 days.
- Request for PPE inventory should be made 3 weeks prior to expected receipt date.

b. **Requirements**
  i. **Office**
  - All staff will have facemasks at all times when working in offices in addition to maintaining physical distancing of at least 1.5-2 meters.
  ii. **Clinic**

All staff working in clinics will:
- o wear a face mask at all times
- wear gloves when handling patients or patient files
  - o Used gloves will be disposed of after contact with an individual client. DO NOT REUSE GLOVES.
- Wear long sleeved lab coats at all times
  - o On removal of lab coats, hang them on coat racks to avoid contamination.
  - o Staff will be responsible for washing their individual lab coats
    - ▪ Staff are requested to wash their lab coats at least once a week
    - ▪ Staff are advised to use a bleach when washing labcoats

iii. Community
- Staff working in community settings are required to wear a face mask at all times
- Staff will examining patients in the community will be required to wear a lab coat and gloves when examining patients. Gloves should NOT be reused

7. Handwashing

a. Ordering and Maintenance of supplies
- Hand hygiene supplies include liquid hand washing soap and hand sanitizer.
- All projects should put in requests for soap and hand sanitizer
- Soap and hand sanitizer should be readily available prior to staff resuming working in the office, clinics or within the community.
- Soap and hand sanitizer stocks will be maintained and monitored to ensure no wastage occurs.

b. Locations of stations

Hand washing stations will include:
- Hospital Entry points. These include Chandaria Cancer Centre, Riley Mother and Baby hospital, Moi Teaching and Referral Hospital Main Entrance, MTRH Morgue entry and AMPATH Centre
- Taps outside study offices in Chandaria Cancer Center.
- Hand sanitizer will be provided for all staff working in the field

c. Handwashing requirements for staff
Staff must wash their hands for at least 20 seconds with soap in running water or use hand sanitizer of at least 70% alcohol if soap and water are not readily

available. If hands are visibly dirty, staff will wash their hands with soap and water in preference to hand sanitizer.

- Posters on the proper hand washing procedure will be placed in all offices.
- Project Coordinators will ensure that all staff are trained in the proper method of handwashing and disinfection of surfaces. Routine cleaning and disinfection of frequently touched surfaces and objects ie keyboards, tables, and doorknobs will be practiced.
- All staff will wash their hands at the designated hand washing points within MTRH
- Liquid hand washing soap will be placed near the hand washing points outside the office space Sanitizer will be made available in all offices
- All staff must ensure that they wash their hands or sanitize before entering their designated workstations at all times.
- Staff working in the field will be provided with hand sanitizer.
- Staff will be provided with adequate stocks of hand sanitizer for the entire period during which they will be in the field
- Hand sanitizer will be refilled ever time staff physically report back to Eldoret.
- In cases where an urgent refill is required when staff are in the field, hand sanitizer will be dispatched via an AMPATH vehicle at the transport office
- Staff working in the field will be required to maintain an inventory of hand sanitizer to prevent stock out.
- Staff are required to remember key times for hand washing

8. **Procedures for cleaning offices/work areas**

COVID-19 can be transmitted from person to person. The scientific evidence confirms that COVID-19 is spread by droplets. This means that when an infected person coughs, sneezes or talks, they may generate droplets containing the virus. These droplets are too large to stay in the air for long, so they quickly settle on surrounding surfaces.

Cleaning means physically removing germs, dirt and organic matter from surfaces. While **Disinfecting** means using chemicals to kill germs on surfaces. It's important to clean before disinfecting because organic matter and dirt can reduce the ability of disinfectants to kill germs.

Simple guideline:
- **Wear disposable gloves** to clean and disinfect.
- **Clean surfaces using soap and water, then use disinfectant. Bleach or sodium hypochloride can be used. (see MOH guidelines)**
- Cleaning with soap and water **reduces number of germs, dirt and impurities** on the surface. **Disinfecting kills germs** on surfaces.

- **Practice routine cleaning** of frequently touched surfaces and objects.
  - More frequent cleaning and disinfection of surfaces and objects may be required based on level of use.
  - **High touch surfaces such as** tables, doorknobs, light switches, countertops, handles, desks, phones, photocopiers, keyboards, etc should be wiped with disinfectants regularly, 1 to 2 times a day is recommended.
- **Electronics** such as laptop, tablets, touch screens, keyboards, remote controls etc, should be disinfected using an alcohol-based wipes or sprays containing at least 70% alcohol. Dry surfaces thoroughly.
- **Disinfectant solutions** must always be prepared and used according to the manufacturer's instructions, including instructions to protect the safety and health of disinfection workers, use of personal protective equipment, and avoiding mixing different chemical disinfectants.
  - **The floors:** Are cleaned by MTRH cleaning staff – Cleaners will follow the hospital cleaning recommendations, all purchases and inventory of cleaning supplies will be purchased by the hospital. Office floors are cleaned once a day – usually in the morning hours.
  - **Work surfaces:** Each project staff is responsible for cleaning own work area within the office. All supplies will be procured by the Project Coordinator and kept in the project office where accessible to all staff members in the particular office. Surfaces will be cleaned at least once a day. Projects may also work on a schedule to have one staff clean and disinfect on a rotating basis each day/week.

9. **Safe Travel**

Research activities including travel to sites/community are now resuming. Projects will review travel restrictions on a daily basis to identify areas where travel is restricted.

Studies must adhere to requirements of the National Government including:

- The nationwide curfew from 9pm to 4am EAT.
- Travel ban to specified geographic areas.
- Avoiding large gatherings.
- Wearing face masks in public places at all times.
- Social distancing rules apply when using private and public vehicles – anyone driving a car must fill only 50% of the vehicle's seat capacity.
- For both private and public vehicles;
  - Avoid using the recirculated air option for the car's ventilation. Use the car's vents to bring in fresh outside air.
  - If possible, drive with the windows open to maximize the air flow.

- Avoid unnecessary contact with frequently touched surfaces such as door frame/handles, windows, seatbelt buckles, steering wheel, gearshift, signalling levers, and other vehicle parts before cleaning and disinfection.

a. **To and from work**

The following guidance is being provided for travel to and from work:

- **Private car travellers:** It is recommended that you travel alone, when this is not possible, travel with individuals from your own household.
    - Always wear a facial mask during each trip.
    - Immediately before and after each trip, wash hands with soap and water for at least 20 seconds or sanitize using an alcohol-based sanitizer.
    - Before and after each trip, clean/disinfect frequently touched surfaces in the vehicle.
    - Follow guidelines on maximum persons in a car. A 5 sitter can have maximum of 3 persons including the driver.

- **Public car travellers:** It is recommended that if traveling via public transport to observe all travel and personal rules such as;
    - Observing physical distancing. Follow guidelines on maximum persons in a car. A 14 sitter can have maximum of 7 persons including the driver.
    -
    - Wearing a facial mask at all times.
    - Avoid touching surfaces and
    - Immediately before and after each trip, wash hands with soap and water for at least 20 seconds or sanitize using an alcohol-based sanitizer after every trip.
- **Walking:** It is recommended that if walking to observe all travel and personal rules such as;
    - Wearing a mask at all times.
    - Maintaining social distancing of at least 1.5-2 meters from others.
    - Only walk close to people who live with you.

b. **To and from the community**
Follow all guidelines outlined on safe travel and those specific to the mode of transport as outlined above in addition to the following;
    - Projects are highly advised to use project/program vehicles while travelling to sites for work.
    - Employees traveling to the community for study activities should use a large enough vehicle to maintain 1.5 to 2 meters from each other to promote social distance. Use MOH and MOT guidelines on number of persons in a vehicle.

- Employees traveling to sites/community should be screened prior to and on return to the facility.
- Everyone inside the vehicle should wear a facial mask during each trip as it can reduce the spread of their own respiratory droplets to others.
- Before and after each trip, clean/disinfect frequently touched surfaces in the vehicle.
- Immediately before and after each trip, everyone should wash hands with soap and water for at least 20 seconds or sanitize using an alcohol-based sanitizer.
- All personnel should handle their own personal bags and belongings during loading and unloading.

10. What to do if a research staff member has symptoms of COVID and/or tests COVID positive

a. Assessing a staff member for signs and symptoms of COVID:
- All members of the research staff should be familiar with the signs and symptoms of COVID. These include, but are not limited to:
  - Fever or chills
  - Cough
  - Shortness of breath or difficulty breathing
  - Fatigue
  - Muscle or body aches
  - Headache
  - New loss of taste or smell
  - Sore throat
  - Congestion or runny nose
  - Nausea or vomiting
  - Diarrhea

- Consult websites such as the Kenya Ministry of Health (https://www.health.go.ke) or CDC (https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html) for up-to-date information about the signs and symptoms of COVID.
- Any staff member who develops signs or symptoms consistent with COVID should call the study coordinator. **The team member should <u>not</u> present to work in order to avoid potential exposure to others.** The study coordinator will determine whether COVID testing is needed and will update the study PIs about the situation within 24 hours.

b. Management of a team member tested for COVID:

- COVID testing is available at MTRH as well as other district hospitals in the region.
- If COVID testing is performed, the symptomatic staff member must self-quarantine until the results of the test are issued. He/she should seek medical attention for any concerning symptoms.
- If the COVID test is <u>negative</u>, the symptomatic staff member may return to work after 72 hours following resolution of his/her symptoms. He/she must adhere to strict infection control practices (i.e. mask, frequent handwashing) to avoid transmission of another non-COVID pathogen to others.
- If the COVID test is <u>positive</u>, the affected staff member must self-quarantine.
  o Instructions for self-quarantine are found at: https://www.health.go.ke/wp-content/uploads/2020/06/Home-Based-Isolation.pdf
  o The duration of self-quarantine should follow the guidance of the Kenya Ministry of Health and local officials. At the time of writing these guidelines recommend:

    Isolation should be maintained for at least FOURTEEN (14) days from the date the patient is assessed eligible for home-based isolation and care. The 14 day isolation period should be maintained even in the absence of, or after resolution of, symptoms or until advised by a HCW in the event that a patient continues to have symptoms beyond the fourteen (14) days.

- The affected staff member should also adhere to any repeat COVID testing (e.g. to document clearance of the virus) as instructed by MOH or other county or local officials.
- The research coordinator must immediately notify the following parties:
  o MTRH COVID response team (or other facility response team if the subject is not based at MTRH)
  o Study PIs
  o Cosmas Apaka and Yee Yee Kuhn
  o AMPATH Research Office

- The event <u>must</u> be reported to the regulatory bodies (IREC and Indiana University IRB) <u>within 5 business days following receipt of the positive test result</u>. The research coordinator and PIs should work together to complete the necessary IREC and IU IRB notification forms.

c. <u>**Management of close contacts of team member (i.e. index case) who is diagnosed with COVID**</u>

- Close contacts of index case: This is defined as someone who has been within 6 feet of an infected person for more than 15 minutes (cumulatively) over a 24 hour period. The time period of exposure to the index case includes 48 hr prior to and following the onset of symptoms.
- The study coordinator should speak with the index case to identify all close contacts meeting the above definition. This includes, but is not limited to, other members of the study team, facility staff, and study participants.
- Study staff who are close contacts should immediately begin self-quarantine for a period of 14 days from the date of their last exposure to the index case.
- Study staff who develop any symptoms consistent with COVID should be tested and managed as described for the index case above.
- Testing of close contacts who are asymptomatic should be considered between days 4 and 8 following the date of the last exposure to the index case or as instructed by local officials. Identifying asymptomatic cases could help facilitate any secondary contact tracing that may be needed. A negative COVID test during the self-quarantine period should not shorten the required 14 day quarantine duration.
- The research coordinator should work closely with the MTRH COVID Response Team to identify all close contacts of the index case, including study staff, facility staff, and research participants. The research coordinator should take direction from the MTRH COVID Response Team concerning whether, when and how to inform close contacts of their exposure to the index case.
- The PIs should work with the research coordinator to determine how the COVID event and self-quarantine of study personnel impacts the study procedures, and determine whether any modifications to the protocol or consent are needed.

References:

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9. Interim Guidance For Health and Safety Measures in Work Places in the Context of COVID-19, MOH Kenya, June 2020