

# Staff Health & Safety Guide – Fitness to Work

## Personal Care/Group/Residential Homes

### Work Restrictions for Ill Workers

If a worker has had a bout of an infectious illness, it is not always easy to know when to be at work or return to work. The following are general guidelines. In all cases, check with your manager. IF YOUR FACILITY IS ON OUTBREAK, there may be some special circumstances for when you can return to work e.g., self-isolation for COVID-19.

Infection	Restriction	Length of Restriction
Conjunctivitis	Restrict from direct resident care	Until eye discharge resolved
COVID-19	Exclude from facility	
Gastroenteritis incl. nausea, vomiting, and/or diarrhea	Restrict from direct resident care and food preparation	72 hr. <b>after</b> symptoms resolve or the person is deemed not contagious by a health professional
Hepatitis A	Restrict from direct resident care and food preparation	Until 1 week after onset of jaundice
Hepatitis B	None* - see note # 1	
Hepatitis C	None* - see note #1	
HIV	None* - see note #1	
Herpes simplex, mouth & face	Restrict from newborn care	Until lesions are dry
Viral respiratory infections, acute febrile infections (e.g., influenza, RSV, common cold)	Restrict from direct resident care	Until 5 days after onset of symptoms or 48 hr. after acute symptoms resolve whichever is sooner. See note #2
Measles	Exclude from facility	Until 7 days after onset of rash
Mumps	Exclude from facility	Until 9 days after onset of parotitis
Pediculosis	Restrict from direct resident care	Until treated
Pertussis	Exclude from facility	Until treated for 5 days
Rubella	Exclude from facility	Until 5 days after onset of rash
Staphylococcal skin infection	Restrict from direct resident care	Until treated for 24 hr.
Streptococcal infection, Group A	Restrict from direct resident care	Until treated for 24 hr.
Tuberculosis, active pulmonary	Exclude from facility	Until proven non-infectious
Varicella (chickenpox)	Exclude from facility	Until lesions are crusted
Zoster (shingles)	If lesions are covered, restrict from care of immunocompromised residents; If unable to cover / contain secretions from lesions, restrict from ALL resident care	Until lesions are crusted

**Notes** – 1. Care providers with these infections should avoid performing procedures considered to be at risk for transmission of blood from provider to resident.

2. If your symptoms are respiratory (cough, sneezing, runny nose, etc.) you should remain at home for AT LEAST 48 hours after you feel significantly improved. If you need to use an over-the-counter medication to manage symptoms, you are likely NOT well enough to be at work.

## Recommended Immunizations for Care Providers

There are a number of vaccine preventable illnesses that care providers may encounter depending on the workplace and the client population they serve. Care providers should check their employer's policies.

If care providers are uncertain about their personal immune status to any of these infections, they should make an appointment with the local Public Health nurse for assessment. Note: not all vaccines are publicly funded and the Public Health Nurse will advise.

Vaccine	Indications / Recommendations
Measles-mumps-rubella (MMR)	Two doses for adults born after 1970; adults born before 1970 are considered immune.
Polio	This vaccine is usually part of childhood vaccination programs; rarely do adults need to receive it.
Hepatitis B	Highly recommended for anyone who could be exposed to blood and body fluids in the workplace. Three dose series and serological lab test done 4 weeks after the last dose to assess immunity.
Varicella – zoster	Either documentation of two doses of vaccine or evidence that natural immunity occurred.
Influenza	Annual vaccination recommended especially for people working with the elderly or immune compromised.
Diphtheria – tetanus (Td)/tetanus – diphtheria – acellular pertussis (Tdap)	A repeat dose should be given every 10 years after the primary series; adults may be eligible to receive one dose Tdap
Pneumococcal	Adults aged 65 and over are eligible.
COVID-19	Vaccination recommended especially for people working with the elderly or immune compromised.