



Visit our COVID-19 Page Here

Dear Member:

CDC Updates Return to Work Criteria

On August 10, the Centers for Disease Control and Prevention (CDC) updated the [return to work criteria for healthcare professionals](#) (HCP) with the COVID-19 infection. A test-based strategy is no longer recommended (except as noted below) because, in the majority of cases, it results in excluding from work HCP who continue to shed detectable COVID-19 virus but are no longer infectious.

Return to work criteria for HCP with COVID-19 infection are broken down into two categories: symptom-based strategy and test-based strategy.

Symptom-based strategy for determining when HCP can return to work.

- HCP with mild to moderate illness who are not severely immunocompromised:
 - At least 10-day have passed since symptoms first appeared and
 - At least 24 hours have passed since last fever without the use of fever-reducing medications and
 - Symptoms (e.g., cough, shortness of breath) have improved

Note: HCP who are not severely immunocompromised and were asymptomatic throughout their infection may return to work when at least 10 days have passed since the date of their first positive viral diagnostic test.

- HCP with severe to critical illness or who are severely immunocompromised:
 - At least 10 days and up to 20 days have passed since symptoms first appeared and
 - At least 24 hours have passed since last fever without the use of fever-reducing medications and
 - Symptoms (e.g., cough, shortness of breath) have improved
 - Consider consultation with infection control experts

Notes: HCP who are severely immunocompromised but who were asymptomatic throughout their infection may return to work when at least 10 days and up to 20 days have passed since the date of their first positive viral diagnostic test.

Test-based strategy for determining when HCP can return to work. In some instances, test-based strategy could be considered to allow HCP to return to work earlier than if the symptom-based strategy were used. Many individuals will have prolonged viral shedding which limits the utility of test-based strategies. A test-based strategy could be considered for HCP (e.g., those who are severely immunocompromised) in consultation with local infectious disease experts if concerns exist for the HCP being infectious for more than 20 days.

Criteria for test-based strategy are:

- HCP who are symptomatic:
 - Resolution of fever without the use of fever-reducing medications and
 - Improvement of symptoms, and
 - Results are negative from at least two consecutive respiratory specimens collected ≥ 24 hours apart.

- HCP who are not symptomatic:
 - Results are negative from at least two consecutive respiratory specimens collected ≥24 hours apart.

Webinar: Navigating the World of Assistive Technology for People Living with Dementia

Are you caring for a person living with dementia or do you want to broaden your “toolbox” with strategies and solutions for someone living with dementia or Alzheimer's disease? Discover Assistive Technologies that can benefit people living with dementia. Experts from Georgia Tech will offer a free webinar on Thursday, August 27, 2020 2:00-3:00 PM ET. [Register here](#)

Participants will be able to:

- Define Assistive Technology
- Identify 3 core activities of their state Assistive Technology program
- List 3 Assistive Technology strategies to support people living with dementia
- Name 5 devices, hardware/software/apps to promote well-being for people living with dementia

PPE Suppliers

Identifying reliable personal protective equipment (PPE) suppliers during the COVID-19 pandemic has been extremely challenging for providers. AHCA/NCAL has vetted countless vendors and concluded that the best indicator of potential suppliers is members' experiences ordering and receiving supplies in this uncertain time. AHCA/NCAL has compiled a list of vendors that have successfully delivered PPE to members during the pandemic.

The [attached](#) list of suppliers does not reflect an endorsement by AHCA/NCAL, nor is it a seal of approval. Rather, member can use this as a resource as they consider their options for ordering and obtaining PPE when PPE is not available through their ordinary supply chain. Members should still ask questions and only place orders in quantities that they are comfortable with. PPE availability currently is changing daily for all suppliers, and FEMA allocation directives also can impact availability from some suppliers that are working with FEMA to distribute PPE to hotspots across the country. Current PPE demand far exceeds supply available for many suppliers, so a supplier may not have PPE available when you contact them. Ask when you should check back with them.

AHCA/NCAL members who have identified other PPE suppliers that have delivered quality PPE supplies (N95s, KN95s, 3-ply surgical face masks, face shields and medical use gloves and gowns) are encouraged to share that vendor information with AHCA/NCAL by emailing COVID19@ahca.org for evaluation.

Thank you for all you do to care for your residents and staff.

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