

Examples of Ebola Policies & Procedures that Some Companies Have Developed

Several AAOHN members agreed to share the Ebola policies, procedures and communications that they have put in place over the past few months. Some of these may be helpful as you review, revise or develop your employer's protocols to control and reduce the risk of contamination within your organization.

Note: The examples presented here are samples of what other occupational and environmental health nurses and their employers have done. They are not intended to provide specific medical, healthcare or legal advice. Information and recommendations about how to deal with this virus and how to protect workers and the public rapidly changes and this information may as rapidly become inconsistent with immediate and current recommended practice. Readers should consult with the [Centers for Disease Control & Prevention – The Premier Resource for Ebola prevention and control recommendations](#) and develop policies and procedures for your employer and its employees that are appropriate for the circumstance.

Example #2

Global Occupational Health Guidance Document

Managing a colleague suspected or confirmed to have Ebola virus disease

Scope:

This guidance is intended for use by Company Occupational Health staff at sites:

- Within countries that have an outbreak of [Ebola virus disease](#),
- That have colleagues who travel to countries where there is an outbreak of Ebola virus disease, or
- That are at risk through contact with at risk general public due to clinical trials

Background:

In outbreak settings, Ebola virus is typically first spread to humans after contact with infected wildlife and is then spread person-to-person through direct contact with body fluids e.g. blood, urine, sweat, semen, and breast milk. The incubation period is usually 8–10 days (range 2–21 days). Patients can transmit the virus while febrile and through later stages of disease, as well as postmortem. There is no transmission before they become symptomatic.

Case identification:

Early recognition is critical for infection control. Occupational Health staff should be alert for and arrange for evaluation of any colleague suspected of having EVD (see CDC [EVD case definition](#)):

- fever > 38.6°C or 101.5°F, and additional symptoms i.e. severe headache, muscle pain, vomiting, diarrhea, abdominal pain, or unexplained hemorrhage

AND

- risk factors in the 3 weeks preceding the onset of symptoms, i.e. contact with blood or other body fluids of a patient known to have or suspected to have EVD; residence in, or travel to an [area where EVD transmission is active](#); or direct handling of bats, rodents, or primates from disease-endemic areas.

Infection control precautions:

If a colleague phones the Occupational Health department to report that they have a fever Medical staff should:

- Advise the colleague not to come to work and to stay at home
- Assess their risk by careful questioning and
- Advise and support regarding any need to seek medical care.
- Occupational Health staff should also ensure that other staff e.g. Department Managers and Supervisors and Security are briefed not to allow colleagues to attend work if they have a fever and refer them to Occupational Health.

If a colleague is suspected or known to have Ebola virus disease and attends the site, Occupational Health staff should:

- **Isolate the employee**
- **Wear appropriate personal protective equipment** (gloves, gown, goggles, and face mask).
- **Restrict contact with other colleagues**
- **Avoid touching colleague to the extent possible**
- **Thorough hand washing before and after**
- **Implement environmental infection control measures:** cleaning and disinfection and safe handling of potentially contaminated materials.

See: CDC [Infection control guidance](#)

Reporting a suspected or confirmed case of EVD:

In addition to local regulatory reporting requirements Occupational Health staff should report any suspected or confirmed case of EVD in colleague or their dependents to the appropriate company official immediately of becoming aware of a case.

Arranging for appropriate medical care:

Occupational Health should ensure as reasonably practicable that colleagues suspected of having EVD access appropriate health care for assessment and investigation.

Occupational Health staff should make sure that they are aware of the nearest hospital that has the capability to manage cases of EBV e.g. an infectious diseases unit with isolation facilities and an

intensive care unit and know how to contact local health authorities should the need arise. Where appropriate care is not available locally either to investigate a suspected case or to manage a patient with EVD, site staff should contact the appropriate company official and local health authorities to determine appropriate transportation and care of the colleague.

Special consideration for expatriate colleagues and their dependents:

It is likely that expatriates will wish to be repatriated for treatment and to be near their wider family and friends. International evacuation of patients with Ebola or other Viral Hemorrhagic Fevers is highly complex, and may not be achievable. International evacuation should not be considered as feasible for patients with active clinical symptoms of Ebola. The appropriate company official should be consulted in this situation.

Return to work:

A colleague confirmed to have Ebola virus disease may return to work or travel unassisted to their home location provided that:

1. The Healthcare provider in charge of the care unit has declared them fit to leave hospital and
2. The colleague can provide a medical certificate stating that they no longer pose a risk to others and
3. They are fit to do so. The colleague may suffer from tiredness or fatigue for up to 2 months after the infection. Rehabilitation and e.g. phased return to work should be offered as part of normal case management and disability procedures.

See: [WHO protocol for the reintegration of patients](#)

Sources of information on Ebola virus:

- [Center for Communicable Diseases](#)
- [European Centre for Disease Prevention](#)
- [World Health Organization](#)