

COVID-19 Guidance

Fit for Work Screening Protocol

It is our shared responsibility to ensure workers are healthy at work to protect all AHS staff, patients, volunteers and visitors. To minimize the spread of COVID-19, daily fit for work screening is required for all staff, physicians, volunteers, students and contractors who will be in proximity to other workers, patients or the public. It is important for all workers to stay home when they are sick.

The approach is meant to meet operational needs as more staff return to our workplaces, minimize resource requirements, and support a transition towards a culture where our people stay home when they are sick. The strategy is built on a foundation of awareness, trust and shared responsibility.

This document refers to screening requirements for (1) [Continuing Care](#) (Hospice, Long Term Care, Designated Supportive Living and Congregate Living) Workplaces as set out by the Chief Medical Officer of Health and (2) [Non-Continuing Care](#) (all other AHS) Workplaces set out by the AHS Emergency Coordination Centre.

General Requirements

Each site's leadership is responsible to determine and document how the workplace will implement screening processes in a manner that meets screening requirements. Site leadership is also responsible to communicate to all staff, physicians, volunteers, students and contractors regarding the expectations of daily [Fit for Work](#) screening.

- Screening will be done in a manner that maintains [physical distancing](#) and avoids contact as much as possible.
- It is the responsibility of staff, physicians, volunteers, students and contractors to comply with the screening requirements established in their workplace.
- Screening will be done in a manner that treats people with respect and dignity, providing them with information so they fully understand the reason for the screening and the impact of attending work when not well.
- Where available, it is encouraged to complete the [Online Daily Fit for Work Screening Tool](#) before they arrive at their workplace. This will prevent those with COVID-19 risks from coming to our workplaces and potentially exposing others.
- Staff, physicians, volunteers, students or contractors who refuse to be screened will not be permitted to attend work as scheduled. An assessment will be made as to whether a staff member will be paid for a missed shift or not, in consultation with the operational manager and Human Resources.
- [Signage](#) is required to direct healthcare workers on how to complete screening and to notify patients that screening is occurring. Workplaces will be responsible for posting signage.
- To protect our seniors, in sites where continuing care services are in the same site as non-continuing care services, each site must adopt the continuing care requirements.

[Alberta Health](#) has outlined symptoms to be considered for COVID-19 testing. If healthcare workers have any additional symptoms which are new or a change from their usual symptoms, it is strongly advised they stay home and minimize contact with others and complete the online [Healthcare Worker Self-Assessment](#) tool to determine the need for testing and self-isolation. Staff at continuing care (hospice, long term care, designated supportive living and congregate living) workplaces will be screened for additional symptoms and criteria.

Screening Questionnaire

The primary method for the fit for work questionnaire is the [Online Daily Fit for Work Screening Tool](#):

- AHS staff and physicians with AHS account login credentials can access an online questionnaire tool – available at ahs.ca/fitforwork.
- The tool incorporates the required screening for Continuing Care (Hospice, Long Term Care, Designated Supportive Living and Congregate Living) Workplaces as well as Non-Continuing Care (all other AHS) Workplaces.
- Once completed, the questionnaire will present a status of “Fit for Work”, “Not Fit for Work – Reporting Symptoms”, “Not Fit for Work – Travel Risk”, or “Not Fit for Work – Close Contact Risk”

Note: Questionnaires must be completed within two hours of the start of a shift as status expires after two hours. If the status expires, the questionnaire can be taken again to produce a current status.

- The information in the online questionnaire is collected under the authority of FOIP section 33 (c) and will be used solely for the purposes of determining fitness for work during the COVID-19 pandemic.

For staff, physicians, volunteers, students and contractors who are unable to complete the [Online Daily Fit for Work Screening Tool](#), printable versions can also be found on the ahs.ca/fitforwork page:

- Standard staff - non-continuing care
- Standard visitors – acute care
- Staff working at continuing care
- Staff working at congregate living facilities licensed under MHSPA
- Visitors to continuing care

The retention of screening questionnaires is considered transitory after 14 days for both paper and electronic versions. If paper questionnaires are used: Completed questionnaires should be kept on-site for 14 days at which time they can be disposed of in a confidential manner. Storage of paper questionnaires should be in a secure location that is not accessible to the public and locked wherever possible.

Screening questions relate only to new symptoms or to worsening symptoms related to allergies, chronic or pre-existing conditions. Those with symptoms related to pre-existing conditions or allergies can still go to work.

When Screening Indicates Fit for Work

The worker should report to work. Workers should be conscious of their well-being throughout the day, and re-screen if they believe they are experiencing symptoms.

When Screening Indicates Not Fit for Work

When a healthcare worker is determined to be not fit for work, the next steps include:

- stay home or return home
- notify all appropriate managers/supervisors/medical staff leaders and follow any applicable absence processes for their role
- complete the online [Healthcare Worker Self-Assessment](#) tool to determine COVID-19 testing and self-isolation requirements
- refer to the [FAQs for Staff](#) and the [Return to Work Decision Chart](#)

Managers are to refer to the e-People COVID-19 Time Reporting Scenarios for appropriate coding. The decision to replace the shift is the manager's responsibility as per standard staffing protocols.

Screening at Continuing Care (Hospice, Long Term Care, Designated Supportive Living and Congregate Living) Workplaces

Chief Medical Officer of Health [Orders](#), currently govern screening requirements for all staff and visitors of continuing care (hospice, long term care, designated supportive living and congregate living) workplaces.

Screening protocols for continuing care must follow the CMOH [Orders](#), currently order [32-2020](#). Refer to this order to implement additional screening requirements at continuing care workplaces. Key highlights include:

- everyone entering the site must be screened each time they enter. Staff are also required to complete self-checks twice daily.
- required temperature check for all staff and essential visitors
- unique questionnaire specific to continuing care settings

These requirements are included for staff in the [Online Daily Fit for Work Screening Tool](#) and in the paper questionnaires for [staff working at continuing care](#) and [visitors to continuing care](#) facilities.

Screening at Non-Continuing Care (all other AHS) Workplaces

Site leadership is required to determine a workplace approach and document the process to meet screening requirements described in this document. The approach is meant to create consistency across all workplaces and allow for flexibility to meet local needs. It is intended to foster a culture where our people stay home when sick. Setting expectations, awareness, trust and shared responsibility are key elements.

A [Fit for Work Screening Implementation Guide](#) is available to assist leadership in planning and executing the Fit for Work screening plan. A variety of approaches are available to meet local workplace needs. [Requirements for Continuing Care](#) (long-term care/designated support living/congregated living) are not included in the guide.

In addition to [General Requirements](#), the following are required for non-continuing care workplaces:

- All staff, physicians, volunteers, students and contractors are required to complete screening before starting a shift by responding to a set of [standard questions](#) to assess health risk for COVID-19.
- Utilize the [Online Daily Fit for Work Screening Tool](#) as the primary means of screening. Paper versions of the screening tool are to be used only when staff are unable to use the online tool.
- [Signage](#) and regular communications are used to prompt and re-inforce compliance with the process.
- Validation methods must be in place to encourage staff, physicians, volunteers and contractor compliance. They are meant to promote compliance through shared responsibility and not meant to be an 'individual by individual' validation before a worker starts each shift.
 - The strategy for validation must be documented, using the [Fit for Work Screening Implementation Guide](#) or similar document.
 - When carrying out validation of individuals' compliance, results of an individual status (fit or not) do NOT need to be recorded.
- It is not required to:

- Provide front entrance screening for workers. Site leadership may choose to do so based on operational needs.
- Collect or store an individuals' documentation for Fit for Work Screening, although a paper questionnaire is available and may be used in some circumstances as outlined in the [General Requirements](#).
- Complete temperature checks.

Volunteers and Contractors

- The department responsible for a contractor or that deploys volunteers in the site must ensure the contractors and volunteers meet the screening requirements.
- Departments may find their site's visitor screening process helps to achieve contractor and volunteer screening.

Visitors

Visitors are not included in scope of this protocol. Please see the following guidance for visitor screening requirements:

- All visitors in acute care outpatient and in-patient settings must adhere to the requirements outlined in the [Information for People Visiting Residents & Patients](#) and the [AHS COVID-19 Visitor Guide](#).
- Continuing Care must follow the [Orders](#) set out by CMOH and updated in the [AHS COVID-19 Visitor Guide](#). Visit the [Information for People Visiting Residents & Patients](#) for more information.

Questions?

- For more information about the online questionnaire tool, see ahs.ca/fitforwork.
- For login issues with the online tool, contact the [IT Service Desk](#) at 1-877-311-4300
- For privacy concerns or questions, contact Privacy at 1-877-476-9874.
- For payroll or other HR-related questions, contact the [HR Contact Centre](#) at 1-877-511-4455.
- For questions related to the screening protocol, contact HRCOVID@ahs.ca.