City
Of
Milwaukee

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CITY OF MILWAUKEE POLICY – DEPARTMENT OF EMPLOYEE RELATIONS EMPLOYMENT POLICY 2009-2010 INFLUENZA SEASON

Given the continued and unmitigated transmission of Novel H1N1 Influenza Virus ("Swine Flu") globally and in anticipation of the upcoming seasonal influenza epidemic in the Northern Hemisphere, the U.S. Centers for Disease Control & Prevention (CDC) is recommending that employers, including the City of Milwaukee, consider implementing appropriate measures to limit or slow any further spread of any flu virus circulating in our communities, schools, and workplaces during the 2009-2010 Influenza Season. This Policy specifically addresses employment considerations in relation to absences from work and the exclusion of City employees from employment based on current flu conditions, including both seasonal flu and H1N1 flu.

NOTE: In this document, the terms "novel H1N1" and " H1N1 Flu" are used interchangeably. This policy is subject to change at the recommendation of the City of Milwaukee Health Department based on new information or changes in the severity or transmission of seasonal or H1N1 influenza within the community or changes in recommendations from federal or state public health authorities.

POLICY STATEMENT

It is the policy of the City of Milwaukee to generally adhere to the guidance provided by the U.S. Centers for Disease Control and Prevention (CDC) to decrease the spread of seasonal flu and H1N1 flu in the workplace and to help maintain business continuity throughout the 2009-2010 flu season. The City of Milwaukee recognizes its responsibility in protecting the health and safety of its employees as well as limiting the negative impact of influenza outbreaks in the workplace and within the general community.

This policy intends to reduce transmission among City employees, to help protect people who are at increased risk of influenza related complications from getting infected with influenza, and to maintain and manage municipal operations during peak seasonal and H1N1 influenza transmission within the community. The following measures are intended to achieve both worker protection and continuity of City operations:

- All well (non-ill) employees are expected to report to work as assigned.
- Employees with flu-like symptoms should stay home and follow the return to work protocol described below.
- Employees who appear to have a flu-like illness upon arrival to work or become sick during the work day should be promptly separated from others and sent home.

Note: *Wisconsin State Statutes authorize the Commissioner of Health or his designee to adopt all measures necessary to prevent, suppress and control communicable diseases. The Rules of the Board of the City Service Commissioners further authorize and permit the Commissioner of Health at his/her discretion to direct that any employee or group of employees whose work is such as to expose the employee or employees to danger of contracting a contagious disease to undergo medical examination as necessary for the protection of the interests of the service and for the protection of other employees or the public.*

Definition of Healthcare Worker

Health Care Workers, for purposes of this policy, include Public Health Nurses, Clinic Assistants, Laboratory Staff, Social Workers, Fire Department personnel responding to medical service calls, and others who work directly with patients or in clinical settings.

Definition of "exposure" or "contact" to novel H1N1

For the purposes of this policy, "exposure" or "contact" means "within 6 feet for more than several minutes to a person with known, probable, or suspected novel H1N1 influenza." This definition expressly excludes brief "in-passing" contact, even if within the 6-foot radius. At the same time, this definition includes contact both within the workplace and within community settings (home, etc.).

Definition of novel H1N1 influenza symptoms

According to the US Centers for Disease Control and Prevention (CDC), novel H1N1 flu symptoms means a *new onset of illness* (during this outbreak) of fever (defined as a temperature of 100°F [37.8°C] or greater) accompanied by either cough or sore throat.

EXPECTATIONS OF ALL EMPLOYEES

All employees – regardless of symptoms – are expected to take action to help prevent the spread of H1N1 by covering their mouths and noses when coughing or sneezing, by frequent hand washing, including after coughing or sneezing, and by avoiding contact with those who are ill (preferably 6 feet or more).

EMPLOYEES WITH SYMPTOMS: EXCLUSION FROM WORK / RETURN TO WORK

An important way to reduce the spread of both seasonal and H1N1 flu is to keep sick people away from those who are not sick. Employees who have a fever and either cough or sore throat should stay home and not report to work. An employee who reports to work will be excluded from employment if he/she is experiencing symptoms consistent with seasonal or H1N1 flu (as defined above), or is diagnosed by a healthcare provider as being infected with seasonal or H1N1 flu.

In general, employees with flu-like symptoms (as defined above) will be directed to stay home and will not be allowed to return to work until the following have been satisfied:

1. General staff members (non-healthcare-workers) – may return to work after the fever has resolved for at least 24 hours *without the use of anti-fever medications* (such as acetaminophen, aspirin, ibuprofen, naproxen, etc). Note: persistence of cough or sore throat after fever has completely resolved does not necessarily require continued exclusion from the workplace; such a situation should be managed as with any other "routine" viral illness that might cause similar symptoms.

2. Symptomatic healthcare workers – one of the following must be met prior to return to work:
   a. a public health approved test for novel H1N1 demonstrates a negative result, or
   b. for 7 days from symptom onset or until 24 hours after the resolution of fever, whichever is longer.

EMPLOYEES WITHOUT SYMPTOMS WHO HAVE BEEN EXPOSED: EXCLUSION FROM WORK / RETURN TO WORK

Management of exposed but asymptomatic employees depends in part on whether or not they are healthcare workers.

1. Asymptomatic general staff members (non-healthcare-workers) who are a known contact to a confirmed or probable case, may continue to work as long as they have not developed a fever accompanied by either cough or sore throat. If such symptoms develop, employees must follow the "Employees with symptoms" section above.

2. Asymptomatic healthcare workers who are known contacts to confirmed or probable cases, but who either a) used appropriate N-95 respirator protection during the contact, or b) have proven immunity either via

documented vaccination against novel H1N1 at least 7 days prior to exposure or via documented PCR-positive history of prior infection with novel H1N1 at least 7 days prior to exposure, may continue to work as long as they do not have a fever accompanied by either cough or sore throat. If such symptoms occur, the "Employees with symptoms" section above should be followed.

3. Asymptomatic healthcare workers who have had direct contact to a confirmed or probable case and who have no prior immunity (see #2 above) and were not using an N-95 respirator during the exposure, must either:

   a. begin, continue, and complete an appropriate course of antiviral prophylaxis (but may not remain at work unless they continue and complete that course of antiviral therapy, which is typically at least 10 days duration), or

   b. (if not taking antiviral prophylaxis) be excluded from contact with high-risk individuals in clinical settings until 7 days have elapsed since the last exposure, assuming no influenza-like symptoms have developed in the meantime. For the purposes of novel H1N1 influenza, high-risk individuals include i) children under 5 years old, ii) pregnant women, and iii) people ages 5-64 who have certain underlying chronic medical conditions such as pulmonary (e.g., asthma), cardiovascular, metabolic (e.g., diabetes), or immune compromise. This exclusion can be accomplished by reassigning the employee to a non-patient-care or low-risk-patient-only setting, or, if reassignment is not possible, by excluding the employee from the workplace during this period.

EMPLOYMENT CONSIDERATIONS

ADA

The ADA provides limitations as to when and how employers may require medical examinations or request disability-related information from applicants and employees. These limitations as well as the confidentiality provisions of the Act apply regardless of whether the employee has a disability or not.

Although it is unlikely that H1N1 would be considered a "disability" under the ADA , some individuals with disabilities may be at risk of experiencing severe complications from the virus. These individuals may request work accommodations in an effort to minimize their exposure to the flu. In response to such requests, departments should undertake the same analysis as they would in response to any request for an accommodation.

The CDC has recommended that employers consider alternative work environments for employees at higher risk for complications. Supervisors should not, without a request from an employee for an accommodation, attempt to impose any changes or restrictions on an employee's work because of the belief that employee may be at risk. Doing so could potentially expose the department to a claim of discrimination based upon a perceived disability.

CARING FOR FAMILY MEMBERS

While sick leave benefits are not available to employees to care for household members who have flu-like symptoms, vacation or comp-time leave may be scheduled and used per departmental regulations and policies. Departments must carefully consider that employees with school-aged children may need to stay home to care for their children. In addition, time without pay may be granted at departmental discretion to employees who have exhausted other leave balances.

FMLA

Employees who are sick or whose family members are sick may be entitled to leave under the Family and Medical Leave Act (FMLA) under certain circumstances. Medical reasons associated with the flu where complications arise that create a serious health condition as defined by the FMLA may qualify as protected leave. Employees are encouraged to consult with their Personnel/Payroll representatives to assess whether leave under FMLA for their own serious health condition or that of a family member is available.

FLSA

For FLSA exempt employees, time away from work can be unpaid as long as it is in full-day increments if it is voluntary and initiated by the exempt employee. For time off mandated by the City, the time away can be unpaid only in full-pay week increments.

LEAVE BENEFITS

Employees who are excluded from employment under this policy or who are simply too ill to report to work will be eligible for paid sick leave benefits in accordance with Chapter 350-37 of the Milwaukee Code of Ordinances and the applicable provisions of collective bargaining agreements. New employees will be able to use accrued sick leave or vacation hours during the first six months of employment for absences under this policy.

MEDICAL CONSULTATION AND MEDICAL CERTIFICATION REQUIREMENT

Employees who are absent due to flu-like symptoms are encouraged to consult with their health care provider by telephone. Employees who are pregnant or who suffer from chronic medical conditions (such as asthma, heart disease, or diabetes) and who are considered to be at a higher risk for flu complications are urged to seek medical consultation immediately for possible treatment with prescription antiviral medications. When possible, City agencies should consider changing work duties, work location, or work schedules for employees who are at high risk for flu complications (like pregnant women and people with certain chronic medical conditions like heart disease, diabetes and asthma) to reduce the number of exposures to people that may have the flu.

Understanding that during this influenza season healthcare resources may be overwhelmed and that it may be difficult for employees to get appointments with their doctors, departments may (*instead of shall*) require a medical certification requirement for absences under this policy that extend beyond three consecutive work days. This provision is limited to absences stemming from flu-like symptoms.

SICK LEAVE CONTROL POLICIES

Absences stemming from this policy shall not be counted as occurrences under Departmental Sick Leave Control Policies. However, stay at home regulations, home visiting provisions and sick leave incentive requirements will still apply.

SOCIAL DISTANCING MEASURES

Social distancing measures are measures intended to reduce the spread of a pandemic influenza viruses such as H1N1 flu by reducing the level of direct contact between individuals during periods of rapid transmission of disease within a community and limiting direct contact with individuals that are ill will flu-like symptoms. Some examples of business social distancing measures include: minimization of face-to-face meetings, limiting the number of group meetings and conferences, staggering work shift hours, creating physical barriers between individuals, spacing workers farther apart in the workplace, and offering telework options. City departments should review plans for implementing and expanding social distancing measures in their respective agencies at the recommendation of the Milwaukee Health Department.

USE OF FACEMASKS DURING CITY WORKSHIFTS

The routine use of facemasks (surgical masks, dust masks, etc.) by City employees during the workshift in any Department for purposes of reducing exposure or the spread of seasonal or H1N1 flu is not being recommended by the Milwaukee Health Department at this time. Respiratory protection including the use of N-95 respirators by City healthcare workers previously defined in this policy and who come into direct contact with patients or work in clinical settings is being recommended to reduce potential routine and repeated exposure to persons with flu-like symptoms. Use of N-95 respiratory protection requires medical evaluation and fit-testing of individuals prior to the wearing per State and Federal Occupational Safety and Health regulations.