**Actions to take for UQ staff and students who test COVID-19 positive or are a close contact**

This document will be updated with further revisions of the public health direction (Management of Diagnosed Cases of COVID-19 and Close Contacts Direction (No. 5) as they are released. Staff and students should not solely rely on UQ summaries and must remain up to date with changes to Public Health Directions.

Highlighted yellow text are the changes from the previous version (19 July 2022)

### 1. Isolation and Management

<table>
<thead>
<tr>
<th><strong>COVID-19 Diagnosed Person</strong></th>
<th><strong>Exposure to COVID-19 diagnosed person – Close Contact</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Immediately upon being informed of a positive COVID-19 test result (i.e. a positive PCR test or a positive Rapid Antigen Test (RAT)), isolate at their isolation premises for a period of 5 full days from the date of undertaking the test (day 0) or as otherwise directed by an emergency officer (public health). A positive RAT should be registered within 14 days through this link - <a href="https://www.qld.gov.au/rat-positive">https://www.qld.gov.au/rat-positive</a> If a person has any COVID-19 symptoms – assume COVID-19, remain at their isolation premises and get tested as soon as possible. A previously diagnosed person who is not immunocompromised and who does not have symptoms consistent with COVID-19, does not become a close contact of another person within the same household if the household member become a diagnosed person within 28 days of the originally diagnosed person completing isolation. If COVID-19 symptoms appear again and it is more than 28 days since the person had COVID-19 and completed isolation, the person must get tested. If it is a positive result, then the person is considered a diagnosed person for a new case of COVID-19 and must complete 5 full days of isolation and follow post-isolation requirements (see below).</td>
<td>A diagnosed person must inform their household and household like contacts that each household member is considered a close contact. Close contacts do not have to isolate provided they do not have any symptoms and they: • wear a mask outside of home for 5 days; • do not visit any vulnerable facility or high-risk settings (hospitals, residential aged care facilities, disability accommodation services, corrective services facilities and detention centres) for 5 days (except for healthcare workers including students on placement); and • let their employer know they are a close contact, and work or study from home if possible. If the close contact has symptoms or develops symptoms, they must immediately have a COVID-19 test and if: • A positive result is returned the person must isolate as a diagnosed person. • If a negative result is returned, they must remain in quarantine until symptoms resolve. A close contact must follow the <a href="https://www.qld.gov.au/coronavirus">Guideline for Close Contacts</a> approved by the Chief Health Officer. If the person has recovered from COVID-19 in the last 28 days and develop respiratory symptoms, the Chief Health Officer has recommended that they stay at home until the symptoms resolve. They do not need testing unless advised to do so by their medical practitioner. Employees (including Students on placement) in vulnerable facilities or high-risk settings may continue to work if:</td>
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Monday 12 September 2022
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<tr>
<th>Release from isolation</th>
<th>A diagnosed person may leave isolation at the later of:</th>
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<td>• 5 full days after undertaking the test if the person has no fever or acute respiratory symptoms and a direction to isolate has not been given by Public Health, OR • When fever or acute respiratory symptoms have resolved, if the diagnosed person has symptoms on Day 5 of isolation, OR • at the time provided in the direction, if a direction has been given to the person under section 362H of the Public Health Act 2005</td>
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<tr>
<td>A diagnosed person does not need another COVID-19 test to end their isolation period.</td>
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<th>Post isolation requirements</th>
<th>A diagnosed person must for 5 days after the end of isolation:</th>
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<td>• wear a face mask, at all times outside the home, including outdoors when unable to remain physically distant from persons other than household members. • wash their hands regularly, and • not enter and remain in a vulnerable facility or high-risk setting (e.g., hospital, aged care facility, shared disability accommodation service and detention centres) unless requiring medical care or permitted to enter as an employee of the vulnerable facility and high-risk setting, or where permitted to enter the vulnerable facility and high risk setting under another public health direction. • Employees in hospitals, residential aged care facilities; or shared disability accommodation services, cannot return</td>
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</table>

- They remain without symptoms consistent with COVID-19
- Complies with the vaccination requirement
- Wears a surgical face mask or greater PPE as required
- Takes a COVID-19 test and receives a negative test result on the day of their first shift and every second day thereafter while they are working and are a close contact.

Although, be aware that some placement providers (i.e. Oral Health, Metro North at Herston) are NOT accepting placement students who are deemed close contacts until after day 8 (negative RAT day 6); the person must discuss with their local placement managers regarding local placement requirements.
to these vulnerable facilities as a worker until 7 days have passed since the COVID-19 test date.

NB – An employee includes a student undertaking an educational placement.

In the 28 days post isolation:

- If during this time, COVID-19 symptoms appear, re-testing is not required and the person is not subject to isolation requirements.
- If someone else in the household tests positive for COVID-19, you are not considered a close contact, and therefore are not required to be tested or to quarantine.
- If a person is immunocompromised and gets COVID-19 symptoms during this time, they should seek medical advice, as COVID-19 reinfection may be more likely.

For more information see Qld government Advice 'After Having COVID-19'.

2. Required action to take

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<td><strong>Staff members:</strong> A diagnosed staff member is to notify their supervisor or designated contact as soon as possible – apply for sick leave. If at work – they must don a mask and leave work immediately and travel (see definition) as directly as practicable to isolate at the isolation premises. Supervisor or in the case of a report from students, the relevant staff member, is to notify other staff and students (e.g., tutors, persons involved in small group work etc) in the immediate area with permission from the diagnosed person. Permission is not required if the person is de-identified. If COVID positive person is well enough and able to, discuss working from home arrangements. If a staff member is working in a vulnerable facility or high-risk setting, some of these facilities may institute different local protocols. Therefore, they must notify the Clinical Unit immediately upon being deemed a close contact or upon returning from international travel so they can provide the staff member with site specific advice prior to returning to the Clinical Unit.</td>
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<tr>
<td><strong>Exposure to COVID-19 diagnosed person – Close Contact</strong> Staff Members: If a person is at work, is asymptomatic (with no symptoms) and they have been deemed to be a close contact, they are to notify their supervisor or designated contact and must follow the requirements outlined above in “Isolation and testing”. If a staff member is working in a vulnerable facility or high-risk setting, some of these facilities may institute different local protocols. Therefore, they must notify the Clinical Unit immediately upon being deemed a close contact or upon returning from international travel so they can provide the staff member with site specific advice prior to returning to the Clinical Unit.</td>
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Students: If on campus, don a mask and leave the campus immediately, travel (see definition) as directly as practicable to isolate at the isolation premises, notify the lecturer or course coordinator who will notify others that may have been in close contact with a diagnosed case (see above). If the student is going to miss compulsory learning activities or assessment items, notify the course coordinator or apply for an extension in the usual way.

If on placement, advise the WIL Placement Coordinator or School/Clinical Unit, and the placement supervisor.

Some vulnerable facilities may institute different local protocols. Therefore, they must notify the Clinical Unit immediately upon being deemed a diagnosed person or upon returning from international travel so they can provide the person with site specific advice prior to returning to the Clinical Unit or clinical placement.

Cleaning precautions
- Deep cleans are no longer required.
- If a person has COVID-like symptoms at work a routine clean is all that is required with household grade products. P&F do not need to be called to carry out the clean.
- If a person has no symptoms at work but is deemed to be a close contact – no additional cleaning required.

Definitions:

Close contact means a person who is a household member at the time the diagnosed person undertakes the COVID-19 test that produced a positive test result, or a household-like contact of a diagnosed person. This does not apply to work situations as it specifically relates to accommodation situations.

Household means, except in exceptional circumstances determined by the Chief Health Officer or delegate, persons who ordinarily reside at the same premises or place of accommodation as the diagnosed person, and who are residing at the premises or place of accommodation at relevant time for determining quarantine. E.g. members of a family that live in the same house are a household. A group of unrelated people that share a house is a household.

Household-like contact means, except in exceptional circumstances determined by the Chief Health Officer, a person who has spent more than four hours with the diagnosed person in a house or other place of accommodation, such as a residential aged care facility, disability accommodation, hospital or similar setting, unless the person has been in a separate part of the house, place of accommodation, that has a separate point of entry, no shared common areas, where the person does not share that area for more than four hours, and the person has no contact or interaction with the diagnosed person for more than four hours. E.g., a person in a self-contained unit with a separate point of entry and access to shared common areas for less than four hours is not a household-like contact of a diagnosed person.

Isolation premises for a diagnosed person means:

a. their home, where their home is a safe driving distance from where the diagnosed person is informed of their positive COVID-19 test result; or
b. their place of accommodation, or other premises at which the diagnosed person can comply with the isolation requirements; or
c. another *nominated premises*, including as otherwise directed by an *emergency officer (public health)*; or

d. a part of any of the *premises* identified in sub-paragraphs (a) to (c) where only that part of the *premises* is used for *isolation*.

**Travel** to be used by Diagnosed Persons:

a. private transport; or
b. ambulance service; or
c. transport arranged by government authority; or
d. endorsed transport provider operating in accordance with an endorsed transport plan.

*NB: a diagnosed person may not travel by commercial or charter air travel.*