<table>
<thead>
<tr>
<th>Ref: GD:08:15</th>
<th>Derogation for the Return to Work of Healthcare Workers (HCW) who are Essential for Critical Services</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Issue date:</strong></td>
<td>22/03/2020</td>
</tr>
<tr>
<td><strong>Author(s):</strong></td>
<td>Workplace Health &amp; Wellbeing Unit</td>
</tr>
<tr>
<td><strong>Consultation With:</strong></td>
<td>Health Protection Surveillance Centre</td>
</tr>
<tr>
<td><strong>Responsibility for Implementation:</strong></td>
<td>Healthcare Services Management</td>
</tr>
</tbody>
</table>
Updates in version 15:

<table>
<thead>
<tr>
<th>Section</th>
<th>Updates</th>
</tr>
</thead>
</table>
| 3.2, 3.3, 3.6, 3.10 | Updated with advice regarding self-isolation and restricted movement post travel from countries with SARS-CoV-2 variants with multiple spike protein mutations  
Added ‘self-isolation’  
Specified those travelling from these countries cannot be derogated |
| 4         | New section - Impact of COVID-19 Vaccination on Derogation               |

Appendix 1: Rewed 4 & 5, ‘Advice for HCWs’ column  
Added ‘if not self-isolating’ to section 8 – ‘Derogation from Senior Mgt as ‘Essential’ HCW’ column

Appendix 3: Specified ‘HCWs travelling from countries that require self-isolation on arrival, due to SARS-CoV-2 variants with multiple spike protein mutations may NOT be considered for derogation’

Appendices 2 & 3: Added hyperlinks to restricted movement and self-isolation on forms

Appendix 4: Added ‘sample’ to title

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1. Introduction

This document refers to HCWs who are restricting their movements due to, for example, close contact with a COVID-19 case and who have been identified as essential to critical service needs. It also refers to ‘essential’ HCWs entering the Island of Ireland.

Many areas are experiencing a shortage of HCWs as a result of COVID-19 and the requirement for HCW to restrict movements. This measure is in place to mitigate the risks in the direct provision of services for patient in critical areas within services while also ensuring on-going staff safety.

Given the on-going risk of infection, it is appropriate that senior management are the decision makers regarding the need to derogate a HCW, following risk assessment.

Specifically for HCW’s who are close contacts of Household cases, derogation must only be used in exceptional circumstances given the inherent risks. This decision to derogate must be escalated to the Office of the National Director of Acute Operations or the Office of the National Director of Community Operations for final approval.

2. Process for Derogation of HCWs on Restricted Movement

2.1. The Healthcare Workers (HCWs) who may receive a derogation to return to work on monitoring are outlined in Appendix 1.

2.2. Senior managers should ensure the following process as per checklists – Appendices 2 & 3.
   - A detailed local risk assessment is to be undertaken in relation to the risk to patient safety due to absences of essential HCWs. This process should include an assessment of available personnel who can be redeployed within the service.
   - All efforts have been made to recruit alternative HCWs with the necessary skills.

2.3. If, despite these actions, an area cannot be staffed safely or a critical skill set to provide critical/essential services is unavailable, then derogation from senior management may be given to HCW from the identified critical services to return to the workplace and Occupational Health will be notified.

2.4. For workplace close contact HCWs, consideration must be given to the fact that, if unprotected close contact involved aerosol generating procedures, then the HCW would have a higher risk of exposure to COVID-19. HCWs whose contact did not involve AGPs should be returned first where possible.

2.5. For workplace close contact HCWs the senior manager needs to carry out a risk assessment, to identify the level of risk, which may be higher due to AGP exposure or other high risk exposures, such as multiple exposures in a cluster. The control measures to manage this risk should be outlined for all relevant HCWs and local risk identification and relevant control measures must be considered. See Appendix 4–Risk Assessment with possible control measures.

2.6. HCWs may only be derogated if they are a close contact of a suspected or confirmed case in their home (household contacts) in very exceptional circumstances and only where staffing levels are severely impacted. Approval from these derogations must be received from the Office of the National Director of Acute Operations or the Office of the National Director of Community Operations as appropriate and the name of the approver recorded on the ‘Derogation Checklist for Senior Manager’ – Appendix 2. Household contacts are defined in the ‘National Interim Guidelines for Public Health management of contacts of cases of COVID-19’ as people ‘living or sleeping in the same home, individuals in shared accommodation sharing kitchen or bathroom facilities and sexual partners’.
2.7. All derogated HCWs must have a negative test immediately prior to returning to the workplace. For example, if immediate return is required, then Day 0 testing must be carried out. For close contacts who are derogated, testing will also be carried out on Day 5 and Day 10 as per national guidance. The derogation is no longer required following confirmation of a negative day 10 PCR test.

2.8. In the event a derogation is made, the HCW will be actively monitored twice daily by their line manager/designate (to include temperature check, which must be < 37.5°C), once prior to starting their shift and at one point during their shift.

2.9. Occupational Health must be informed of HCWs requiring active monitoring only. Daily active monitoring will also be carried out by Occupational Health for these HCWs, usually via daily text message system.

2.10. HCWs who had symptoms, but did not fit the criteria of a suspect case, were not tested and are now at least 48 hours symptom free, may return to work without derogation. These HCWs can return to work on while self-monitoring for symptoms. The manager must advise them of this requirement prior to their return. There is no requirement to inform Occupational Health.

2.11. Derogated HCWs requiring 'Active Monitoring’ must be issued with leaflets for ‘Essential Healthcare Worker on Active Monitoring’ available at https://www.hse.ie/eng/staff/workplace-health-and-wellbeing-unit/covid-19-guidance/. All HCWs will be under strict instructions from their manager to self-isolate and follow OH guidance for testing should they become symptomatic.

2.12. If asymptomatic HCWs are tested and the results are ‘indeterminate’, the HCW can remain at work, if continues to be asymptomatic, but urgent retest may be arranged if appropriate. This decision lies with the clinician who ordered the test. If a retest is clinically required then twice daily active monitoring by the HCWs manager is required. This does not require derogation or risk assessment.

3. Derogation by Senior Management Following Entry to the Island of Ireland


3.2. Specific advice regarding self-isolation and restricted movement post travel from countries with ‘SARS-CoV-2 variants with multiple spike protein mutations observed’ must be adhered to. Currently, these are South Africa and Brazil. See https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/sars-cov-2variants/ for details.

3.3. HCWs who are required to restrict movement or self-isolate following travel cannot return to the workplace.

3.4. Restricted movement will not be required, for HCWs travelling from ‘Green List Countries’. These HCWs do not require derogation to work. Information on Green List Countries is available at https://www.ecdc.europa.eu/en/covid-19/situation-updates/weekly-maps-coordinated-restriction-free-movement

3.5. However if these HCWs have worked in healthcare within 14 days prior to entering the island of Ireland, they must complete the ‘Covid 19 Testing Protocol for HCWs Moving to a Different Service’ - https://www.hse.ie/eng/staff/workplace-health-and-wellbeing-unit/covid-19-guidance/

3.6. HSE HCWs travelling from all other countries MUST remain out of the workplace for 14 days. These HCWs should otherwise adhere to government guidelines for restricted movement or self isolation following travel specific to that country – See https://www.gov.ie/en/publication/b4020-travelling-to-ireland-during-the-covid-19-pandemic/
3.7. If a HCW has travelled to a non-green-list country for ‘imperative family or business reasons’ (as per https://www.gov.ie/en/publication/8318d-eu-council-recommendation-and-travel-for-an-essential-purpose/), they must adhere to Government guidelines re restricted movement, self isolation and testing.

3.8. If a HCW, who is required to restrict movement, travels to Ireland for essential work and this expertise is not available locally, Senior Management may derogate this worker to work within the service, with twice daily active monitoring by the line manager, for the duration of the period of restricted movement.

3.9. This derogation can be applied to
- New-entry HCW coming from outside the island of Ireland with specialist expertise that is critical to services
- Visiting HCW providing a specific essential service.
- Existing HCW who travelled to provide an essential service outside the island of Ireland and is critical to services

3.10. Those travelling from countries with additional restrictions, due to SARS-CoV-2 variants with multiple spike protein mutations, and who are required to self-isolate on entry to the country cannot be derogated during the period of self isolation.

3.11. Where derogation is allowed the Senior Manager must complete the ‘Derogation Checklist for HCW Entering the Island of Ireland’ – see Appendix 3,

3.12. Occupational Health must be informed by the line manager. Daily active monitoring will also be carried out by Occupational Health for these HCWs, usually via daily text message system.

3.13. The HCW will need to follow public health advice regarding restricted movement when not conducting their work.

4. Impact of COVID-19 Vaccination on Derogation

4.1. There is evidence that the COVID-19 vaccines are efficacious in preventing symptomatic infection but there is an absence of clear evidence regarding onward transmission.

4.2. Healthcare workers who are close contacts and have completed the full COVID-19 vaccination course and the vaccine-specific time period to achieve full immunity (as per the licensed indications) can be considered for derogation from restricted movements, in preference over other HCWs.

4.3. Currently, this is limited to those vaccinated within the two months from when vaccine immunity is reached, given the current maximum follow-up data for the licensed vaccines.

4.4. Eligibility for derogation may still only be considered for healthcare workers who have been identified as essential to maintaining critical services and following a risk-based assessment by senior management.

4.5. The process of testing and active monitoring is unchanged as per section 2.
5. References/Useful Links:


## 6. Appendix 1 – Healthcare Workers Considered for Derogation

<table>
<thead>
<tr>
<th>Type</th>
<th>Status</th>
<th>Advice for HCW</th>
<th>Derogation from Senior Mgt as ‘Essential’ HCW</th>
<th>Monitoring required following derogation*</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Symptomatic or Asymptomatic HCWS with a Positive COVID 19 Test Result.</td>
<td>Must self-isolate 10 days from the onset of their symptoms or the date of test. If asymptomatic at time of test and symptoms develop during 10 days self-isolation, they must self-isolate for 10 days from the date symptoms began. May RTW 10 days after the onset of symptoms AND • Must be without fever for 5 days before RTW AND • Must be medically well before RTW.</td>
<td>Not an option.</td>
<td>Not applicable.</td>
</tr>
<tr>
<td>2.</td>
<td>Symptomatic HCWS with a Negative COVID 19 Test Result who: • Are not returning from overseas • Are not close contacts of a confirmed case (household, community or workplace)</td>
<td>May RTW once asymptomatic for &gt; 48 hours.</td>
<td>Not required or indicated</td>
<td>Not Required.</td>
</tr>
<tr>
<td>3.</td>
<td>Symptomatic HCWS who do not fit the COVID 19 criteria for testing.</td>
<td>HCW may RTW once asymptomatic for &gt; 48 hours</td>
<td>Not required</td>
<td>HCWs self-monitor for symptoms. The HCW will self-isolate if symptoms develop.</td>
</tr>
<tr>
<td>4.</td>
<td>Asymptomatic HCWs who are Close Contacts of a Confirmed COVID 19 Case - healthcare or community, but NOT household</td>
<td>Must Restrict Movement for 14 days. Can exit restricted movement at day 10 with confirmed Day 10 test negative.</td>
<td>With derogation as an Essential HCW from management, the HCW may RTW if asymptomatic</td>
<td>Active monitoring twice daily by manager and daily by Occupational Health</td>
</tr>
<tr>
<td>5.</td>
<td>(a) Household contacts - positive Covid 19 test result (b) Symptomatic household contacts - awaiting test/results</td>
<td>(a) Must Restrict Movement for 14 days. Can exit restricted movement at day 10 with confirmed negative Day 10 test. (b) Must restrict movement until household contact swab result indicates negative result</td>
<td>With derogation as an Essential HCW from management, the HCW may RTW if asymptomatic</td>
<td>Active monitoring twice daily by manager and daily by Occupational Health</td>
</tr>
<tr>
<td>6.</td>
<td>HCWs with symptomatic household contacts who • Don’t fit criteria for testing • Have tested negative.</td>
<td>May continue at work if asymptomatic</td>
<td>Not required</td>
<td>Not required</td>
</tr>
<tr>
<td>7.</td>
<td>Asymptomatic HCW with indeterminate results</td>
<td>Clinical decision to retest. If retest, may work while results awaited</td>
<td>No derogation required</td>
<td>Active monitoring twice daily by manager</td>
</tr>
<tr>
<td>8.</td>
<td>Travelling from overseas to provide an ‘Essential Service’</td>
<td>Must remain out of the workplace for 14 days, unless from ‘Green List Country’.</td>
<td>Derogation by Senior Management if not self-isolating</td>
<td>Active monitoring twice daily by manager and daily by Occ Health</td>
</tr>
</tbody>
</table>
7. Appendix 2 - Derogation Checklist for Senior Manager

Service: ___________________________  Unit: ___________________________

Senior Manager Name: _______________________  Job Title: ___________________________

Senior Manager Email: ___________________________

Employee Name: _______________________  Job Title: ___________________________

Date of Birth: _______ Employee No: ___________ Mobile No: ________________

Date Commence Restricted Movement: ___________________________

Reason for Restricted Movement (Type 3 – 5): ___________________________

Date last Contact: _________________  Employee Email: _______________________________

**Risk Assessment for the Derogation of a Healthcare Worker on Restricted Movement to Return to work**

- Are there other available HCWs from non-essential services who may be redeployed for this role: Yes □ No □
- Can efforts be made to reduce capacity in non-essential services, allowing redeployment of another HCW to this role: Yes □ No □
- Have efforts have been made to recruit alternative HCWs with the necessary skills: Yes □ No □
- Is this HCW role critical to ensure essential services continue: Yes □ No □

**Is this HCW a Healthcare related Close Contact:**

1. Was their contact during Aerosol Generating Procedures:
2. Did they have contact with multiple index cases:

*Yes to either 1 or 2 indicates an increased risk. Carry out further risk assessment for control measures to manage this risk. If the HCW is a household close contact they MAY NOT be derogated.*

- Can you manage twice daily active monitoring if required: Yes □ No □

**Decision for the Derogation of the Healthcare Worker**

Based on the risk assessment this HCW can return to work on a derogation:  Yes □ No □

I will ensure that the appropriate monitoring is carried out in line with the Guidance for the Derogation for the return to work of Healthcare Workers (HCW) who have been advised to restrict their movements BUT are identified as essential for critical services’.

Senior Manager Signature: ___________________________  Date: ___________________________

Period for Derogation: ___________________________ to ___________________________

**HCW is a Household Close Contact – Mandatory approval for derogation must be obtained:**

Name from Director of Acute/Community Operations providing approval: ___________________
8. Appendix 3 - Derogation Checklist for HCW Entering Island of Ireland - Senior Manager

<table>
<thead>
<tr>
<th>Service: __________________________</th>
<th>Unit: __________________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Senior Manager Name: ______________</td>
<td>Job Title: ______________________</td>
</tr>
<tr>
<td>Senior Manager Email: ______________</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Employee Name: ______________</th>
<th>Job Title: ______________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of Birth: ___________ Employee No: ______________ Mobile No: ______________</td>
<td></td>
</tr>
<tr>
<td>Date Entering Ireland: ______________</td>
<td>Date Restricted Movement Ends ______________</td>
</tr>
</tbody>
</table>

**Risk Assessment for the Derogation of a Healthcare Worker**  
**Restricting Movement** Due to Travel into the Island of Ireland from a country not on the ‘Green list’  
*HCWs travelling from countries that require self-isolation on arrival, due to SARS-CoV-2 variants with multiple spike protein mutations may NOT be considered for derogation*

- Are there other available HCWs from other services who may be redeployed for this role for the duration of restricted movement?  
  - Yes □ No □
- Can efforts be made to reduce capacity in non-essential services, allowing redeployment of another HCW to this role for the duration of restricted movement?  
  - Yes □ No □
- Has the HCW had known close contact with confirmed COVID-19 cases in the 14 days prior to travel?  
  - Yes □ No □
- Is the HCW aware they must restrict movement outside of work hours until 14 days post entry to Ireland or that they must self-isolate immediately at work if they develop COVID-19 symptoms?  
  - Yes □ No □

**Decision for the Derogation of the Healthcare Worker**

Based on the risk assessment this HCW can return to work on a derogation:  
- Yes □ No □

I will ensure that the appropriate monitoring is carried out in line with the Guidance for the Derogation for the return to work of Healthcare Workers (HCW) who have been advised to restrict movement BUT are identified as essential for critical services’.

I will provide the HCW with a Returning from Travel & New Entry Healthcare Worker Information leaflet prior to travel – See [https://www.hse.ie/eng/staff/workplace-health-and-wellbeing-unit/covid-19-guidance/](https://www.hse.ie/eng/staff/workplace-health-and-wellbeing-unit/covid-19-guidance/)

Senior Manager Signature: __________________________ Date: __________________________

Period for Derogation: __________________________ to __________________________
### 9. Appendix 4 – Sample Risk Assessment

#### Risk Assessment of Healthcare Workers on Restricted Movement for Derogation to Return to Work

<table>
<thead>
<tr>
<th>Division:</th>
<th>Source of Risk:</th>
</tr>
</thead>
<tbody>
<tr>
<td>HG/CHO/NAS/Function:</td>
<td>Primary Impact Category:</td>
</tr>
<tr>
<td>Hospital Site/Service:</td>
<td>Risk Type:</td>
</tr>
<tr>
<td>Dept/Service Site:</td>
<td>Name of Risk Owner (BLOCKS):</td>
</tr>
<tr>
<td>Date of Assessment:</td>
<td>Signature of Risk Owner:</td>
</tr>
<tr>
<td>Unique ID No:</td>
<td>Risk Co-Ordinator</td>
</tr>
<tr>
<td>*Risk Assessor (s):</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>HAZARD &amp; RISK DESCRIPTION</strong></th>
<th>EXISTING CONTROL MEASURES</th>
<th>ADDITIONAL CONTROLS REQUIRED</th>
<th>ACTION OWNER (i.e. the Person responsible for the action)</th>
<th>DUE DATE</th>
</tr>
</thead>
</table>
| Confirmed close contact to patient /HCW with probable/confirmed COVID-19 | Existing infection Prevention and Control measures  
Social distancing | Active monitoring twice daily to include temperature check – first check at start of shift  
Employee redeployed to reduce possible contact with patients or colleagues  
Employee maintains distance of >1 meter from patients and HCW colleagues as far as is reasonably practicable  
Where >1 meter distance cannot be maintained HCWs should limit contact as far as is reasonably practicable  
Final approval for derogation | Line manager/designate Healthcare Worker | |

| Household close contact | | | | |

**INITIAL RISK**

<table>
<thead>
<tr>
<th>Likelihood</th>
<th>Impact</th>
<th>Initial Risk Rating</th>
<th>Risk Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Per ECDC Guidelines</td>
<td>HIGH</td>
<td></td>
<td>Open Monitor Closed</td>
</tr>
</tbody>
</table>