COVID-19 Healthcare Workforce Response Team (H♥RT)

August 2020



Language Updates

HRT – COVID-19 **H**ealthcare Workforce **R**esponse **T**eam encompasses all these formerly known as:

- OHTEC Occupational Health Telephone Evaluation Center (HCW call center for triage and scheduling)
- OHREC Occupational Health Respiratory Evaluation Center (HCW testing site)
- Contact Tracing and HCW Exposure Management (COVID-19 only)

OHS – Occupational Health Services (300P OHS for HCW non-COVID issues and Workers Comp)

IPC – Infection Prevention & Control

This is an effort to try to decrease confusion for our workforce by eliminating the term "Occ Health" when we discuss the COVID workforce triage, testing, and management functions.



Occupational Health & HWRT Information

Occupational Health Services

650-723-5922

occhealth@stanfordhealthcare.org

Mon & Wed 7am – 3:30pm Tues & Thurs 7am-5pm; Fri 7am-2:30pm

Blood Borne Pathogen Exposure

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COVID-19 HRT

Healthcare Workforce Response Team

(formerly: OHREC/OHTEC)

650-497-9595

Mon – Fri 7am – 5pm Sat 8am – 3:30pm; Sun 8:30am – 2:30pm (after hours phone support Clinical Advice Services)

SHC-ValleyCare Occupational Health

COVID-19 Line: 925-534-0211

Main Office: 925-479-3700

Mon-Fri 8am – 5pm

- Pre-employment Physical
- Annual Screening; N95/CAPR Fit Testing
- TB/Blood Draw/Immunizations
- Return to Work
- Workplace Injury Assessment
- Workers Compensation
- Substance Testing
- Physical Therapy; Ergonomic Assessment
- Blood/Fluid Exposure; Contagious Diesease Management
- N95/CAPR Fit Testing

- COVID-19 exposure questions
- COVID-19 test scheduling
- COVID-19 symptoms questions
- COVID-19 contact tracing/exposure management

- COVID-19 Testing (by appointment)
- COVID-19 Contact Tracing/Exposure Mgt
- Symptoms questions and triage
- Annual Screening
- TB/Blood Draw/Immunizations
- Return to Work
- Workplace Injury Assessment
- Blood/Fluid Exposure
- N95/CAPR Fit Testing



Occupational Health Leadership Contacts

Occupational Health Services

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COVID-19

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(HRT)

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Leadership Team

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Get Tested - Call H♥RT (650-497-9595)

- ☐ Fever, cold and flu like **symptoms**, loss of taste/smell
 - ☐ Recent **travel**
 - **Exposed** to or live with someone with COVID-19
- ☐ Frequently ride **public transportation** or attended a **large gathering of people**
 - ☐ Concerned that your risk for exposure changed recently

What is an exposure?

- ☐ HCW who was without BOTH a mask (procedure mask) AND eye protection who has had contact with unmasked **COVID-19 positive individual*** within a 6-foot radius for more than 15 minutes OR
- ☐ If aerosol-generating procedure has occurred and HCW was not wearing a N95 and face shield or eye protection during the procedure with a COVID-19 positive individual

