

# RETURN TO WORK DECLARATION FOLLOWING A POSITIVE COVID-19 RESULT

Following a positive result either PRC or RAT staff are to avoid returning to work until at least 7 days following their positive test result and they are well. Additionally, cases are required to take additional precautions day 8-10 following the positive result due to the impact transmission can have on the consumers/residents to whom we provide care

## Employees are to

- Immediately upon receiving positive result staff are required to leave the workplace and are recommended to isolate for a period of 7 full days from the date the test was taken
- 7 days after undertaking the test if the employee has been symptom free for 48hrs (no fever or acute respiratory symptoms) they are allowed to return to work
- If any acute symptoms remain they should remain in isolation until resolved
- NO TEST is required to leave isolation. Current advice is people who have had a COVID-19 positive result should not be tested for 30 days unless clinically indicated
- For the following 7 days the employee must wear a face mask at all times when outside the home including outdoors when unable to physically distance from other persons other than household members
- Employees are to observe strict hand hygiene and adhere to physical distance requirements
- Not eat in shared break rooms
- In addition if the employee is returning to a vulnerable setting ie RACF or Community Service on return to work must wear full PPE until Day 10. After Day 10 can revert to current PPE requirements of the Service or Facility
- Confirm that recovery from illness supports fitness to return to work in accordance with their positions critical job demands. Any concerns/return to work considerations have been discussed with the staff members line manager
- Complete Return to Work Declaration below and file to personnel file

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**Name**

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**Employee Number**

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**Date**

QUESTIONS	YES/NO	ACTION
Have 7 days past since receipt of a positive result either PCR or RAT test?	Yes No	If no must remain in isolation
Are you asymptomatic?	Yes No	If no must remain in isolation until symptom free for 48hrs
Are you aware of PPE requirements to be followed until Day 10?	Yes No	If no please review

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**Employee's signature**

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**Manager's name**

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**Manager's signature**