

Questions and Answers on Human Resources Flexibilities and Authorities for Dealing with Quarantinable Communicable Diseases and Seasonal Influenza

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A. Distinction between Quarantinable Communicable Diseases versus Seasonal Influenza

- (1) What is the difference between using sick leave for exposure to a quarantinable communicable disease and exposure to seasonal influenza? If everyone is getting sick at work can I just take sick leave to avoid being exposed?**

An employee may use sick leave for exposure to quarantinable communicable diseases and seasonal influenza only in certain circumstances —

- Quarantinable Communicable Diseases. For purposes of this guidance, the term “quarantinable communicable disease” means a disease for which Federal isolation and quarantine are authorized. Isolation can be used to separate people with a contagious disease from people who are not sick in order to stop the spread of that illness. Quarantine can be used to separate and restrict the movement of people who were exposed to a contagious disease to see if they become sick and to prevent the possible spread of that disease to others. Agencies should refer to the list of quarantinable communicable diseases, which are defined by Executive Order (see Sec. B(2)) and include viral hemorrhagic fevers such as Ebola. (See <http://www.cdc.gov/quarantine/AboutLawsRegulationsQuarantineIsolation.html>.) Under certain circumstances, the CDC or a State or local health department may determine that exposure to a quarantinable disease would jeopardize the health of others, and that quarantine of the exposed individual is warranted to protect the public’s health. If the disease is not a quarantinable communicable disease, as defined by Executive Order, and a health authority or health care provider has concerns that exposure to the disease could jeopardize the health of others, the health authority or health care provider should contact the CDC for evaluation of the risk factors and further recommendation.

- **Influenza.** Influenza may be classified as either seasonal or pandemic. Influenza strains that are new and capable of causing a pandemic are classified as quarantinable diseases; however, seasonal influenza strains – those that cause outbreaks of influenza every winter – are not considered quarantinable. Therefore, exposure to seasonal influenza will not meet the criteria for use of sick leave for exposure to a quarantinable communicable disease. Currently, there is no declared influenza pandemic, and agencies should not grant sick leave for exposure to influenza until they receive guidance from the appropriate officials (e.g., CDC, OPM). Employees who are sick with seasonal influenza and contagious to others should be allowed to use sick leave according to agency policies.

(2) What is a pandemic influenza?

Influenza is a contagious respiratory illness caused by flu viruses which spreads between people and can cause mild to severe illness. Pandemic influenza can occur when a non-human (novel) influenza virus gains the ability for efficient and sustained human-to-human transmission and then spreads globally. Influenza will meet the criteria of a quarantinable communicable disease only if the CDC determines that type of influenza causes or has the potential to cause a pandemic. Further information about pandemic influenza may be found at <http://www.flu.gov/pandemic/about/index.html>.

B. Determination of Quarantinable Communicable Diseases for Sick Leave Purposes

(1) What are examples of quarantinable communicable diseases?

Sick leave for exposure to a quarantinable communicable disease would only arise in cases of a quarantinable communicable disease. (See Attachment 3 for guidance regarding the use of excused absences instead of sick leave for certain quarantined employees in connection with the current Ebola outbreak in West Africa.) Agencies should refer to the list of quarantinable communicable diseases, which are defined by Executive Order and currently includes—

- Cholera;
- Diphtheria;
- Infectious tuberculosis;
- Plague;
- Smallpox;
- Yellow fever;
- Viral hemorrhagic fevers (Lassa, Marburg, **Ebola**, Crimean-Congo, South American, and others not yet isolated or named);
- Severe Acute Respiratory Syndrome (SARS); and
- Influenza that causes or has the potential to cause a pandemic.

See CDC's Legal Authorities for Isolation and Quarantine:
<http://www.cdc.gov/quarantine/AboutLawsRegulationsQuarantineIsolation.html>.

(2) Who determines what a quarantinable communicable disease is?

The Federal list of quarantinable communicable diseases is determined by the President of the United States based on a recommendation by the Secretary of Health and Human Services and published in Executive order (E.O.). Various E.O.s have established and updated the list of quarantinable communicable diseases:

- [Executive Order 13295](#), April 4, 2003: specified the list of quarantinable communicable diseases as outlined above.
- [Executive Order 13375](#), April 1, 2005: amended the list to include “novel and reemerging influenza viruses that are causing, or have the potential to cause, a pandemic.”
- [Executive Order 13674](#), July 31, 2014: amended SARS to include other severe acute respiratory syndromes, not including influenza.

(3) Other than pandemic influenza, what are the quarantinable communicable diseases for purposes of sick leave for exposure to a quarantinable communicable disease?

Agencies should refer to the list of quarantinable communicable diseases, which are defined by Executive Order. CDC has already determined that an individual’s exposure to any of the other listed diseases would jeopardize the health of others.

C. Sick Leave for Exposure to a Quarantinable Communicable Disease

(1) Can agencies grant sick leave for exposure to a quarantinable communicable disease or must agencies wait for guidance from CDC or OPM?

Agencies do not need to wait for further guidance from CDC or OPM before authorizing sick leave for exposure to a quarantinable communicable disease that is on the list of quarantinable communicable diseases, which is defined by Executive Order. The CDC has identified Ebola as a quarantinable communicable disease. (See Attachment 3 for guidance regarding the use of excused absences instead of sick leave for certain quarantined employees in connection with the current Ebola outbreak in West Africa.)

In OPM’s memorandum for Human Resources Directors dated December 3, 2010, CPM 2010-17

(<http://www.chcoc.gov/Transmittals/TransmittalDetails.aspx?TransmittalID=3237>), we said,” [t]he use of sick leave for exposure to a communicable disease should be used only in very limited circumstances, and agencies should not grant sick leave for this purpose until they receive guidance from the appropriate officials (e.g., Centers for Disease Control and Prevention (CDC), OPM).” However, this guidance applies in the case of influenza only where the CDC would officially determine whether an influenza outbreak was to be considered a quarantinable communicable disease. The guidance does not apply in cases where the CDC has already identified a disease as a quarantinable communicable disease.

(2) If an employee is healthy but stays at home because he/she has been in direct contact with an individual infected with a quarantinable communicable disease such as Ebola, would he or she be entitled to use sick leave for exposure to a quarantinable communicable disease?

Yes. Ebola, a type of viral hemorrhagic fever, is a quarantinable communicable disease for which Federal isolation and quarantine is authorized. Therefore, an employee exposed to Ebola, even if asymptomatic, would be entitled to sick leave for exposure to a quarantinable communicable disease if a health authority or health care provider advises that the employee has been exposed and would jeopardize the health of others if allowed to return to work. An employee may not make his or her own determination of exposure but must have confirmation of exposure from a health authority or health care provider. (See Attachment 3 for guidance regarding the use of excused absences instead of sick leave for certain quarantined employees in connection with the current Ebola outbreak in West Africa.)

In addition to using sick leave, an asymptomatic employee who has been exposed to a quarantinable communicable disease such as Ebola may also request to telework to the extent possible. (See section G, Telework, for more information.)

If the employee becomes infected with Ebola or other quarantinable communicable disease, sick leave would be appropriate.

(3) If an employee must stay home to care for a family member exposed to a quarantinable communicable disease, would he or she be entitled to use sick leave to care for a family member exposed to a quarantinable communicable disease, even if the family member is not sick?

Yes. An employee may use up to 13 days (104 hours) of sick leave to care for a family member who would, as determined by the health authorities, jeopardize the health of others by the family member's presence in the community because of exposure to a quarantinable communicable disease. An employee using sick leave to care for a family member exposed to a quarantinable communicable disease does not need to be the sole provider of care, but must be providing care actively to the family member in order to use sick leave for this purpose.

Since the family member for whom the employee is caring is asymptomatic, sick leave for this purpose would be appropriate only if the exposed family member could not otherwise care for himself or herself (e.g., a minor child or elderly relative). An employee may not use sick leave to care for an able-bodied adult (e.g., an able-bodied parent) who is asymptomatic since the adult could care for him or herself.

In addition to using sick leave, an employee who is caring for an asymptomatic family member who has been exposed to a quarantinable communicable disease and who is covered by a telework agreement may also request to telework pursuant to an ad hoc arrangement to the extent possible. (See section G, Telework, for more information.)

If the employee's family member becomes infected with Ebola or other quarantinable communicable disease, sick leave to care for a family member with a serious health condition would be appropriate.

(4) If schools are closed due to a quarantinable communicable disease, may an employee use sick leave for exposure to a quarantinable communicable disease to care for his or her child who has not been in direct contact with an individual infected with a quarantinable communicable disease?

No. Sick leave is not appropriate if the child has not been in direct contact with an individual infected with a quarantinable communicable disease. An employee who is healthy and is caring for a family member who is healthy may request annual leave, advanced annual leave, other paid time off (e.g., earned compensatory time off, earned credit hours), or leave without pay for the period of absence from his or her job.

(5) If an employee runs out of sick leave, can the agency grant advanced sick leave to an employee who has been exposed to a quarantinable communicable disease or must care for a family member who has been exposed?

Yes. However, while sick leave may be advanced at an agency's discretion, it is not an employee entitlement. The sick leave regulations allow an employee to be advanced sick leave for exposure to a quarantinable communicable disease, subject to the limitations below:

- 240 hours (30 days) may be advanced if the employee would jeopardize the health of others by his or her presence on the job because of exposure to a quarantinable communicable disease;
- 104 hours (13 days) may be advanced if the employee is providing care for a family member who would jeopardize the health of others by his or her presence in the community because of exposure to a quarantinable communicable disease.

(6) Must an employee have a doctor's note if requesting to use sick leave for 3 days or more during incidences of a quarantinable communicable disease?

Not necessarily. Under OPM's regulations (5 CFR 630.403(a)), an agency may grant sick leave only when the need for sick leave is supported by administratively acceptable evidence. An agency may consider an employee's self-certification as to the reason for his or her absence as administratively acceptable evidence, regardless of the duration of the absence. An agency may also require a medical certificate or other administratively acceptable evidence as to the reason for an absence for any of the purposes for which sick leave is granted for an absence in excess of 3 workdays, or for a lesser period when the agency determines it is necessary. Supervisors must use their best judgment and follow their agency's internal practices for granting sick leave.

D. Sick Leave for Seasonal Influenza

(1) May supervisors send an employee home when he or she is ill? What would be the employee's pay status in this situation?

When a supervisor observes an employee exhibiting medical symptoms, he or she can express general concern regarding the employee's health and remind the employee of his or her leave options for seeking medical attention, such as requesting sick or annual leave. If the employee has no leave available, supervisors are authorized to approve requests for advanced leave or leave without pay in certain circumstances. Obtaining an employee's agreement to take sick leave, annual leave, or leave without pay is preferable, but in some circumstances, a supervisor may find it appropriate to enforce the employee's use of leave. (See question 3 in section F, Employee Relations, for more information on enforced leave.)

In the case of a pandemic influenza outbreak, agency personnel actions aimed at preventing the spread of a disease may be taken because of the guidance or directive of public health officials regarding the general danger to public health. Supervisors should consult their human resources (HR) staff prior to effecting enforced leave.

(2) If an employee is healthy but stays home because he or she has been in direct contact with an individual infected with seasonal influenza in what pay/leave status is the employee placed?

The use of sick leave for exposure to a communicable disease would be limited to circumstances where exposure alone would jeopardize the health of others and would arise in cases of quarantinable communicable disease. The flu can encompass many variations of influenza and does not automatically meet the criteria of a quarantinable communicable disease for sick leave purposes. Determinations of a quarantinable communicable disease are made by CDC. (See questions 1 and 2 in section B, Determination of Quarantinable Communicable Diseases for Sick Leave Purposes, for more information.) In other words, even a declaration of a State emergency would not meet the threshold of a quarantinable communicable disease for sick leave purposes until the CDC has declared that exposure alone is enough to jeopardize the health of others. The use of sick leave for exposure to a quarantinable communicable disease should be used only in very limited circumstances, and agencies should not grant sick leave for exposure to the flu until they receive guidance from the appropriate officials. Employees should consult with their agency HR office to determine how their agency policy applies to their situation. An employee may also request to take annual leave, advanced annual leave, other paid time off (e.g., earned compensatory time off, earned credit hours), or leave without pay if he or she was exposed to the flu but is not ill.

(3) If an employee is healthy but stays home because his or her child has been in direct contact with an individual infected with seasonal influenza, in what pay/leave status is the employee placed?

Currently, an employee may use annual leave, advanced annual leave, other paid time off (e.g., earned compensatory time off, earned credit hours), or leave without pay to care for a family member who is healthy but has been directly exposed to seasonal influenza. Additionally, an employee could use sick leave for the child's exposure if the CDC declares this version of influenza to be a quarantinable communicable disease. Seasonal influenza does not meet the criteria of a quarantinable communicable disease until the CDC has declared that exposure alone is enough to jeopardize the health of others.

In some cases, when appropriate, and when an employee is covered by a telework agreement, an employee may be able to telework pursuant to an ad hoc arrangement with the permission of the supervisor. While telework is not a substitute for child care, it can be very valuable to employees with caregiving responsibilities. Provided the employee has telework capabilities and sufficient work to perform, the agency should be flexible in determining whether the employee can accomplish his or her duties from home while caring for a child. An employee may telework during the time he or she is not responsible for child care and must request annual leave, advanced annual leave, other paid time off (e.g., earned compensatory time off, earned credit hours), or leave without pay while performing child care responsibilities. (See question 2 in section G, Telework for more information.)

(4) My child's school has closed, but my child has not been exposed to any individuals who were ill. Can I use sick leave to care for my child until the school reopens?

No. Sick leave is not appropriate in this case. An employee who is healthy and is caring for a family member who is healthy may request annual leave, advanced annual leave, other paid time off (e.g., earned compensatory time off, earned credit hours), or leave without pay for the period of absence from his or her job.

(5) Must an employee have a doctor's note if requesting to use sick leave for 3 days or more during an outbreak of seasonal influenza?

Not necessarily. Under OPM's regulations (5 CFR 630.403(a)), an agency may grant sick leave only when the need for sick leave is supported by administratively acceptable evidence. An agency may consider an employee's self-certification as to the reason for his or her absence as administratively acceptable evidence, regardless of the duration of the absence. An agency may also require a medical certificate or other administratively acceptable evidence as to the reason for an absence for any of the purposes for which sick leave is granted for an absence in excess of 3 workdays, or for a lesser period when the agency determines it is necessary. Supervisors must use their best judgment and follow their agency's internal practices for granting sick leave.

E. Excused Absence (Administrative Leave)

(1) When should excused absence (administrative leave) be used?

OPM does not anticipate the need for widespread use of excused absence (administrative leave), which should generally be regarded as a tool of last resort in dealing with an influenza outbreak or incidences of a quarantinable communicable disease. OPM's sick leave regulations expressly authorize sick leave to be used when health authorities having jurisdiction, or a health care provider, determine that an employee's presence would jeopardize the health of others because of a communicable disease (i.e., the disease is quarantinable). Thus, as a general rule, sick leave is the appropriate tool for quarantined employees. However, if the need arises due to special circumstances, OPM will work with agencies to develop a consistent Governmentwide policy on the use of excused absence (administrative leave) for those special circumstances. Such a Governmentwide policy has been adopted based on the special circumstances that exist in connection with the current Ebola outbreak in West Africa. See Attachment 3 for specific guidance dealing the use of excused absences for certain employees who are quarantined due to possible exposure to the Ebola virus.

(2) If the worksite is closed due to an outbreak of a quarantinable communicable disease or pandemic influenza, will employees be placed on excused absence (administrative leave)?

Excused absence (administrative leave) may be appropriate if the employee is prevented from working due to an agency's action (e.g., closure) and the employee is not able to work from home or an alternative worksite.

F. Employee Relations

(1) If an employee comes to work and shows symptoms of illness, what should the supervisor do? May the employee be placed on excused absence (administrative leave), and if so, for how long? What is needed before the employee can return to work?

When a supervisor observes an employee at the workplace exhibiting medical symptoms, he or she can express general concern regarding the employee's health and remind the employee of his or her leave options for seeking medical attention, such as requesting sick or annual leave. If the employee has no leave available, supervisors are authorized to approve requests for advanced leave or leave without pay in certain circumstances. When these leave options are not practical, a viable alternative, when the employee is covered by a telework agreement, is for the employee to work from home for social distancing purposes pursuant to an ad hoc arrangement approved by the employee's supervisor. Of course, the feasibility of working from home is dependent on several factors, including the nature of the employee's duties, the availability of any necessary equipment (personal computer, etc.), and computer and communication connectivity.

If none of the above options is possible, agencies have the authority to place an employee on excused absence (administrative leave) and order him or her to stay at home or away from the workplace. The duration of any such excused absence (administrative leave) is dependent on the specific circumstances but is typically a short period. Placing an employee on excused absence (administrative leave) is fully within an agency's discretion and does not require the consent or request of the employee. Supervisors should not place an employee on excused absence (administrative leave) without first consulting with their HR staff and counsel to review agency policy and the applicable law with respect to any collective bargaining provisions.

An employee who is quarantined under the direction of health care authorities should not be reporting to the normal worksite. The employee's supervisor should offer the quarantined employee the option of ad hoc telework to the maximum extent possible. The quarantined employee may be granted or advanced sick leave for the quarantine period, at the employee's request. Other options include annual leave, advanced annual leave, or donated annual leave. (See Attachment 3 for specific guidance dealing with the Ebola outbreak in West Africa.)

Before an employee returns to work, the agency should consult with HR and counsel regarding policy and collective bargaining agreements may have provisions for requesting medical documentation from the employee, and should be followed.

(2) If no medical official is present at a Federal building, who assesses employees and orders them home if they appear ill?

Supervisors may require an employee to take leave or stay away from the worksite based on objective evidence only (not suspicion). Supervisors should obtain assistance from HR staff or on-site employee health services (if available), as the action may require compliance with adverse action procedures.

Objective evidence will depend on the facts of each case. Objective evidence could consist of a statement from a medical professional that the employee is physically unable to work or poses a danger to other employees or knowledge the employee resides in an area that has been quarantined. Consultation with public health officials may be appropriate. Less definitive, but potentially sufficient, evidence would be the employee making specific comments about being exposed to pandemic influenza or to a quarantinable communicable disease such as Ebola (e.g., taking care of a sick relative or friend coming from West Africa). If such comments are made, supervisors should consult with HR and counsel to assess whether a determination from a public health official is appropriate and necessary.

Human resources offices and agency legal counsel should be contacted to determine the best course of action based on objective evidence. Employee relations specialists and agency legal counsel have the necessary knowledge to assist supervisors and managers with options, such as telework, and appropriate actions arising from an outbreak of a quarantinable communicable disease or pandemic influenza. HR staff should check

OPM's website (www.opm.gov) and the CDC website (www.cdc.gov) on a regular basis to stay current.

While consideration may be given to directing the employee to leave the workplace and either placing him or her on enforced leave or effecting an indefinite suspension after appropriate procedural requirements are satisfied, human resources office and agency legal counsel should be contacted to ensure these types of adverse actions are permissible and defensible under the circumstances, and if appropriate, how to implement these types of actions. Excused absence (administrative leave) may be used if other options are exhausted and if it is necessary to prevent an employee from being at the worksite and putting other employees at risk before a supervisor can appropriately place an employee on enforced leave or indefinite suspension. (See additional discussion on enforced leave in question F3 below.)

(3) Can an agency mandate an employee exposed to a quarantinable communicable disease or infected with pandemic influenza remain at home for a specified period?

The CDC or other health agency will provide information related to the length of time an individual remains contagious, as well as current recommendations for social distancing, etc. For information specific to Ebola, please view CDC's web site at <http://www.cdc.gov/vhf/ebola/>. In the case of an epidemic or pandemic, agency personnel actions aimed at preventing the spread of a disease may be taken because of the guidance or directive of public health officials regarding the general danger to public health.

Generally, an agency should not prohibit an employee from reporting to work unless it has evidence or a reasonable concern that an employee is physically unable to perform his or her job, or their presence in the workplace poses a risk of infection to others, it may not prohibit that employee from reporting to work. Whenever possible, sick employees should be encouraged to take leave, such as sick leave, annual leave, advanced leave, other paid time off (e.g., earned compensatory time off, earned credit hours), or leave without pay. Excused absence (administrative leave) may be used if other options are not feasible and it is necessary to prevent an employee from being at the worksite and possibly putting other employees at risk. Excused absence is a paid, non-duty status that does not require the employee's consent or request and does not trigger adverse action procedures. In addition, excused absence can provide time for the agency to seek appropriate evidence regarding the employee's health. In other cases, such as when an employee refuses to take leave voluntarily, a supervisor may find it appropriate to enforce the employee's use of leave. Supervisors should consult with appropriate HR staff before taking such a step, because enforced leave is an adverse action that imposes procedural requirements (i.e., advance notice, an opportunity to reply, and an agency decision) before actually enforcing the use of leave. Enforced leave up to 14 days may be grieved. In addition, enforced leave lasting longer than 14 days may be appealed to the MSPB or grieved under the agency's negotiated grievance procedure. Supervisors need to consult with their HR office and legal counsel when deciding to enforce the use of leave, to ensure that the action is permissible and defensible before a third party.

(4) Does an agency have the right to solicit medical documentation when the employee is requesting sick leave? May an agency require all staff to be tested and treated for a quarantinable communicable disease or pandemic influenza?

Agency policy and collective bargaining agreements may have provisions for requesting medical documentation from an employee. Accordingly, agencies should consult with their HR office and counsel for guidance. An agency may grant sick leave only when supported by evidence administratively acceptable to the agency. For absences in excess of 3 days, or for a lesser period when determined necessary by the agency, an agency may require a medical certificate or other administratively acceptable evidence. (See question 6 in section C, Sick Leave for Exposure to a Quarantinable Communicable Disease, for more information.)

Under current rules, management may require medical evaluation or screening only when the need for such evaluation is supported by the nature of the work (see 5 CFR 339.301). Attempts on the part of a supervisor to assume a particular medical diagnosis based on observable symptoms is very problematic and should be avoided. However, when a supervisor observes an employee exhibiting symptoms of illness, he or she may express concern regarding the employee's health and remind the employee of his or her leave options for seeking medical attention, such as requesting sick or annual leave. If the employee has no leave available, supervisors are authorized to approve requests for advanced leave or leave without pay in certain circumstances. Agencies should also note the provisions of 5 CFR 630.401(a)(5), which requires the approval of requests for sick leave if an employee is determined by health authorities or by a health care provider, to "jeopardize the health of others by his or her presence on the job because of exposure to a communicable disease."

(5) Under what circumstances should an agency communicate to its employees that there is a confirmed case among one or more of its employees (without identifying the person/specific office)?

The infected employee's privacy should be protected to the greatest extent possible; therefore, his or her identity should not be disclosed. In an outbreak of quarantinable communicable disease or seasonal influenza, management should share only that information determined to be necessary to protect the health of the employees in the workplace. If social distancing, information sharing, or other precautions to assist employees in recognizing symptoms or reducing the spread of the illness can be taken without disclosing information related to a specific employee, that is the preferred approach.

Managers should work with their workplace safety contacts and local health officials to determine appropriate information regarding transmission of the illness and precautions that should be taken to reduce the spread of influenza or any other contagious disease in the workplace. Managers should treat this as they would any other illness in the workplace, and continue to protect employee privacy interests while providing sufficient information to all employees related to protecting themselves against the spread of illness.

G. Telework

(1) Generally, how should agencies manage telework during incidences of quarantinable communicable disease or a seasonal influenza outbreak?

For an employee covered by a telework agreement, ad hoc telework arrangements can be used as a flexibility to promote social distancing and can be an alternative to the use of sick leave for exposure to a quarantinable communicable disease for an employee who is asymptomatic or caring for a family member who is asymptomatic. An employee's request to telework from home while responsible for such a family member may be approved for the length of time the employee is free from care duties and has work to perform to effectively contribute to the agency's mission. The Telework Enhancement Act of 2010 (the Act) requires agencies to incorporate telework into their continuity of operations plan. Agencies should have written telework agreements in place with as many employees who are willing and communicate expectations for telework in emergency situations.

It is important for an agency to have a solid technology infrastructure established to support a high level and volume of connectivity, so employees can work seamlessly from their alternate locations (e.g., home). For continuity of operations and maximum productivity, employees, managers, workgroups, and customers must have a good communications plan in place, which should be practiced regularly so employees can work efficiently during an emergency. Managers, employees, and organizations must remain flexible and adapt to the changing environment.

(2) My child's school is closed. Can I telework from home while caring for my child? If so, for how long?

While telework is not a substitute for child care, it can be very valuable to employees with caregiving responsibilities. Provided the employee has telework capabilities and sufficient work to perform, the agency should be flexible in determining whether an employee can accomplish his or her duties from home while caring for a child. An employee may telework during the time he or she is not caring for a child and must take accrued annual leave or other paid time off (e.g., earned compensatory time off, earned credit hours) while performing child care responsibilities. For example, a young child or infant who requires constant care and attention should not be left alone; therefore, the employee's ability to telework would be limited to only the time the employee is not responsible for child care. An older child who requires minimal supervision may be at home with the employee, as long as the child is independently pursuing his or her own activities. An employee may also request a change in work schedule to perform work during the time he or she is not responsible for child care.

It is possible that schools and day care centers will be closed to reduce the spread of a quarantinable communicable disease. An employee's request to telework from home while responsible for a child may be approved for the length of time the employee is free from child care duties and has work to perform to effectively contribute to the agency's mission. An employee requesting to telework must plan ahead to ensure he or she has

sufficient work to perform at home. If the employee has completed all work assignments and can no longer contribute to the agency's mission while working at home, he or she should contact his or her supervisor to discuss what other work or leave options are available.

(3) What happens if an employee does not have a sufficient amount of work to perform to cover the entire telework day during incidences of a quarantinable communicable disease or seasonal influenza outbreak?

An employee must always have a sufficient amount of work to perform throughout the workday when he or she teleworks. An employee requesting telework who does not have enough work must notify his or her supervisor and receive additional work or discuss leave options such as annual leave, advanced annual leave, other paid time off (e.g., earned compensatory time off, earned credit hours), or leave without pay.

H. Pay Authorities Related to Exposure to Ebola

May an employee receive hazard pay differentials or environmental differential pay if exposed to Ebola through the performance of assigned duties?

General Schedule (GS) employees may receive additional pay for the performance of hazardous duty or duty involving physical hardship. (5 U.S.C. 5545(d) and 5 CFR part 550, subpart I) Appendix A to subpart I of part 550 of title 5, Code of Federal Regulations, contains a list of approved hazard pay differentials. For example, a 25 percent hazard pay differential is authorized for employee exposure to "virulent biologicals," which is defined as "work with or in close proximity to...[m]aterials of micro-organic nature which when introduced into the body are likely to cause serious disease or fatality and for which protective devices do not afford complete protection."

To be eligible for the hazard pay differential, the agency must determine that the employee is exposed to a qualifying hazard through the performance of his or her assigned duties and that the hazardous duty has not been taken into account in the classification of the employee's position. A hazard pay differential is not payable if safety precautions have reduced the element of hazard to a less than significant level of risk, consistent with generally accepted standards that may be applicable. (See 5 CFR 550.904-550.906 for further information and exceptions.) OPM does not determine when hazard pay differentials must be paid; agencies have the responsibility and are in the best position to determine whether duties performed by employees meet the regulatory requirements for hazard pay. Thus, agency managers, in consultation with occupational safety and health experts, must determine whether an employee is entitled to hazard pay on a case-by-case basis.

Prevailing rate (wage) employees may receive an environmental differential when exposed to a working condition, physical hardship, or hazard of an unusually severe nature. (See 5 U.S.C. 5343(c)(4) and 5 CFR 532.511.) A list of approved differentials is contained in Appendix A to subpart E of part 532, Code of Federal Regulations. As with

hazard pay differentials, determinations as to whether an employee qualifies for an approved environmental differential must be made by agencies on a case-by-case basis.

I. Workplace Precautions to Prevent Exposure to Ebola

(1) If an employee serves in an area at high risk for exposure to a quarantinable communicable disease such as Ebola, what can he or she do to stay safe and prevent the spread of the disease to others?

The Occupational Safety and Health Administration (OSHA) has published precautionary measures and recommendations for protecting employees whose work activities are conducted in an environment that is known or reasonably suspected to be contaminated with Ebola virus (e.g., due to contamination with blood or other potentially infectious material). These general guidelines are not intended to cover workers who have direct contact with individuals infected with Ebola. See OSHA's Ebola Control and Prevention website: https://www.osha.gov/SLTC/ebola/control_prevention.html.

- Employers should follow recognized and generally accepted good infection control practices, and must meet applicable requirements in the Personal Protective Equipment standard (29 CFR 1910.132, general requirements) and the Respiratory Protection standard (29 CFR 1910.134).
- Use proper personal protective equipment (PPE) and good hand hygiene protocols to avoid exposure to infected blood and body fluids, contaminated objects, or other contaminated environmental surfaces.
- Wear gloves, wash hands with soap and water after removing gloves, and discard used gloves in properly labeled waste containers.
- Workers who may be splashed, sprayed, or spattered with blood or body fluids from environmental surfaces where Ebola virus contamination is possible must wear face and eye protection, such as a full-face shield or surgical masks with goggles. Aprons or other fluid-resistant protective clothing must also be worn in these situations to prevent the worker's clothes from being soiled with infectious material.
- Workers tasked with cleaning surfaces that may be contaminated with Ebola virus must be protected from exposure. Employers are responsible for ensuring that workers are protected from exposure to Ebola and that workers are not exposed to harmful levels of chemicals used for cleaning and disinfection. OSHA's [Cleaning and Decontamination of Ebola on Surfaces](#) (See PDF at https://www.osha.gov/Publications/OSHA_FS-3756.pdf) Fact Sheet provides guidance on protecting workers in non-healthcare/non-laboratory settings from exposure to Ebola and cleaning and disinfection chemicals. CDC also offers specific guidance for workers [cleaning and disinfecting surfaces that have been in contact with blood or body fluids](#) (See

<http://www.cdc.gov/quarantine/air/managing-sick-travelers/ebola-guidance-airlines.html>) from a traveler known to have or suspected of having Ebola.

- Employers must train workers about the sources of Ebola exposure and appropriate precautions. Employers must train workers required to use personal protective equipment on what equipment is necessary, when and how they must use it, and how to dispose of the equipment. In addition, where workers are exposed to blood or other potentially infectious materials, employers must provide the training required by the Bloodborne Pathogens standard, including information about how to recognize tasks that may involve exposure and the methods to reduce exposure, including engineering controls, work practices, and personal protective equipment.

(2) What safety guidelines are available for employees whose work activities put them at risk for exposure to Ebola?

Most Federal employees are unlikely to encounter individuals infected with Ebola. According to OSHA, exposure to the virus or someone with Ebola may be more likely in certain sectors, including the health care, mortuary/death care, and airline servicing industries. Workers who interact with people, animals, goods, and equipment arriving in the U.S. from foreign countries with current Ebola outbreaks are at the greatest risk for exposure.

OSHA has advised that precautionary measures for preventing exposure to the Ebola virus depend on the type of work, potential for Ebola-virus contamination of the work environment, and what is known about other potential exposure hazards. Infection control strategies may have to be modified to include additional selections of personal protective equipment, administrative controls, and/or safe work practices. OSHA has developed interim guidance to help prevent worker exposure to Ebola virus and individuals with Ebola. For more information, please see the OSHA website for the Control and Prevention of Ebola at https://www.osha.gov/SLTC/ebola/control_prevention.html.

(3) If an employee believes he or she may have been exposed to Ebola while in duty status, what should he or she do?

OSHA advises any employee who thinks he or she may have been exposed to Ebola virus, including through travel, assisting an ill traveler or other person, handling a contaminated object, or cleaning a contaminated environment (such as an aircraft) should take the following precautions:

- Notify your employer immediately.
- Monitor your health for 21 days. Watch for fever (temperature of 101°F/38.3°C or higher), muscle pain, headache, sore throat, diarrhea, vomiting, rash, and other symptoms consistent with Ebola.
- Seek medical attention if you develop any of these symptoms.

- Before visiting a health care provider, alert the clinic or emergency room in advance about your possible exposure to Ebola virus so that arrangements can be made to prevent spreading it to others.
- When traveling to a health care provider, limit contact with other people. Avoid all other travel.