

# Summary – What Leave Should I Take If...?

Subject to change.\*

Updated May 5, 2022

	I am working on site and am unable to work remotely due to the nature of my work.	I am able to work remotely due to the nature of my work.
Personal Situation**	Leave Type	
I have developed COVID-19 symptoms and have been asked to self-isolate.	Sick leave (699 if no sick leave)	Sick leave (699 if no sick leave)
I have been asked to get tested and must take leave to do so.	699	699
I have developed COVID-19 symptoms, have been tested and am awaiting test results.	Sick leave (699 if no sick leave)	Sick leave (699 if no sick leave)
I have developed symptoms, my test result is positive, and I have been asked to self-isolate. <i>Where access to PCR testing is not available, a positive rapid antigen test result shall be considered equivalent.</i>	Sick leave (699 if no sick leave)	You are expected to work if you are able or to take sick leave if you are not.
My test result is negative, and I continue to show COVID-19 symptoms after the isolation period. <i>Where access to PCR testing is not available, a positive rapid antigen test result shall be considered equivalent.</i>	Sick leave	Sick leave
I have a chronic condition and my doctor confirmed I should not expose myself to high-risk situations. I have received the approval of the House's occupational nurse.	Use of 699 should be discussed with the Disability Management Coordinator	You are expected to work.
I have travelled for personal reasons. I have been asked to get tested due to this trip and I must take leave.	Annual leave	Annual leave

<p>I have travelled for personal reasons. Due to this trip, I have been asked to self-isolate. I am awaiting my test result; OR my test result is positive; OR my test result is negative. I have not developed COVID-19 symptoms; OR I have developed COVID-19 and would normally have been able to work with these symptoms.</p>	<p>Annual leave</p>	<p>You are expected to work</p>
<p>I have travelled for personal reasons. Due to this trip, I have been asked to self-isolate. I am awaiting my test result; OR my test result is positive; OR my test result is negative. I have developed COVID-19 symptoms. I would normally have not been able to work regardless of these symptoms.</p>	<p>Sick leave</p>	<p>Sick leave</p>
<p>I have decided to administer a rapid antigen test for personal reasons and my test result is positive.</p>	<p>Sick leave</p>	<p>You are expected to work</p>
<p>I am receiving a COVID-19 vaccine and must take leave for the appointment.</p>	<p>699</p>	<p>699</p>
<p>After receiving a COVID-19 vaccine, I am experiencing severe side-effects.</p>	<p>699</p>	<p>699</p>
<p><b>*NEW*</b> I have been in a high-risk contact situation and I meet all of the following criteria:</p> <ul style="list-style-type: none"> <li>• I am fully vaccinated against COVID-19;</li> <li>• I have received a booster dose;</li> <li>• I have no symptoms; and</li> <li>• I have not been asked to self-isolate.</li> </ul>	<p>You are expected to work</p>	<p>You are expected to work</p>
<p><b>*NEW*</b> I have been in a high-risk contact situation and I meet all of the following criteria:</p> <ul style="list-style-type: none"> <li>• I have tested positive for COVID-19 in the last 90 days;</li> <li>• I have no symptoms; and</li> <li>• I have not been asked to self-isolate.</li> </ul>	<p>You are expected to work</p>	<p>You are expected to work</p>

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Family Situation**	Leave Type	
I have decided to not send my child to school and to take charge of their education.	Annual leave	Annual leave
I do not have the option to send my child to school and I therefore take charge of their education.	Family-related leave or annual leave (699 if no family-related leave or no annual leave)	You are expected to work or take family-related leave or annual leave (699 if no family-related leave or annual leave)
I must take care of a dependant/child due to a school closure in relation to cases of COVID-19.	Family-related leave or annual leave (699 if no family-related leave or no annual leave)	You are expected to work or take family-related leave or annual leave (699 if no family-related leave or annual leave)
I am taking care of someone who is at high risk for severe illness from COVID-19. I have received the approval of the House's occupational nurse.	Family-related leave or annual leave (699 if no family-related leave or no annual leave)	You are expected to work or take family-related leave or annual leave (699 if no family-related leave or annual leave)
My child has been asked to get tested and I must take leave to bring them to the testing centre.	Family-related leave or annual leave (699 if no family-related leave or no annual leave)	Family-related leave or annual leave (699 if no family-related leave or no annual leave)
I must take care of a dependant/child because they have been asked to self-isolate.	Family-related leave or annual leave (699 if no family-related leave or no annual leave)	You are expected to work or take family-related leave or annual leave (699 if no family-related leave or annual leave)
I must accompany a dependent for their COVID- 19 vaccine appointment.	Family-related leave or annual leave (699 if no family-related leave or no annual leave)	Family-related leave or annual leave (699 if no family-related leave or no annual leave)
I must take care of a dependent because they are experiencing severe side-effects after receiving a COVID-19 vaccine.	Family-related leave or annual leave (699 if no family-related leave or no annual leave)	You are expected to work or take family-related leave or annual leave (699 if no family-related leave or annual leave)

\* Additional guidance may be developed and applied in accordance with these guidelines taking into consideration service area operational requirements. Please follow the local public health guidelines if you live in a highest risk setting such as hospitals and congregate living settings.

\*\* For exceptional situations, please consult with your Labour Relations advisor.