The Los Angeles County Department of Public Health (Public Health) is asking for your assistance to slow the spread of the novel (new) coronavirus in Los Angeles County. Globally, there continues to be a growing number of people infected with this virus which causes “coronavirus disease 2019” (abbreviated COVID-19). According to the World Health Organization, the worldwide spread of COVID-19 now qualifies as a pandemic. We need to work together to slow the spread of this infection locally.

We strongly recommend that all organizations review and update their emergency plans and consider ways to continue essential services if onsite operations must be reduced temporarily. We are particularly concerned about how a case of COVID-19 in a residential substance use setting (including substance use disorder treatment and sober living environments) such as yours might lead to the rapid spread of disease. We would like to provide you with some general information about COVID-19, as well as specific actions you should take to help slow the spread of respiratory infections, including COVID-19.

We encourage you to visit the DPH Novel Coronavirus webpage for resources including Guidance for Business and Employers, Frequently Asked Questions, and infographics: http://publichealth.lacounty.gov/media/Coronavirus/.

**General Information**

**What is novel coronavirus?**
Coronaviruses are a large family of viruses. Many of them infect animals, but some coronaviruses from animals can evolve (change) and infect humans, then spread from person-to-person. This is what happened with the current novel coronavirus. Diseases from coronaviruses in people typically cause mild to moderate illness, like the common cold. Some, like the SARS or MERS viruses, cause serious infections like pneumonia.

**What are common symptoms of COVID-19?**
Information to date shows this new virus causes symptoms consistent with a respiratory illness, such as cough, fever, and, in some, shortness of breath or difficulty breathing.

**How are coronaviruses spread?**
Like other respiratory illnesses, such as influenza, human coronaviruses most commonly spread to others from an infected person who has symptoms through:

- Droplets produced when an infected person coughs or sneezes.
- Close personal contact, such as caring for an infected person.
- Touching an object or surface with the virus on it, then touching your mouth, nose, or eyes before washing your hands.

COVID-19 is new and we continue learning more each day about how it spreads and how long it takes for people to become sick. As information changes, we will keep you informed.
Do not assume that someone is at risk for novel coronavirus infection based on their race/ethnicity or country of origin.

What preventive measures should be taken at an organizational level to reduce the spread of respiratory viruses, like the virus that causes COVID-19?

- Encourage and support your staff and volunteers to stay home when they are sick. Remind them to stay home and not return to work until they are free of fever for at least 72 hours without fever reducing medication.
- Provide adequate supplies for good hygiene, including easy access to clean and functional handwashing stations, soap, paper towels, and alcohol-based hand sanitizer (especially near food areas and restrooms).
- Minimize, where possible, close contact and the sharing of objects such as cups, food, and drink.
- Routinely clean and disinfect all frequently touched surfaces and objects, such as doorknobs, bannisters, countertops, faucet handles, and phones. Use the usual cleaning agents and follow the label directions.
- Provide clients of the facility and employees with accurate information about novel coronavirus and steps they can take to protect themselves and their families.
- Post information in common areas that serve as reminders of the need for all clients, employees and volunteers to engage in personal protective actions (materials for downloading are available at http://www.publichealth.lacounty.gov/media/Coronavirus/).

Everyday personal prevention actions include:

- Wash hands often with soap and water for at least 20 seconds or use alcohol-based hand sanitizer that contains at least 60% alcohol especially after going to the bathroom; before eating; and after blowing your nose, coughing, or sneezing.
- Cover coughs and sneezes with a tissue, and then dispose of the tissue and clean hands immediately. If you do not have a tissue, use your sleeve (not your hands).
- Environmental cleaning should be done with EPA-approved healthcare disinfectants consistent with recommended wet contact time. Reference: California Department of Public Health AFL for Environmental Infection Control for the Coronavirus Disease 2019 (COVID-19) (02/19/20)

What practices should we adopt or change to slow the transmission of respiratory illnesses?

- Assess all clients at the time of admission for symptoms of fever (temperature > 100.4 °F), acute (defined as the last 14 days) cough, and acute shortness of breath. Quickly move clients who present with one or more of these symptoms into an area that is isolated from the rest of the facility.
  - Designate a separate sick room (ideally in an area with an accessible bathroom) where clients with cold and flu symptoms can be housed in a separate building, room, or designated area.
  - Beds in this area should be placed at least 6 feet apart, when possible, and positioned head-to-toe.
  - Mobile screens can be used to encourage compliance with separation areas.
• Place clear signage outside all isolation rooms to identify it as an isolation room.
• Symptomatic clients should eat meals separate from clients without symptoms.
  o If symptomatic clients need to move through areas with clients without symptoms, they should be encouraged to perform hand hygiene, wear a surgical mask, and minimize the time in these areas.
• As much as possible, have staff exclusively assigned to work with people who are ill; avoid having the same staff providing services to clients who are ill, also providing services to clients who are asymptomatic.
• High-risk clients, defined as clients who are over the age of 65 or have a chronic medical illness (chronic lung, kidney or heart disease, diabetes or other immune compromising disease such as cancer) should be isolated separate from symptomatic clients if possible.
• Monitor staff for fever or acute respiratory symptoms (cough, shortness of breath, runny nose) before they start work
  o Staff with mild respiratory symptoms, but no fever should put on a surgical mask when interacting with clients. Staff should be trained to use surgical masks appropriately.
• Staff should wear personal protective equipment (PPE) such as masks, gloves or gowns only in the following conditions:
  o Staff interacting with symptomatic individuals should provide a facemask to the client and put on a facemask themselves during close contact with clients. Close contact is defined as within 6 feet for greater than 10 minutes for non-healthcare workers, or greater than 2 minutes if providing direct clinical care.
  o If staff is providing direct clinical care to a client that would involve contact (including administering medications, performing a physical exam or procedures), they should put on a facemask, gloves, eye protection and gown.
  o Make facemasks, eye protection, gowns, and gloves, available in clinical care areas for staff performing clinical duties.
  o Ensure all employees clean their hands, including before and after contact with clients, after contact with contaminated surfaces or equipment, and after removing items such as gloves, gowns and masks.
  o Make sure tissues are available and any sink is well-stocked with soap and paper towels for hand washing.
• All group activities, including group counselling, should be conducted to maintain appropriate social distancing to minimize close contact and to isolate symptomatic and non-symptomatic groups.
  o Group activities should be minimized and replaced with individual encounters, to the extent possible.
  o Group activities for symptomatic clients should be conducted separate from clients without symptoms.
  o The number of group activity participants should be minimized to the extent possible and should not exceed 10 participants in a room or closed space.
o Participants should be seated or positioned at least 6 feet apart from one another, and efforts should be made to avoid direct face-to-face positioning of chairs.

- Hand hygiene stations (sinks with antibacterial soap and alcohol gel products) should be readily available throughout the facility, esp. at the entrances of the facility. Make sure tissues are available and any sink is well-stocked with soap and paper towels for hand washing.
  o Ensure employees clean their hands according to CDC guidelines (https://www.cdc.gov/handhygiene/providers/index.html), including before and after contact with clients, after contact with contaminated surfaces or equipment, and after removing items such as masks, gloves and gowns.
  o Educate and remind clients to perform hand hygiene throughout the day, particularly after using the restroom and prior to eating their meals.

- Position a trash can near the exit inside any client rooms to make it easy for employees to discard items such as gloves, masks and gowns.

- Increased frequency of environmental cleaning should be done with EPA-approved healthcare disinfectants consistent with recommended wet contact time.

- Ensure there are no shared utensils, cups or linens and clients are requested to wash their hands prior to eating meals.

- Encourage and remind clients without symptoms to report to staff any new symptoms, including fever, cough or shortness of breath.

**What should our facility be prepared to do if there is increased community transmission of COVID-19?**

Increased community transmission of COVID-19 would indicate growing risk to the general public and that additional precautions may need to be taken to contain any local community transmission. Shelters should have a plan and be prepared to take these additional actions, if recommended by Public Health:

- Have a plan to communicate with your staff, volunteers and clients. Visit our website, publichealth.lacounty.gov for accurate and updated information that can be used for your communications. Identify and address potential language, cultural, and disability barriers associated with communicating COVID-19 information to workers and those you serve.

- Plan for worker absences. Do not require a healthcare provider’s note for employees or volunteers who are sick with acute respiratory illness to validate their illness or to return to work. Healthcare provider offices and medical facilities will be extremely busy and not able to provide such documentation in a timely way.

- Plan for ways to continue essential services if on-site operations are reduced temporarily.
• Post signs at facility entrance instructing visitors and clients to alert staff if they have fever, cough or shortness of breath. Do not discourage symptomatic clients from entering.
• Have a plan for quickly directing people who have signs or symptoms of a respiratory infection to an area of the facility that is isolated from other parts of the facility.
• Describe what actions the facility is taking to protect staff and clients, answer questions and explain what they can do to protect themselves and their fellow clients.

What should we do if we need to transfer patients to the hospital?
If you plan to transfer the client to a higher level of care due to worsening respiratory status, notify EMS that the client has an undiagnosed respiratory infection.
• If multiple clients in your facility become newly sick with fever and respiratory symptoms, notify Los Angeles County Department of Public Health at 213-240-7941 during daytime hours or (213) 974-1234 (After Hours Emergency Operator).

Additional Resources
• LAC DPH coronavirus website: http://www.ph.lacounty.gov/media/Coronavirus/
• LAC DPH coronavirus webpage for Health Professionals Includes travel alert posters and provider checklist: http://publichealth.lacounty.gov/acd/nCorona2019.htm
• Los Angeles Health Alert Network: The Department of Public Health (DPH) emails priority communications to health care professionals through LAHAN. Topics include local or national disease outbreaks and emerging health risks. http://publichealth.lacounty.gov/laohan/
• California Department of Public Health: https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Immunization/nCOV2019.aspx

If you have questions and would like to speak to someone call the Los Angeles County Information line 2-1-1 which is available 24 hours a day.

We appreciate your commitment and dedication to keeping Los Angeles County healthy.