

Novel Coronavirus (COVID-19)

Los Angeles County Department of Public Health Guidance for Homeless Shelters

The Los Angeles County Department of Public Health (Public Health) and Department of Health Services Housing for Health are asking for your assistance to slow the spread of the novel (new) coronavirus disease 2019 (abbreviated COVID-19) in Los Angeles County. There continues to be a growing number of people infected with this virus. 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 homeless shelter such as yours might lead to the rapid spread of disease and potentially jeopardize the health and safety of your clients and staff. 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.

The goals of this document are to help homeless shelter operators develop plans to:

- Prevent the spread of COVID-19 within your facility.
- Prevent spread of COVID-19 between and outside of facilities.

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 sickness, 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 sickness. Symptoms include:

- Cough
- Fever
- Shortness of breath or difficulty breathing.

Most clients with mild to moderate symptoms can be managed with care outside of the hospital. However, about 20% of clients will need to be hospitalized during their illness. Severe symptoms of COVID-19 include severe difficulty breathing (inability to speak several words at a time or to walk a few steps), persistent chest pain, confusion or inability to arouse, bluish lips or face, profound weakness, inability to eat or drink for one or more days, or inability to care for self in the shelter environment.

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How are coronaviruses spread?

Like other respiratory sicknesses, 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.

Steps to Protect the Health and Safety of Clients and Staff

Prevent and reduce spread of COVID-19 within your facility

<p>1. <i>Practice and promote universal precautions</i></p>	<p>Signage</p> <ul style="list-style-type: none">- Post signs for clients and staff on the importance of handwashing and hand sanitizing.- Provide signs and regularly remind clients to alert staff if they have a new fever, cough and/or shortness of breath. <p>Hygiene</p> <ul style="list-style-type: none">- 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 elbow (not your hands).- Minimize, where possible, close contact and the sharing of objects such as cups, utensils, food, and drink. <p>Social Distancing – Promote social distancing throughout the shelter, enabling clients and staff to stay at least 6 feet away from each other. Avoid shaking hands or giving hugs to others.</p> <ul style="list-style-type: none">- Re-arrange common areas in the facility to ensure that clients do not congregate.- Set up waiting rooms so chairs are separated by 6 or more feet and facing away from one another, with easy access to tissues, hand sanitizer, and a nearby sink to wash hands.- Beds should be placed at least 6 feet apart, when possible, and positioned head-to-toe, with heads positioned as far apart as possible.
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	<ul style="list-style-type: none">- Serve meals in a staggered manner or in outdoor areas to ensure that social distancing is maintained. Serve meals with the same group of clients at each meal to reduce the spread of infection.- Restrict visitation in the facility to essential staff only.- Cancel all group activities. Explore alternatives like individual sessions or telephonic or video sessions to enable clients to continue these activities.
2. Assess clients for symptoms to initiate necessary isolation protocols	<p>Screening</p> <ul style="list-style-type: none">- Assess all clients at the time of admission and daily for acute respiratory illness including cold or flu symptoms, feeling feverish or alternating sweats and chills, new cough, or difficulty breathing.- If able, consider assessing client temperatures upon admission and daily with a scanning or disposable thermometer. A fever is a temperature of 100.4 F or higher.- It is still cold and flu season and it is likely that many clients with symptoms will not have COVID-19. However, as the number of COVID-19 cases increases in the community, we are recommending that all residents with fever and cough or shortness of breath be considered to have COVID-19 and treated appropriately. Testing may not be necessary to confirm a clinical diagnosis. <p>Isolation Protocols – Rapidly move clients who present with one or more cold or flu symptoms into a separate sick area that is isolated from the rest of the facility (ideally in an area with an accessible bathroom).</p> <ul style="list-style-type: none">- Place clear signage outside all isolation areas for staff and clients to properly identify these areas to reduce intermingling of symptomatic and non-symptomatic individuals.- Symptomatic Clients<ul style="list-style-type: none">o If symptomatic clients need to move through areas with clients without symptoms, they should wear a surgical mask, and minimize the time in these areas.o The residents who have been identified to have come in close contact with the symptomatic client must be placed in quarantine for 14 days.o Close contact is defined as individuals who have been within 6 feet of the affected individual for greater than 10 minutes while the individual had symptomso Staff should consider monitoring these clients at least once a shift and more frequently if high-risk clients (age over 50, chronic medical problem, pregnant).o Symptomatic clients should eat meals separate from clients without symptoms.o Mobile screens (or other ways to form partitions – linens, etc.) should be used to encourage compliance with separation areas.o Staff may discontinue isolation for a client when both of the following conditions are met:<ul style="list-style-type: none">➤ At least 3 days (72 hours) have passed <i>since recovery</i> defined as resolution of fever without the use of fever-reducing medications and improvement in respiratory symptoms (e.g., cough, shortness of breath); AND at least 7 days have passed <i>since symptoms</i> first appeared.



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	<ul style="list-style-type: none"> ○ Encourage residents who are high-risk to call their primary care provider (PCP) if available if their symptoms worsen or to notify a staff member to call 911. When calling 911, staff members should notify the dispatcher that this client has severe COVID-19 symptoms. <p>- Non- Symptomatic Clients</p> <ul style="list-style-type: none"> ○ Designate a separate area for non-symptomatic clients who are also high-risk (age over 50, chronic medical problem, pregnant), when possible (separate from low-risk non-symptomatic and symptomatic clients). Consider placing high-risk clients in less densely crowded areas and in rooms with fewer than 10 beds. <p>Notify Los Angeles County Department of Public Health Acute Communicable Disease Control Program (213)-240-7941 during daytime hours or (213) 974-1234 (After Hours Emergency Operator) if two or more clients or staff who have had close contact become sick with acute respiratory illness (suspects) within 72 hours.</p>
<p>3. <i>Sick staff should stay home until they are clear to return to work</i></p>	<p>Symptomatic Staff</p> <ul style="list-style-type: none"> - Staff should monitor their symptoms daily and be advised to go home when they are feeling ill. <ul style="list-style-type: none"> ○ Staff with symptoms of COVID-19 (acute respiratory illness) should be instructed to go home and self-isolate. ○ Provide the staff member with home isolation instructions and encourage them to notify their healthcare provider, if symptoms worsen and as necessary. ○ Symptomatic staff who were directed to care for themselves at home may discontinue home isolation when both of the following conditions are met: <ul style="list-style-type: none"> ➤ At least 3 days (72 hours) have passed <i>since recovery</i> defined as resolution of fever without the use of fever-reducing medications and improvement in respiratory symptoms (e.g., cough, shortness of breath); AND at least 7 days have passed <i>since symptoms</i> first appeared.
<p>4. <i>Contacts of sick staff should stay home until they are clear to return to work</i></p>	<p>Potential Staff Exposures</p> <ul style="list-style-type: none"> - If a staff member has been working while sick (whether they have been confirmed to have COVID-19 or symptomatic but not confirmed), identify those staff members and individuals that the employee may have come into close contact with while sick. <ul style="list-style-type: none"> ○ Close contact is defined as individuals who have been within 6 feet of the affected staff for greater than 10 minutes while the employee had symptoms. ○ The residents who have been identified to have come in close contact with the symptomatic staff must be placed in quarantine for 14 days. ○ Staff members that were exposed to a symptomatic resident need to quarantine themselves for 14 days.

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	<ul style="list-style-type: none"> ➤ Remind symptomatic staff to stay home and not return to work until at least 3 days (72 hours) have passed <i>since recovery</i> defined as resolution of fever without the use of fever-reducing medications and improvement in respiratory symptoms (e.g., cough, shortness of breath); AND at least 7 days have passed <i>since symptoms</i> first appeared.
<p>5. <i>Steps to take if one or more positive COVID 19 case (s) is/are identified in a shelter</i></p>	<p>Potential Resident and Staff Exposures</p> <ul style="list-style-type: none"> - Put your emergency plan into action, to protect your clients, staff, and guests. - If you identify any guest with severe symptoms, call 911. Before transfer, notify the transfer team and medical facility if the guest is suspected of having COVID-19. Severe symptoms include: <ul style="list-style-type: none"> ○ Extreme difficulty breathing (not being able to speak without gasping for air) ○ Bluish lips or face ○ Persistent pain or pressure in the chest ○ Severe persistent dizziness or lightheadedness ○ New confusion, or inability to arouse ○ New seizure or seizures that won't stop - When within 6 feet of symptomatic clients, surgical masks (at minimum) should be worn by staff and client. - Confine clients with mild respiratory symptoms consistent with COVID-19 infection to individual rooms, if possible, and have them avoid common areas. - Decisions about whether clients with mild illness due to suspected or confirmed COVID-19 should remain in the shelter or be directed to alternative housing sites should be made in coordination with the Department of Public Health via the call center below. - A call center has been established to assist healthcare providers, homeless service providers, street outreach teams and law enforcement to find an isolation or quarantine bed for their clients. Call (833)-596-1009 for bed availability. - If COVID-19 infection has been confirmed in guests or staff, suspend new admissions, visitors, and transportation to other institutions for 14 days. Restrict the movement of persons within the facility and from leaving the facility. - Minimize the number of staff members who have face-to-face interactions with clients with respiratory symptoms. Provide instructions to prevent disease spread. If staff are handling client belongings, they should use disposable gloves. Staff should be monitored for symptoms. Exposed staff should be sent home for self-quarantine for 14 days. - Ensure that beds/mats are at least 6 feet apart, and request that all clients sleep head-to-toe.



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	<ul style="list-style-type: none"> - Post information and keep your staff, clients and guests informed about public health recommendations to prevent disease spread and about changes to services that might be related to the outbreak. - Ensure that all common areas within the facility follow good practices for environmental cleaning. - For the first laboratory case of COVID-19, a Public Health Nurses (PHN) will contact the site to consult on additional measures for separation and to screen close contacts. To report a laboratory confirmed case of COVID-19 call the Acute Communicable Disease Program (213)-240-7941 during daytime hours or (213) 974-1234 (After Hours Emergency Operator). - Environmental Health Specialists can provide technical assistance on sanitation and cleaning practices. An Environmental Health Specialist can be requested by calling the Environmental Health Program (626) 430-5201.
<p>6. <i>Ensure staff wear personal protective equipment, when indicated</i></p>	<p>Personal Protective Equipment for Staff</p> <ul style="list-style-type: none"> - Staff interacting with symptomatic individuals should provide a facemask to the client and put on a facemask themselves during close contact with clients. - If staff is providing direct clinical care to a known positive COVID-19 client that would involve contact (including administering medications, delivering meals to bedside, or performing a physical exam or procedures), they should put on a facemask, gloves, and eye protection. A gown is recommended if available. - Make facemasks, eye protection, gowns, and gloves, available in clinical care areas for staff performing clinical duties. - Ensure all employees wash 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. - Make sure tissues are available and all sinks are well-stocked with soap and paper towels for hand washing.
<p>7. <i>Adopt sanitation and housekeeping best practices</i></p>	<p>Best Practices for Sanitation and Housekeeping</p> <ul style="list-style-type: none"> - Supplies <ul style="list-style-type: none"> ○ 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). ○ Hand hygiene stations (sinks with antibacterial soap and alcohol gel products) should be readily available throughout the facility, especially at the entrances of the facility. ○ Make sure tissues are available and all sinks are well-stocked with soap and paper towels for hand washing. <ul style="list-style-type: none"> ➤ Educate and remind clients to perform proper hand hygiene throughout the day, particularly after using the restroom and prior to eating their meals.

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- 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.
- **Cleaning Practices**
 - Routinely and effectively clean and disinfect all frequently touched surfaces and objects, such as doorknobs, bannisters, countertops, faucet handles, and phones.
 - Environmental cleaning should be done with EPA-approved healthcare disinfectant 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)*
 - If an EPA-registered disinfectant is not available, use chlorine bleach solution (approximately 4 teaspoons of bleach in 1 quart of water or 5 tablespoons (1/3 cup) bleach per gallon of water). Prepare the bleach solution daily or as needed. Test strips can be used to check if the solution is the right strength.
 - Alcohol-based disinfectants may be used if > 70% alcohol and contact time is per label instructions.
- Linens, eating utensils, and dishes belonging to those who are sick do not need to be cleaned separately, but should not be shared without thorough washing. Instruct cleaning staff to avoid “hugging” laundry before washing it to avoid self-contamination. Instruct cleaning staff to wash their hands with soap and water or an alcohol-based hand sanitizer immediately after handling infected laundry.

Prevent and reduce spread of COVID-19 between facilities

Transportation

- Limit transport of all clients to essential purposes only. Non-essential transportation should be postponed or cancelled.
- When transportation of symptomatic clients is necessary:
 - Symptomatic clients should NOT be transported with non-symptomatic clients.
 - Have symptomatic clients wear facemasks.
 - Avoid transporting multiple symptomatic clients together. When multiple clients need to be transported simultaneously, appropriate social distancing (> 6 feet) should be practiced both for clients and the driver. The client should be placed on the opposite side of the car from the driver in the seat farthest away from the driver’s seat.
 - Vehicle windows should be rolled down to improve ventilation in the car.
 - Transporting vehicles should be outfitted with plastic tarps or coverings that can be cleaned and appropriately disinfected after each transport.
 - Include supplies for good hygiene, including tissues, trashcans or trash bags for disposal of used tissues, and alcohol-based hand sanitizer.
 - If you plan to transfer the client to a higher level of care due to worsening respiratory status, notify EMS or other transporters that the client has an undiagnosed respiratory infection.

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- **Guidance for Drivers**

- Drivers of symptomatic clients should take appropriate precautions, including wearing personal protective equipment, including facemask, gloves, eye protection and gown.

Reporting Multiple Cases of Symptomatic Clients or Staff

- If more than 2 clients in your facility become newly sick with fever and respiratory symptoms within 3 days (72 hours), notify Los Angeles County Department of Public Health at 213-240-7941 during daytime hours or (213) 974-1234 (After Hours Emergency Operator).
- Consider transferring symptomatic clients who are unable to self-isolate during their illness to OEM's quarantine/isolation housing. Call DPH's referral line at 833-596-1009.

Additional Resources

- LAC DPH coronavirus website: <http://www.ph.lacounty.gov/media/Coronavirus/>
- 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/lahan/>
- [FAQ](#)
- [What You Should Know \(Infographic\)](#)
- [Environmental Health \(Infographic\)](#)
- [Mental Health](#)
- [Staying at Home If You Are Sick - Poster](#)
- [Handwashing](#)
- [What to Do If I Am Exposed](#)

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.