



Updated Los Angeles County COVID-19 Response Plan

Los Angeles County Department of Public Health
Wednesday, September 21, 2022



TABLE OF CONTENTS

Metrics to Assess Risk and Assign Appropriate Prevention Measures 3

- CDC Community Levels 3
 - TABLE 1: CDC COVID-19 Community Levels 3
 - TABLE 2: Community Safety Protection Measures and Prevention Strategies (Aligned with CDC Community Levels and Community Transmission) 4
- LAC Early Alert Signals and Levels of Concern 7
 - TABLE 3: LAC Early Alert Signals 7
- Priority Sector Mitigation Measures 8
 - TABLE 4: Priority Sector Response 8

LAC COVID-19 Preparedness Plan 13

- TABLE 5: Preparedness Dashboard 13
- Outbreak Management Preparedness 15
- Vaccination Preparedness..... 15
- Testing Preparedness..... 16
- Therapeutic Distribution Preparedness 16
- Surveillance Preparedness 16

As we respond to the COVID-19 pandemic, Los Angeles County (LAC) will continue to utilize both the Centers for Disease Control and Prevention's (CDC) community monitoring measures and the California SMARTER plan to guide the realignment of our local public health response. While we welcome our recovery from various dangerous variant surges, we anticipate the possibility of future unpredictable waves of new infections due to new variants and other factors that will require ongoing monitoring of early warning metrics and implementation of approaches to meet changing mitigation needs.

The role of the LAC Department of Public Health (DPH) remains ensuring an equitable distribution of the resources and opportunities needed to prevent COVID-19 transmission and protect residents and workers from devastating consequences associated with COVID-19 illness. As we have seen over the past two and a half years, the pandemic has illuminated stark inequities in the burden of disease by race/ethnicity and geography, with Black and Brown individuals and those living in under-resourced communities experiencing higher case, hospitalization, and death rates. These disparities did not happen by chance and reflect decades of disinvestment, marginalization, and racism.

The solutions to eliminating the gaps in health outcomes require transforming systems, policies, and practices. Engaging in this work calls for a long-term commitment to centering equity work at all levels, including mitigation efforts. Calls to 'returning to normal' and minimizing public health response activities can have an unintended consequence of exacerbating inequitable outcomes since the existing health care and social services systems are not yet organized to provide those most vulnerable and marginalized with the necessary resources to mitigate the impact of the virus.

To ensure an equity focused response, LAC DPH is organizing mitigation actions to:

- Protect the most vulnerable, including those at risk of experiencing elevated rates of illness and death from COVID-19
- Protect hospitals and health system functioning
- Prevent unconstrained spread and significant illness
- Prepare for future potential challenges presented by the evolving conditions of the virus

Metrics to Assess Risk and Assign Appropriate Prevention Measures

CDC Community Levels

Los Angeles County (LAC) will continue to use the Centers for Disease Control and Prevention’s (CDC) COVID-19 [Community Level Matrix](#) (Table 1) to guide assessment of risk across the county and inform the adoption of prevention strategies as described in Table 2. LA County will implement strategies for a higher community level when results for both hospital metrics in the framework are at or above the thresholds for the higher community level for at least fourteen (14) consecutive days. Strategies will revert back to a lower community level when the result for at least one hospital metric has fallen below the threshold for the higher community level for at least fourteen (14) consecutive days.

TABLE 1: CDC COVID-19 Community Levels

New Cases (per 100,000 population in the last 7 days)	Level of Indicators	Low	Medium	High	LA County’s Current Values <u>New Cases:</u>
Fewer than 200	New COVID-19 admissions per 100,000 population (7-day total)	<10.0	10.0-19.9	≥20.0	Latest values are updated weekly and posted on the DPH Website
	Proportion of staffed inpatient beds occupied by COVID-19 patients (7-day average)	<10.0%	10.0-14.9%	≥15.0%	
200 or more	New COVID-19 admissions per 100,000 population (7-day total)	NA	<10.0	≥10.0	
	Proportion of staffed inpatient beds occupied by COVID-19 patients (7-day average)	NA	<10.0%	≥10.0%	

TABLE 2: Community Safety Protection Measures and Prevention Strategies (Aligned with CDC Community Levels and Community Transmission)

The Community Safety Protection Measures and Prevention Strategies below reflect CDC, state, and county mitigation efforts in four areas: indoor masking, testing, vaccination verification, and ventilation. Federal and state requirements are embedded in **Table 2** below and will be changed if and when these requirements change.

*Note: When there is circulation of an emerging COVID-19 variant of concern that shows potential evidence of vaccine avoidance, these recommendations and requirements will be modified.

		CDC Community Level ¹ : LOW		CDC Community Level ¹ : MEDIUM		CDC Community Level ¹ : HIGH
Community Transmission: Weekly Case Rate		<100/100K	≥100/100K	<100/100K	≥100/100K	All Transmission Levels
Indoor Masking Note: Employers must offer well-fitting medical masks and respirators to employees working indoors in close contact with other workers and/or customers at all sites	All individuals, regardless of vaccination status	Individual preference ³ , unless required by site	Strongly recommended unless required by site	Individual preference ³ , unless required by site	Strongly recommended unless required by site	Required indoors in all public spaces and businesses
	Individuals at elevated risk²	Strongly recommended in higher risk settings unless required by site	Strongly recommended Unless required by site	Strongly recommended in higher risk settings unless required by site	Strongly recommended unless required by site	Required
	For those exposed	Required to mask indoor for 10 days after last day of exposure	Required to mask indoor for 10 days after last day of exposure	Required to mask indoor for 10 days after last day of exposure	Required to mask indoor for 10 days after last day of exposure	Required to mask indoor for 10 days after last day of exposure
	For those confirmed positive	Required to isolate for up to 10 days unless test negative on day 6; mask strongly recommended for those who test negative on day 6-10; in workplace settings masks are required for the full 10 days	Required to isolate for up to 10 days unless test negative on day 6; mask strongly recommended for those who test negative on day 6-10; in workplace settings masks are required for the full 10 days	Required to isolate for up to 10 days; mask strongly recommended for those who test negative on day 6-10, in workplace settings masks are required for the full 10 days	Required to isolate for up to 10 days unless test negative on day 6; mask strongly recommended for those who test negative on day 6-10; in workplace settings masks are required for the full 10 days	Required to isolate for up to 10 days; mask strongly recommended for those who test negative on day 6-10; in workplace settings masks are required for the full 10 days

		CDC Community Level ¹ : LOW		CDC Community Level ¹ : MEDIUM		CDC Community Level ¹ : HIGH
Community Transmission: Weekly Case Rate		<100/100K	≥100/100K	<100/100K	≥100/100K	All Transmission Levels
Indoor Masking (cont'd)	All healthcare settings and congregate care facilities	Required	Required	Required	Required	Required
	Correctional and detention facilities, homeless and emergency shelters	Individual preference ³ outside of clinical areas unless required by agency	Strongly recommended, unless required by agency	Required	Required	Required
	Public transit, transportation hub, and transportation service (including shuttle bus, ride share, taxis, and medical transport)	Strongly recommended, unless required by agency	Required	Strongly recommended, unless required by agency	Required	Required
Testing	Routine screening testing in workplaces	As required by the site or sector	As required by the site or sector	As required by the site or sector	As required by the site or sector	As required by the site or sector
	For those exposed	Required if not quarantining	Required if not quarantining	Required if not quarantining	Required if not quarantining	Required if not quarantining
	For those symptomatic/confirmed positive	Required to exit isolation after day 5; otherwise Isolate for 10 days	Required to exit isolation after day 5; otherwise Isolate for 10 days	Required to exit isolation after day 5; otherwise Isolate for 10 days	Required to exit isolation after day 5; otherwise Isolate for 10 days	Required to exit isolation after day 5; otherwise Isolate for 10 days
	Before gathering socially with those at elevated risk	Individual preference ³ , unless required by site/host	Strongly recommended, unless required by site/host	Individual preference ³ , unless required by site/host	Strongly Recommended, unless required by site/host	Strongly recommended, unless required by site/host
Vaccination/ Negative Test Verification	For healthcare workers, employees at healthcare facilities, and employees at high-risk congregate care settings and homeless shelters	Vaccination Required	Vaccination Required	Vaccination Required	Vaccination Required	Vaccination Required
	For visitors indoors at healthcare facilities, including congregate care sites	Strongly recommended unless required by site	Strongly recommended unless required by site	Strongly recommended unless required by site	Strongly recommended unless required by site	Require all visitors, regardless of COVID vaccination status, to be tested (PCR or Antigen) prior to indoor visitation

		CDC Community Level ¹ : LOW		CDC Community Level ¹ : MEDIUM		CDC Community Level ¹ : HIGH
Community Transmission: Weekly Case Rate		<100/100K	≥100/100K	<100/100K	≥100/100K	All Transmission Levels
Vaccination/ Negative Test Verification (cont'd)	Outdoor mega events	Individual site preference	Individual site preference	Individual site preference	Individual site preference	Individual site preference
	Indoor mega events	Individual site preference	Individual site preference	Individual site preference	Individual site preference	Strongly recommended unless required by site
	For staff in homeless shelters	Vaccination Required	Vaccination Required	Vaccination Required	Vaccination Required	Vaccination Required
Environmental Mitigation	Ventilation throughout indoor spaces	Strongly recommend to ensure and maintain improved ventilation throughout indoor spaces	Strongly recommend to ensure and maintain improved ventilation throughout indoor spaces	Strongly recommend to ensure and maintain improved ventilation throughout indoor spaces	Strongly recommend to ensure and maintain improved ventilation throughout indoor spaces	Strongly recommend to ensure and maintain improved ventilation throughout indoor spaces

¹CDC recommends use of [COVID-19 Community Levels](#) to determine the impact of COVID-19 illness on health and healthcare systems and the prevention measures to use for individuals, households, and communities. The CDC Community Level can be Low, Medium, or High and is determined by the higher of the new COVID-19 admissions and inpatient beds occupied by COVID-19 patients metrics, based on the current level of new cases per 100,000 population in the past 7 days.

²Individuals at elevated risk include: elderly, unvaccinated, those with underlying medical conditions, immunocompromised individuals, and those living in high poverty communities. This means that a person with one or more of these conditions who gets very sick from COVID-19 (has severe illness from COVID-19) is more likely to: be hospitalized, need intensive care, require a ventilator to help them breathe, or die. See [CDC website](#) for more details on the underlying medical conditions associated with elevated risk of severe COVID-19 illness.

³Individual preference means that no person can be prevented from wearing a mask as a condition of participation in an activity or entry into a business.

LAC Early Alert Signals and Levels of Concern

Public Health will monitor the following signals to provide early indication of concerning trends that can result in future high rates of transmission and/or increased illness severity. The signals in **Table 3** below include three (3) community-wide measures (variants of concern, Emergency Department COVID-19 visits, cumulative case rate in high poverty communities) and four (4) sector specific measures (outbreaks at Skilled Nursing Facilities [SNFs], outbreaks at kindergarten through 12th grade schools, outbreaks at settings assisting persons experiencing homelessness [PEH], clusters at worksites). An alert in any measure that reaches the threshold for medium or high concern will trigger an in-depth review of contributing factors and the possibility of modifications to community prevention strategies as outlined in **Table 4: Mitigation Measures for Priority Sectors**.

TABLE 3: LAC Early Alert Signals

LAC Early Alert Signals: Indicator Thresholds	LAC Early Alert Signal: Low Concern	LAC Early Alert Signal: Medium Concern	LAC Early Alert Signal: High Concern	LAC Early Alert Signals: LA County's Current Values
Percent of specimens sequenced that are identified as a new variant or subvariant of Interest* <i>(based on WHO, CDC, or local designation)</i>	Less than 10% of sequenced specimens	10%-20% of sequenced specimens	More than 20% of sequenced specimens	Latest values are updated weekly and posted on the DPH Website
7-day average of the percent of Emergency Department (ED) encounters classified as coronavirus-related	Less than 5% of ED encounters	Between 5% and 10% of ED encounters	More than 10% of ED encounters	
7-day cumulative crude case rate for the lowest income areas (30-100% area poverty)	Case rate is <100 per 100,000	Case rate is 100-200 per 100,000	Case rate is >200 per 100,000	
Average 14-day percentage increase in wastewater SARS-CoV-2 concentration	Less than 10%	10%-100%	More than 100%	
Number of new outbreaks in skilled nursing facilities over the past 7 days	≤10 new outbreaks in past 7 days	11-20 new outbreaks in past 7 days	>20 new outbreaks in past 7 days	
Number of new outbreaks in TK-12 school classrooms over the past 7 days	≤10 new outbreaks in past 7 days	11-20 new outbreaks in past 7 days	>20 new outbreaks in past 7 days	
Number of new outbreaks in PEH settings over the past 7 days	≤10 new outbreaks in past 7 days	11-20 new outbreaks in past 7 days	>20 new outbreaks in past 7 days	
Number of worksite cluster reports in the past 7 days	< 150 worksite cluster reports in past 7 days	150-350 worksite cluster reports in past 7 days	> 350 worksite cluster reports in past 7 days	

*A “new” variant or subvariant of interest is defined as a variant or subvariant that has been detected in LA County for less than 12 weeks from the date it was first detected locally for the 5th time. If a new variant of interest is also designated a Variant of High Consequence based on WHO or CDC designation, it will result in immediate designation at the level of “High Concern.”

Priority Sector Mitigation Measures

For each of the four (4) sectors, Table 4 provides additional general mitigation measures and other measures that should be implemented based on the level of concern triggered in Table 3: LAC Early Alert Signal. Further measures might be considered beyond what is listed in Table 4.

NOTE: All sectors should follow the minimum requirements related to **indoor masking, testing, vaccination verification, and ventilation measures** set forth in Table 2: The Community Safety Protection Measures and Prevention Strategies.

TABLE 4: Priority Sector Response

General Mitigation Measures	LAC Early Alert Signal: Low Concern	LAC Early Alert Signal: Medium Concern	LAC Early Alert Signal: High Concern
SECTOR: Skilled Nursing Facilities			
*The measures in this table are general information for the public. Healthcare facilities must follow specific LAC DPH guidance and CDPH and CMS requirements.			
<ul style="list-style-type: none"> Strongly recommend that those that are eligible are up-to-date with their COVID-19 vaccines (required for SNF employees). Ensure adequate testing capacity to meet routine screening and response testing requirements as defined by the state’s All Facility Letters (AFLs), county HOOs, and CMS QSO 20-30, whichever is more stringent. Ensure access to therapeutics. Test all symptomatic staff and residents. Report all cases among staff and residents. Continue aggressive management of outbreaks and expanded infection control measures. Conduct contact tracing and assure proper isolation of cases and quarantining of close contacts based on the county HOO. Test 			<ul style="list-style-type: none"> Require N95 respirators for all staff during the entire time while in the facility.

General Mitigation Measures	LAC Early Alert Signal: Low Concern	LAC Early Alert Signal: Medium Concern	LAC Early Alert Signal: High Concern
<p>contacts within facility as required after exposure.</p> <ul style="list-style-type: none"> Continue to provide consultation, education and information on optimal infection control practices. Prioritize DPH assistance with outbreaks. 			
SECTOR: Transitional Kindergarten (TK)-12 Grade			
<ul style="list-style-type: none"> Strongly recommend that all eligible staff and students are up-to-date with their COVID-19 vaccines. Strongly recommend that symptom screenings be conducted for staff and students. Follow COVID-19 exposure management guidance for TK-12 schools. Ensure response testing capacity at K-12 schools. Continue offering group contact tracing option to schools as an alternative to individual contact tracing in TK-12 schools. Report clusters of cases among staff and students. Prioritize DPH assistance with outbreak management. During an outbreak, the Public Health outbreak response team may require changes in safety protocols. This may include more stringent guidance on masking, testing, and isolation periods. Strongly encourage school-based health centers to enroll as COVID-19 vaccine providers. 	<ul style="list-style-type: none"> Actively encourage students and staff to stay home when sick. 	<ul style="list-style-type: none"> Actively encourage students and staff to stay home when sick. Recommend testing before/after large school events and before return to school after breaks as resources allow. 	<ul style="list-style-type: none"> Actively encourage students and staff to stay home when sick. Strongly recommend masking indoors for high- risk activities, including indoor medium- and high-contact sports, singing, band/orchestra. Strongly recommend periodic testing for those participating in high-risk indoor activities, including indoor medium- and high-contact sports, singing, band/orchestra as resources allow. Strongly recommend testing before/after large school events and before return to school after breaks as resources allow.

General Mitigation Measures	LAC Early Alert Signal: Low Concern	LAC Early Alert Signal: Medium Concern	LAC Early Alert Signal: High Concern
SECTOR: Persons Experiencing Homelessness (PEH)			
<ul style="list-style-type: none"> • Strongly recommend that those that are eligible are up-to-date with their COVID-19 vaccines. • Ensure capacity for asymptomatic screening and response testing of residents at shelters using point-of-care or other tests. • Ensure access to therapeutics. • Test all symptomatic persons for COVID-19 regardless of vaccination status. • Continue to provide consultation, education, and information on optimal infection control practices. • Provide cohorting/isolation space onsite at congregate facilities where possible. • Cohort and quarantine close contacts while onsite in congregate facilities and allow them to move about the community with no restrictions. • Assure proper isolation of cases based on the county HOO. • Report all cases among staff and residents to DPH. • Prioritize DPH assistance with outbreak management. • Continue aggressive management of outbreaks and expanded infection control measures. 	<ul style="list-style-type: none"> • Offer high-quality masks to all residents. 	<ul style="list-style-type: none"> • Offer high quality masks to all residents. • Consider conducting weekly screening testing with point-of-care or other tests for residents and staff if resources allow 	<ul style="list-style-type: none"> • Offer well-fitting medical masks or respirators to all residents. • Strongly recommend conducting, at minimum, weekly screening testing of all residents and staff, regardless of vaccination status. If resources allow, conduct screening testing twice a week for shelter staff and residents, regardless of vaccination status. • Staff that are not up to date on their vaccinations are required to test at least once weekly.
SECTOR: Worksites			
<ul style="list-style-type: none"> • Employers required to offer well-fitting medical masks and respirators to employees working 	<ul style="list-style-type: none"> • Strongly recommend masking indoors for 	<ul style="list-style-type: none"> • Strongly recommend masking indoors and in 	<ul style="list-style-type: none"> • Strongly recommend masking indoors and in shared vehicles for all workers.

General Mitigation Measures	LAC Early Alert Signal: Low Concern	LAC Early Alert Signal: Medium Concern	LAC Early Alert Signal: High Concern
<p>indoors in close contact with other workers and/or customers.</p> <ul style="list-style-type: none"> • Ensure information regarding vaccinations, testing and therapeutics to employees. • Encourage worker vaccination. • Require symptomatic workers to isolate and test. • Workers who have a close contact or are exposed to a COVID-19 case must test within 3-5 days as soon as possible and wear a well-fitting mask while indoors around others. • Employers required to report to DPH if 3 or more COVID-19 cases are known or reported at a worksite within a 14-day period. • Investigate workplace outbreaks; employers to implement safety measures that limit transmission. • Continue to provide consultation, education, and information on optimal infection control practices. • Optimize ventilation at worksites. • Actively encourage and support employees to stay home when sick. 	<p>workers at elevated risk with significant contact with the public or other workers.</p>	<p>shared vehicles for all workers.</p> <ul style="list-style-type: none"> • Increase risk messaging at high-risk worksites such as manufacturing and warehousing. • Encourage physical distancing in communal areas, such as breakrooms and cafeterias. 	<ul style="list-style-type: none"> • Increase risk messaging to high-risk worksites such as manufacturing and warehousing. • Encourage remote work where operationally feasible, especially for workers at elevated risk. • Strong recommendation to implement physical distancing in communal areas such as breakrooms and cafeterias.
SECTOR: Highly Impacted Communities			
<ul style="list-style-type: none"> • Increase vaccination and booster coverage. • Ensure access to vaccinations, testing and therapeutics in communities hardest-hit by COVID-19. 	<ul style="list-style-type: none"> • Continue investment in community-based organizations (CBOs) and faith-based organizations (FBOs) working in 	<ul style="list-style-type: none"> • Prioritize community and workplace outreach and vaccination efforts in communities showing increased rates of transmission. 	<ul style="list-style-type: none"> • Continue to prioritize community and workplace outreach and vaccination efforts in communities showing increased rates of transmission and/or illness severity.

General Mitigation Measures	LAC Early Alert Signal: Low Concern	LAC Early Alert Signal: Medium Concern	LAC Early Alert Signal: High Concern
	<p>communities hardest hit to provide resource linkages, conduct COVID-19 outreach and education, and facilitate access to vaccination opportunities.</p> <ul style="list-style-type: none"> Continue Public Health Councils program to provide critical support to low-wage essential works; consider broader efforts to support other essential, low-wage worker industries not previously included in the pilot program. 	<ul style="list-style-type: none"> Begin to assess quarantine and isolation (QI) housing capacity if rates of transmission and/or illness severity continue to increase. Expand PH Council outreach in essential low-wage worker industries disproportionately impacted by outbreaks. Support access to PPE and screening testing in priority sectors and communities. Tailor CBO/FBO messaging for communities of concerns. 	<ul style="list-style-type: none"> Promote enhanced and targeted outreach by CBOs and other partners to support growing demand for education resources. Explore increased QI housing capacity, if necessary. Support targeted PPE and screening testing access in priority sectors and communities. Amplify CBO/FBO messaging for communities of concern; convene CBO/FBO partners to discuss strategies and resources to mitigate the spread of COVID-19.

LAC COVID-19 Preparedness Plan

Much of the COVID-19 Response Plan depends on our ability to focus resources on response actions and preparedness activities. Response actions include addressing increasing levels of community risk and early alert signals that may be sector specific. Preparedness activities are focused on strategies that consistently allow the County to respond to changing conditions.

TABLE 5: Preparedness Dashboard

Preparedness Actions	Needs Improvement	Adequate	Outstanding	LA County's Current Values
Access to vaccines: Number of mobile vaccination sites per week	Less than 200	200-300	More than 300	Latest values are updated weekly and posted on the DPH Website
Access to vaccines: Number of fixed vaccination sites	Less than 900	900-1,100	More than 1,100	
Access to vaccines: Percentage of eligible homebound residents referred to DPH and vaccinated who received their vaccine within 2 weeks from date of referral	Less than 60%	60%-75%	More than 75%	
Access to vaccines: Percentage of eligible residents 12+ in the most vulnerable communities ¹ who have had 1+ additional dose/booster	Less than 45%	45%-60%	More than 60%	
Outbreak management: Percentage of high-risk worksite outbreaks ² that have had at least one site visit by DPH	Less than 75%	75%-85%	More than 85%	
Testing access for the Public: Average wait time across all County-run testing sites	More than 1 hour	Between 30-60 minutes	Less than 30 minutes	
Testing access at Schools: Percentage of TK-12 public schools that have capacity for response testing	Less than 80%	80%-90%	More than 90%	

Preparedness Actions	Needs Improvement	Adequate	Outstanding	LA County's Current Values
Testing access at SNFs: Percentage of Skilled Nursing Facilities (SNFs) that have capacity for routine response testing	Less than 90%	90%-99%	100%	
Access to therapeutics: Number of sites in the most vulnerable communities ¹ that dispense therapeutics ³	Less than 150 sites	150-250 sites	More than 250 sites	
Access to therapeutics: Percentage of eligible residents using the call center who received recommended therapeutics	Less than 80%	80%-90%	More than 90%	
Surveillance – Sequencing: Number of positive case specimens that are sequenced per week	Less than 300	300-1,200	More than 1,200	
Surveillance –Wastewater: Number of Service Planning Areas (SPAs) represented in wastewater collection and testing 2X/week	Less than 5	5-7	8	
Surveillance – EDs: Percentage of EDs reporting COVID-like illness data	Less than 80%	80%-90%	More than 90%	

¹ The “most vulnerable” communities are classified based upon at least 11 community characteristics, including economic, housing, environment, social, education, transportation and health care compiled in the California Department of Public Health Vaccine Equity Metric or by having a fully vaccinated population coverage less than the overall Los Angeles County estimate.

² High-risk worksite outbreaks are defined as 1) manufacturing or warehousing work settings with at least 50 employees; 2) airline/airport setting; or 3) any industry with 5 or more epidemiologically linked cases. High-risk worksite outbreak definitions may change at higher levels of community transmission and/or when number of outbreaks exceed local investigation capacity.

³ Therapeutics include oral and injectable medications used to prevent infection or disease progression among those with infection.

The lessons we have learned from navigating more than two and a half years of the pandemic will inform preparedness activities for LA County. The five focus areas identified below include: preparedness for outbreak management, vaccine distribution/information dissemination, testing, therapeutic distribution, and surveillance.

Outbreak Management Preparedness

Worksites are required to report clusters of three (3) or more cases within 14 days to DPH as part of a broader strategy to ensure workplace safety and lower the risk of COVID-19 transmission at the worksite. Worksite outbreak management strategies will include the following:

- Contact will be made with all worksites reporting an outbreak to provide information about employer responsibilities and recommendations/requirements for mitigation of additional spread.
- Sites experiencing outbreaks may be required by DPH to implement mitigation measures, such as indoor masking, routine testing, distancing, and other infection control measures, to limit the spread of COVID-19 among workers at a worksite.

Vaccination Preparedness

Vaccinations provide the most powerful personal and community protection from COVID-19. Increasing coverage by ensuring access and addressing concerns regarding vaccine efficacy and safety remain priority activities. The following actions are essential components of the preparedness plan:

- Increase vaccination and booster coverage among those at elevated risk for severe illness and those working/living with those at elevated risk.
- Maintain a network of at least 300 mobile teams per week that can provide access to vaccines in low-coverage communities and at schools.
- Maintain an extensive fixed vaccination clinic network to provide access across the entire county.
- Increase numbers of medical providers offering vaccines to their patients through their routine services. Emphasize pediatricians incorporating COVID-19 vaccination into routine vaccination practice.
- Increase participation of health plans in ensuring homebound residents have access to vaccinations and boosters.
- Maintain homebound services to provide vaccinations and booster to those at elevated risk for severe illness.
- Increase the number of residents trained as community ambassadors, parent ambassadors, and student ambassadors.
- Increase funding for CBOs and FBOs to support dissemination of vaccination information and promote access to vaccine clinics.
- Provided expand services in at least 3 Public Health vaccination sites to provide multiple COVID-19 resources including vaccination, testing, therapeutics, and mental health services.

Testing Preparedness

- Testing may continue to be required by businesses, local or state HOOs, Cal/OSHA or state AFLs in high-risk settings (e.g., SNFs, shelters, correctional facilities, health care facilities, schools), for entry into Mega Events for those not fully vaccinated, and for outbreak management.
- Access to free and accessible testing for those with symptoms, exposures, exiting isolation or quarantine, or complying with travel and return to work/school requirements, is important. While there are requirements that health plans provide reimbursement to their members for testing, not everyone is insured and there is neither sufficient supply of tests nor ability for all members to purchase tests. Community testing sites that provide free and accessible testing to residents will remain essential over the upcoming months.
- Distribution of antigen test kits continues to be needed in high-risk settings and communities with high case rates, where testing remains an essential strategy for protecting workers and community members/residents.

Therapeutic Distribution Preparedness

The supply of effective therapeutics are currently widely available but there remains a need to ensure that those with less access to health care can receive appropriate therapeutics. This includes the following:

- Ensure a vast network of providers with information, supply of therapeutics, and prescribing ability across the county, with emphasis on deep penetration in hard hit and low-resourced communities.
- Ensure a vast network of distribution sites (including pharmacies and community clinics) that can distribute oral medications with no barriers with deep penetration in hard-hit and less-resourced communities.
- Provide a call center where residents can get more information about therapeutics and how to access therapeutics; provide culturally and linguistically appropriate information and information on accessing free medications.
- Provide a telehealth platform that provides services free of charge for those who are uninsured, underinsured or have difficulty accessing therapeutics through their own providers. This resource would augment sites that can prescribe and distribute oral therapeutics in low-resourced communities.

Surveillance Preparedness

To maintain an early alert system that can track the presence of emerging variants of concern, the following is required:

- Capacity to sequence at least 300 positive specimens each week.
- Ability to expand wastewater surveillance to all areas of the county.
- Expanded sentinel surveillance capacity to detect changing patterns in community rates of respiratory illness that might indicate the emergence of a new variant.