This checklist should be used by managers and operators of unlicensed group and transitional housing facilities. It lists the steps necessary to control a COVID-19 outbreak. Please also see the Alameda County Public Health Department (ACPHD) COVID-19 Recovery Webpage here for more resources.

### When you have an outbreak, an outbreak investigator (OI) from ACPHD will be assigned to your facility.

<table>
<thead>
<tr>
<th>Best ways to work with your OI:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. <strong>Pick one person to communicate with your OI</strong></td>
</tr>
<tr>
<td>2. <strong>Your OI will be in touch at least weekly while the outbreak is active</strong></td>
</tr>
<tr>
<td>3. <strong>Report to your OI right away:</strong></td>
</tr>
<tr>
<td>- New cases and people with new symptoms</td>
</tr>
<tr>
<td>- Info about close contacts</td>
</tr>
<tr>
<td>- Questions or problems with your OI’s recommendations</td>
</tr>
<tr>
<td>4. <strong>Security</strong></td>
</tr>
<tr>
<td>- Any emails that include confidential information (PHI) should be sent securely to <a href="mailto:COVIDOB@acgov.org">COVIDOB@acgov.org</a>.</td>
</tr>
<tr>
<td>- Your OI can send you an encrypted email. You will need to create a password, but then the email thread will be safe.</td>
</tr>
<tr>
<td>5. <strong>Questions and guidance</strong></td>
</tr>
<tr>
<td>- Your OI is available to support you.</td>
</tr>
<tr>
<td>- Your OI will also help you prevent future outbreaks.</td>
</tr>
<tr>
<td>- Be prepared to ask your OI questions so that you can get the help you need.</td>
</tr>
</tbody>
</table>

### STEP 1: Identify COVID-19 cases

**COVID-19 Outbreak in group living:**
3 or more residents and/or staff who test positive in a 14-day period and are linked in the setting (that is, they may have had some contact that could cause spread).

**COVID-19 (+) DEFINITION:**

- **Confirmed COVID-19:**
  A positive COVID-19 test in a person with or without symptoms

- **Suspected COVID-19:**
  In a person who could have been exposed at least one of the following: new or worsening cough, shortness of breath or difficulty breathing; OR at least two of the following: fever, chills, aches, headache, sore throat, new or worsening stuffy or runny nose, loss of smell or taste, nausea, vomiting or diarrhea.

Go here for WHO [Case Definitions](#).

- [ ] Monitor for COVID-19 symptoms and screen staff and residents daily.
Tell all staff and residents to report immediately if they start feeling any of these symptoms, even if they are mild.

Make sure that all staff or residents who have tested positive or are suspected of having COVID-19 are following the rules for isolation, stay out of work, and know when it is OK to stop isolation.

Any staff or resident who has tested positive for COVID-19 must be given the Alameda County Health Officer Order for isolation and instructions for isolation which is available in multiple languages.

If cases are not able to isolate where they are, make a referral IMMEDIATELY to Operation Comfort by contacting (510) 891-8950 or achch@acgov.org. If you have questions email: covidhousing@acgov.org

- Staff and residents who test COVID-19 (+) and have certain high-risk conditions may qualify for treatment to prevent serious illness.
- Staff and residents who are close contacts of a COVID-19 case and have a high-risk condition may qualify for post-exposure therapy.

Share the ACPHD's Monoclonal Antibody Treatment flyer with your staff and residents so that they can learn more and, if eligible, get access to treatment that could prevent life-threatening illness.

### STEP 2: Identify and Manage Close Contacts

**CLOSE CONTACT DEFINITION:**

Close contacts are people who spent

1. A total of at least 15 minutes over a 24-hour period within 6 feet of a COVID-19 positive person when that person was contagious even if both people were wearing masks; OR with

2. Unprotected direct contact for any length of time with an infected person’s sneeze, saliva, or cough.

**WHEN IS A PERSON WITH COVID-19 CONTAGIOUS?**

COVID-19 (+) cases are contagious 2 days before the start of COVID symptoms through 10 days after symptoms began. If the COVID-19 (+) case has no symptoms, they are treated as contagious from 2 days before the date that the test was collected through 10 days after.

It is very important to understand who to count as a close contact because that person may have become infected with COVID-19 and could infect other people in the home or complex.

Sometimes group housing should be treated as one household, and everyone should be considered an exposed close contact. In these cases, all residents and unvaccinated staff should quarantine. The facility is one household if:

- Meals, kitchen, and/or bathrooms are shared
- Rooms are small and there is no way to create 6-feet of space between people
- Residents and/or staff do not wear masks consistently
- There is a family feel with many shared activities

If you are unsure, ask your OI.

Identify and manage close contacts who are RESIDENTS:

Sometimes you will be able to tell who a close contact is because you work onsite and observe those who spend time together. But sometimes you will have to interview the person.
with COVID-19 to find out. Ask about time spent < 6 feet apart for 15 or more minutes. Remember that the time spent at a close distance is the total over 24 hours.

Think about:
- Roommates
- People who eat together, smoke together, are sex partners or couples
- People who have shared close spaces to watch TV or socialize
- People who work or do chores together
- Someone who is a caregiver for others.

For help on how to identify close contacts, see CDC instructions.

**Identify and manage close contacts who are STAFF:**

Again, ask about time spent < 6 feet apart for 15 or more minutes. Remember that the time spent at a close distance is the total over 24 hours. Ask about time spent while working AND while doing activities not related to work such as:
- Carpooling
- Social gatherings outside of work
- Break times and eating together


- Ask your OI for help figuring out who is a close contact and what to do.
- Your OI may ask for extra information about employee cases. Be ready to send a list of staff with job titles, work areas, close contacts in the workplace, dates of symptom onset, and shifts worked while contagious.

**QUARANTINE instructions**

**FOR HIGH-RISK SETTINGS**:  
- ALL residents who are close contacts must quarantine for 14 days regardless of vaccination status.
- Unvaccinated staff who work in these settings should follow standard quarantine instructions below but must be excluded from work for 14 days. See the Alameda County’s [11/18/21 Health Officer Quarantine Order](https://www.alamedacounty.gov/PublicHealth/Pages/COVID-19-QSD-Quarantine-Order.aspx).
- Fully vaccinated staff who do not have symptoms do NOT need to quarantine.

*Your OI will determine quarantine instructions for your facility.*

**FOR LOWER-RISK SETTINGS**:  
- Unvaccinated residents and staff who are identified as close contacts must quarantine following these instructions:
  - Quarantine can end after Day 10 without testing **OR**
  - Quarantine can end after Day 7 **ONLY** if a test taken on Day 5 or later is negative.


See Alameda County’s [11/18/21 Health Officer Quarantine Order](https://www.alamedacounty.gov/PublicHealth/Pages/COVID-19-QSD-Quarantine-Order.aspx).

* Your OI will determine quarantine instructions for your facility.

**FOR ALL FACILITIES**:  
- Unvaccinated residents and staff with a test-confirmed COVID-19 diagnosis in the past 90 days AND no symptoms do not have to quarantine after a new exposure.
### Steps to Controlling Outbreaks in Congregate Living Facilities

#### ISOLATION & QUARANTINE HOTEL (OPERATION COMFORT):
For all residents who are transferred to the isolation and quarantine hotel, release dates from quarantine will be determined by the hotel staff in alignment with Alameda County’s 11/18/21 Health Officer Quarantine Order.

A person is considered to be fully vaccinated against COVID-19 if it has been ≥2 weeks following the second dose in a 2-dose series, or ≥2 weeks following one dose of a single-dose vaccine authorized by FDA or WHO. See [CDC Interim Public Health Recommendations for Fully Vaccinated People](https://www.cdc.gov/vaccines/pubs/pocket-guide.htm).

Both vaccinated and unvaccinated staff members must still follow all [Cal/OSHA ETS requirements](https://www.osha.gov/ets).

Tell all close contacts (whether vaccinated or unvaccinated) to monitor themselves closely for symptoms of COVID-19 for 14 days after their last exposure. They should report immediately if they start having symptoms of COVID-19. Staff members (especially those who are off work, quarantining at home) should be instructed to contact their health care provider.

If any close contacts test COVID-19 (+), they must isolate. Give them instructions for isolation and let them know the date when they can end isolation/return to work.

Ask your OI when it is okay for residents/workers to release from isolation/quarantine and/or return to work.

If the contacts are not able to quarantine where they are, make a referral IMMEDIATELY to Operation Comfort by contacting (510) 891-8950 or achch@acgov.org. If you have questions email: covidhousing@acgov.org

If the cases and contacts are able to isolate/quarantine where they are staying but need help with food and other items, please check [ACPBD’s Food, Housing, & Financial Resources](https://www.acgov.org/departments/health-and-environment/).  

#### STEP 3: Closing your facility

While the outbreak is active, do not accept new residents. Your OI will let you know when it is okay to reopen.

- ACPHD has the authority to suspend operations while an outbreak is being investigated.

If residents transfer out to a different facility, tell the new facility that there is COVID-19 in your facility.

Do your best to keep residents with COVID-19 and close contacts at your facility until they have finished their isolation or quarantine periods. If they insist on moving out, make sure to give them written isolation and quarantine instructions.

Stop indoor group activities. If there are therapy or treatment groups, try to move them outdoors or use online platforms like Zoom.

See below for facility set up.

#### STEP 4: Masks, Distancing, Handwashing

If you run a residential program for behavioral/mental health clients, check with Alameda County Behavioral Health at aaron.chapman@acgov.org for additional health guidance.

Staff and residents should:
- Wear **masks** at all times except for eating and sleeping.
- **Social distance** by staying 6+ feet apart.
- **Wash hands** and/or use **hand sanitizer** often.
- **Cover mouth** when coughing.

- **You must provide workers who are unvaccinated with face coverings of at least 2 layers.**
- **You must provide an N95 respirator to any staff who requests one.**
- **It is best practice to provide face coverings for all vaccinated and unvaccinated staff and residents. Make sure they are worn over the nose and mouth at all times when in indoor communal areas per Alameda County Health Officer Order 21-03.**

Put hand sanitizer in multiple locations around the facility especially:
- Near entrances
- Dining and kitchen areas
- Each bedroom
- All bathrooms

Teach your staff and residents how to prevent COVID-19. Plan to check and remind them often. Encourage attention to **cleaning and personal hygiene.**

Put up **signs** in key locations to remind staff and residents about prevention measures.

**STEP 5: Set up**

Space furniture to avoid crowding.

Increase airflow inside the house or facility:
- Open windows and doors to the outside
- Use portable high-efficiency particulate air (HEPA) filters or properly placed fans in high use common areas. For proper use of fans see CDC’s FAQ “Can fans be used to decrease the use of COVID-19 transmission indoors?”
- **Make sure exhaust fans in restrooms work at full capacity.**
- Per the ETS, implement ventilation changes to mechanical ventilation systems including increasing filtration efficiency to at least MERV-13, or the highest efficiency compatible with the ventilation system. Evaluate whether HEPA air filtration units are needed. See CDPH **Interim Guidance For Ventilation, Filtration, and Air Quality in Indoor Environments.**

Shared Bedrooms:
- **Beds should be set up at 6 feet apart. If this is not possible then set up beds head to toe at least 3 feet apart.**
- **People in bunkbeds should sleep in opposite directions (head to toe).**
- **Put up temporary barriers like curtains between beds.**

Shared kitchen and dining rooms:
- **Best to make bagged meals or have residents eat meals on trays in their rooms or outside.**
- **Set places at the table a minimum of 6 feet apart and make sure diners keep 6 feet apart at all times.**
- **Don't crowd. Have residents eat in shifts to limit the number eating together.**
### Steps to Controlling Outbreaks in Congregate Living Facilities

<table>
<thead>
<tr>
<th>Step 1: Hygiene and Sanitation</th>
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<tbody>
<tr>
<td><strong>Shared bathrooms:</strong></td>
</tr>
<tr>
<td>- Do not share dishes, drinking glasses, cups, or eating utensils. Non-disposable food service items should be handled with gloves and washed with dish soap and hot water or in a dishwasher.</td>
</tr>
<tr>
<td>- Make sure there is a person watching and making sure rules are followed.</td>
</tr>
<tr>
<td>- Make sure bathrooms are continuously stocked with soap and paper towels or automated hand dryers. Hand sanitizer could also be made available.</td>
</tr>
<tr>
<td>- Make sure trash cans are emptied regularly.</td>
</tr>
<tr>
<td>- Provide information on how to wash hands properly. Hang signs in bathrooms.</td>
</tr>
<tr>
<td>- Residents should be instructed that sinks could be an infection source and should avoid placing toothbrushes directly on counter surfaces. Totes could also be used for personal items to limit their contact with other surfaces in the bathroom.</td>
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<thead>
<tr>
<th>Step 2: Shared laundry rooms:</th>
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<tbody>
<tr>
<td>- Maintain access and adequate supplies to laundry facilities to help prevent spread of COVID-19.</td>
</tr>
<tr>
<td>- Restrict the number of people allowed in laundry rooms at one time to ensure everyone can stay at least 6 feet (2 meters) apart.</td>
</tr>
<tr>
<td>- Provide disposable gloves, soap for washing hands, and household cleaners and products from <a href="https://www.epa.gov/coronavirus/disinfectants">EPA’s List N: Disinfectants for Coronavirus (COVID-19)</a> for residents and staff to clean and disinfect buttons, knobs, and handles of laundry machines, laundry baskets, and shared laundry items.</td>
</tr>
<tr>
<td>- Post guidelines for doing laundry such as washing instructions and handling of dirty laundry.</td>
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<thead>
<tr>
<th>Step 3: Shared living areas:</th>
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<tbody>
<tr>
<td>- During an outbreak consider closing TV rooms and other shared spaces.</td>
</tr>
<tr>
<td>- Post signs where people get together to talk, smoke, or eat. These activities are high risk especially if they involve mask removal.</td>
</tr>
<tr>
<td>- Put visual markers on the ground that are 6 feet apart.</td>
</tr>
<tr>
<td>- Unless it is necessary, staff should not enter residents’ living quarters. Instead try using phone or video chat to check in.</td>
</tr>
<tr>
<td>- Limit the presence of non-essential volunteers and visitors in shared areas, when possible.</td>
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<thead>
<tr>
<th>Step 4: Isolation and Contact Tracing</th>
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<tbody>
<tr>
<td>- When a resident or staff tests positive for COVID-19, carefully clean and disinfect all areas they touched using EPA approved cleaning agents.</td>
</tr>
<tr>
<td>- See <a href="https://www.epa.gov/coronavirus/disinfectants">List of EPA approved cleaning agents</a>.</td>
</tr>
<tr>
<td>- Pay close attention to dilution instructions and contact time on the product label.</td>
</tr>
<tr>
<td>- Make sure that staff who are doing the cleaning wear the proper PPE and follow safety instructions.</td>
</tr>
<tr>
<td>- Close off areas visited by the ill persons until carefully disinfected.</td>
</tr>
<tr>
<td>- Open outside doors and windows and use fans in the area to increase circulation.</td>
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<tr>
<td>- Wait 24 hours, or as long as possible, before cleaning or reopening for use.</td>
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<thead>
<tr>
<th>Step 5: Communication and Education</th>
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<tbody>
<tr>
<td>- Shared bathrooms should be cleaned regularly using products from approved EPA list at least twice per day (e.g., in the morning and evening or after times of heavy use).</td>
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**OUTBREAKS IN CONGREGATE LIVING SETTINGS**

ver: 12-07-21
### Alameda County Public Health Department

**Steps to Controlling Outbreaks in Congregate Living Facilities**

#### STEP 7 Protect Staff

- Employers are required to do what they can to keep workers safe from COVID-19 in the workplace. Please see [Cal/OSHA’s COVID-19 Emergency Temporary Standards](https://www.osha.gov/engineering/coronavirus-emergency.html).

- Cal/OSHA’s [COVID-19 Emergency Temporary Standards FAQ](https://www.osha.gov/engineering/coronavirus-emergency.html) includes a helpful summary and link to a model Prevention Program.

**To keep workers safe:**

- If there is a shared office, try to stagger use or set up workstations at least 6 feet apart.

- Workers should avoid sharing equipment; if equipment must be shared, clean it between use. Workers should never share objects (like phones) that may come into contact with their face, mouth, or nose.

- Try to arrange stable work groups (by shifts, locations, and/or work duties) so that the same staff stay together without mixing across groups.

**Pay careful attention to staff break times and locations! When staff remove their masks to eat, drink, or smoke, they are at higher risk for spread of COVID-19.**

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<tr>
<td><strong>○</strong></td>
<td>Stagger break times</td>
</tr>
<tr>
<td><strong>○</strong></td>
<td>Use outside space for breaks if weather is good.</td>
</tr>
<tr>
<td><strong>○</strong></td>
<td>Ask staff to use their own cars when removing their masks to eat/drink.</td>
</tr>
</tbody>
</table>

- Indoor breaks should only happen in a space where people can safely stay at least 6-feet apart. Limit the number of people in any space at one time and arrange seating of chairs and tables to be 6 feet apart.

- Put EPA approved disinfectant wipes and hand sanitizers in break rooms and shared offices so that staff can clean between uses.

- Post signs to remind workers to follow prevention practices.

### WORKER RESOURCES

- ACPHD has a [list of worker resources](https://www.acphd.org/Worker.html) and [website](https://www.acphd.org/) that should be shared with staff.

- See Equal Employment Opportunities Commission’s (EEOC) [info on worker protection laws](https://www.eeoc.gov/topic/coronavirus.htm).

### Step 8. TESTING


**Follow CDC testing guidance:**

- **Unvaccinated close contacts who do not have symptoms should be tested immediately after their last exposure. If negative, they should test again between day 5 and 7 and continue to quarantine.**

- **Fully vaccinated close contacts who do not have symptoms should be tested 5-7 days after their last exposure: All close contacts who develop symptoms, whether vaccinated or unvaccinated, should isolate, test immediately and follow-up with a healthcare provider.**

- **CDC recommends that residents and workers who have not been fully vaccinated are tested at least weekly.**
  - If a worker or resident tests positive, you will need to do facility-wide testing. Test weekly until there are no new positive cases, and it has been at least 14 days since the last positive case. Talk to your OI about who should be included.
### Steps to Controlling Outbreaks in Congregate Living Facilities

- People can get tested through their own healthcare provider, at a community testing site, or you could set up onsite testing. Talk to your OI about mobile testing options. The OI can help you to make a plan and find local testing resources.
- As an employer, you are required to inform staff, even those with no known exposure, of how to get tested. View Cal/OSHA ETS FAQ under testing requirements.
- Keep a record of test results, if possible, to give to your OI.
- See ACPHD Criteria for Release from Home Isolation and/or How Long Should I stay in Quarantine?
- Do NOT require retesting at the end of quarantine. ACPHD Health Officer letter explains why a negative test is NOT required before returning to work.
- Anyone who has tested positive should not be re-tested for 3 months unless they have symptoms of COVID-19. If this happens, they should get a medical exam. Unless a health care provider determines that they do not have COVID-19, they will have to isolate again.

### Step 9. Vaccine Status Verification

Facilities should consider verifying vaccine status of all workers. Check the Vaccine Record Guidelines & Standards for preferred proof. If exposed, workers who are unvaccinated will have to quarantine and should follow testing instructions above.

### Ongoing: MONITORING FOR ILLNESS & EXPOSURE

- Put signs at all entrances that tell people not to enter if they have signs and symptoms of COVID-19 or have been in close contact with a person who tested positive or who have experienced symptoms of COVID-19 in the past 14 days.
- Screen all residents, staff, and essential visitors for signs and symptoms of COVID-19 each day.
  - **Symptom review**
    - **Ask about anything NEW**
      - Fever or chills
      - Short of breath
      - Muscle or body aches
      - Cough
      - Tired
      - Headache
      - Sore throat
      - Runny nose
      - Stuffy nose
      - Nausea
      - Vomiting
      - Diarrhea
      - Loss of taste or smell
  - Visual check
  - Temperature check
    - Fever of ≥ 100° F (37.8° C)

- Encourage residents and workers to get vaccinated against COVID-19. See info about how to get vaccinated.

### Ongoing: COMMUNICATION with ACPHD

- Please see CDPH REPORTING requirements for Non-Healthcare Congregate Facilities.
- Congregate living facilities in Alameda County are required to report ≥1 COVID-19 cases within a 14-day period in residents and/or staff. See Reporting Threshold for Shelters and Congregate Living Facilities for more information.
- Keep a list of all cases and contacts. Add to the list if new cases are reported and email it to your OI and copy COVIDOB@acgov.org. Only send securely. Talk to your OI about how to make sure your email is secure.
- Send your OI a map/floor plan of your facility as soon as possible.
- If you have a COVID Safety Prevention Plan in place, please send it to your OI.
### Steps to Controlling Outbreaks in Congregate Living Facilities

**OUTBREAKS IN CONGREGATE LIVING SETTINGS**

|   | Send a list of all workers to your OI with:  
+ Job description  
+ Work location  
+ Work schedule  
+ Contact information |

### REOPENING to new residents

- When you do take new residents, consider requiring a negative COVID-19 PCR test taken within 48 hours of move-in. While waiting for results, the new resident should isolate away from others.
- Do not accept COVID-19 (+) residents until they have completed their isolation period (at least 10 days, no fever, and improvement in symptoms for 24 hours).
- Do not accept residents with a recent close contact until they have completed their quarantine period of 14 days from last exposure.
- Be especially careful to monitor new residents for symptoms of COVID-19 for 14 days. Tell them to report any new symptoms even if they are mild.
- If a new resident develops symptoms of COVID-19, they should isolate and test as soon as possible.
- New residents without symptoms should be encouraged to retest 5-7 days after move-in but don’t have to isolate while waiting for results.
- Talk to your OI about safely reopening to admissions or to group activities.

### RESOURCES and LINKS

Please review and bookmark these important links. They include national, state, and local guidance on COVID-19.

Work closely with your assigned ACPHD Outbreak Investigator who will help you control the outbreak as quickly as possible. Regular and open communication with your Outbreak Investigator is essential.

**Alameda County**

Alameda County Public Health Department (ACPHD) MAIN COVID-19 website  

ACPHD Health Officer Orders  
[Order for Isolation](https://covid-19.acgov.org/isolation-quarantine.page)  
[Order for Quarantine](https://covid-19.acgov.org/isolation-quarantine.page)  
[Masking Order](https://covid-19.acgov.org/isolation-quarantine.page)

ACPHD Isolation and Quarantine resources  

Alameda County Health Care for the Homeless Shelter Health Guidance: https://www.achch.org/shelter-health-guidance.html


  • Worker Resources: https://covid-19.acgov.org/recovery

ACPHD Vaccination Information webpage https://covid-19.acgov.org/vaccines

California


CDPH Blueprint for a Safer Economy https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/BlueprintForSaferEconomy.aspx

CDPH Guidance for The Use of Face Coverings https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/guidance-for-face-coverings.aspx

CDPH AB 685 COVID-19 Workplace Outbreak Reporting Requirements: https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/ab685.aspx

Cal/OSHA Emergency Temporary Standards https://www.dir.ca.gov/dosh/coronavirus/ETS.html
  • FAQ: https://www.dir.ca.gov/dosh/coronavirus/COVID19FAQs.html
United States

CDC COVID-19 Guidance

CDC Interim Guidance for Homeless Service Providers to Plan and Respond to Coronavirus Disease 2019 (COVID-19)

CDC COVID-19 Guidance for Shared or Congregate Housing
https://www.cdc.gov/coronavirus/2019-ncov/community/shared-congregate-house/guidance-shared-congregate-housing.html [This is an archived version. Some information may not be current, but general recommendations for preparation of your facility still apply.]

CDC Guidance for Retirement Communities and Independent Living