



**Alameda County Public Health Department
Steps to Preventing & Controlling Outbreaks in Unlicensed
Congregate Living Facilities**

Contact Name:
Phone:
Fax/Email:

Date:
Name of Location:
Complete Address:

This checklist should be used by managers and operators of unlicensed group and transitional housing facilities. It lists the steps necessary to either prevent or 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.

Best ways to work with your OI:

- | |
|--|
| 1. Pick one person to communicate with your OI |
| 2. Your OI will be in touch at least weekly while the outbreak is active |
| 3. Report to your OI right away: <ul style="list-style-type: none"> • New cases and people with new symptoms • Info about close contacts • Questions or problems with your OI's recommendations |
| 4. Security <ul style="list-style-type: none"> • Any emails that include confidential information (PHI) should be sent securely to COVIDOB@acgov.org. • Your OI can send you an encrypted email. You will need to create a password, but then the email thread will be safe. |
| 5. Questions and guidance <ul style="list-style-type: none"> • Your OI is available to support you. • Your OI will also help you prevent future outbreaks. • Be prepared to ask your OI questions so that you can get the help you need. |

STEP 1: Identify COVID-19 cases

COVID-19 Outbreak in group living:

3 or more residents and/or staff who test positive or have symptoms (if no test) 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 (+) DEFINITIONS:

Confirmed COVID-19:

When a person has a positive molecular COVID-19 test (such as a PCR test) in a person with or without symptoms.

Suspected COVID-19:

When a person has a positive at-home test (antigen) OR a specific type of positive antibody test with no history of previous COVID-19 infection.



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Probable COVID-19:

When a person has 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 AND is linked to other cases in the setting.

OR

When a person has a positive antigen test done by a certified laboratory (such as at a COVID-19 testing site).

Go here for [Case Definitions](#). If you have questions about COVID-19 case definitions, please ask your OI.

<input type="checkbox"/>	Monitor for COVID-19 symptoms and screen staff and residents daily.
<input type="checkbox"/>	Tell all staff and residents to report immediately if they start feeling any of these symptoms , even if they are mild.
<input type="checkbox"/>	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 .
<input type="checkbox"/>	Any staff or resident who has tested positive for COVID-19 should be given the Alameda County Health Officer Order for isolation and instructions for isolation which is available in multiple languages.
<input type="checkbox"/>	If cases (including people with symptoms but no positive test) are not able to safely isolate where they are, make a referral IMMEDIATELY to the isolation & quarantine hotel (Operation Comfort) by using this link: https://docs.google.com/forms/d/e/1FAIpQLSdxrTwn8FUux4xbV_uHcPoSG8nzKxzVIQgOPTd_-Zo1ldqRrQ/viewform . If you need assistance with the referral, contact (510) 891-8950 or achch@acgov.org . If you have questions email: covidhousing@acgov.org
<input type="checkbox"/>	<ul style="list-style-type: none"> ○ 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. <p>Share the ACPHD's Treatment and Prevention flyer and CDPH's COVID-19 Treatments Facts page with your staff and residents so that they can learn more about available COVID-19 treatments.</p> <p>Test to Treat locations are also now available in Alameda County. Staff and residents should contact their healthcare providers to find out more about eligibility and access to these treatments OR visit https://sesamecare.com/covidca.</p>



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	<p>If staff or residents are interested in treatment and would like more information and/or assistance accessing treatment, please call the ACPHD Inquiries Line at 510-268-2101, or visit https://covid-19.acgov.org/treatment.</p> <p>See Resources and Links at the end of this document for resources to help residents and staff find a healthcare provider in Alameda County.</p>
STEP 2: Identify and Manage Close Contacts	
CLOSE CONTACT DEFINITION:	
<p>In small indoor spaces <400,000 cubic feet per floor (such as a home, clinic waiting room, airplane etc.), close contacts are people who spent a total of at least 15 minutes over a 24-hour period within the same indoor space as a COVID-19 case when the case was contagious <i>even if both people were wearing masks</i>.</p> <p>In large indoor spaces >400,000 cubic feet per floor (such as open-floor-plan offices, warehouses, large retail stores, manufacturing, or food processing facilities), close contacts are people who spent a total of at least 15 minutes over a 24-hour period within 6 feet of a COVID-19 case when the case was contagious <i>even if both people were wearing masks</i>.</p>	
WHEN IS A PERSON WITH COVID-19 CONTAGIOUS?	
<p>COVID-19 (+) cases are contagious 2 days before the start of COVID symptoms through 10 days after symptoms began (or through the end of Day 5 if testing negative on Day 5 or later). 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 (or through the end of Day 5 if testing negative on Day 5 or later).</p>	
<p>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 facility.</p>	
<p>Sometimes group housing should be treated as one household, and everyone should be considered an exposed close contact. In these cases, all residents and staff who are not up to date on their vaccinations should quarantine (see Quarantine & Work Exclusion Guidance below). The facility is one household if:</p> <ul style="list-style-type: none"> ✦ Meals, kitchen, and/or bathrooms are shared ✦ Rooms are small ✦ Residents and/or staff do not wear masks consistently ✦ There is a family feel with many shared activities <p>If you are unsure, ask your OI.</p>	
<input type="checkbox"/>	<p>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 around each other. But sometimes you will have to interview the person with COVID-19 to find out. Ask about time spent within the same airspace as others OR time spent within 6 feet of others for very large indoor spaces (see the close contact definition above) for 15 or more minutes over a 24-hour period. Think about:</p> <ul style="list-style-type: none"> ○ Roommates



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	<ul style="list-style-type: none"> ○ 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.
<input type="checkbox"/>	<p>Identify and manage close contacts who are STAFF: Again, ask about time spent within the same airspace as others OR time spent within 6 feet of others for very large indoor spaces (see the close contact definition above) for 15 or more minutes over a 24-hour period. Ask about time spent while working AND while doing activities not related to work such as:</p> <ul style="list-style-type: none"> ○ Carpooling ○ Social gatherings outside of work ○ Break times and eating together
<input type="checkbox"/>	Ask your OI for help figuring out who is a close contact and what to do.
<input type="checkbox"/>	Your OI may ask for extra information about staff 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.

ISOLATION GUIDANCE is for people with COVID-19 infection and for people with symptoms of COVID-19 (even if they have not tested).

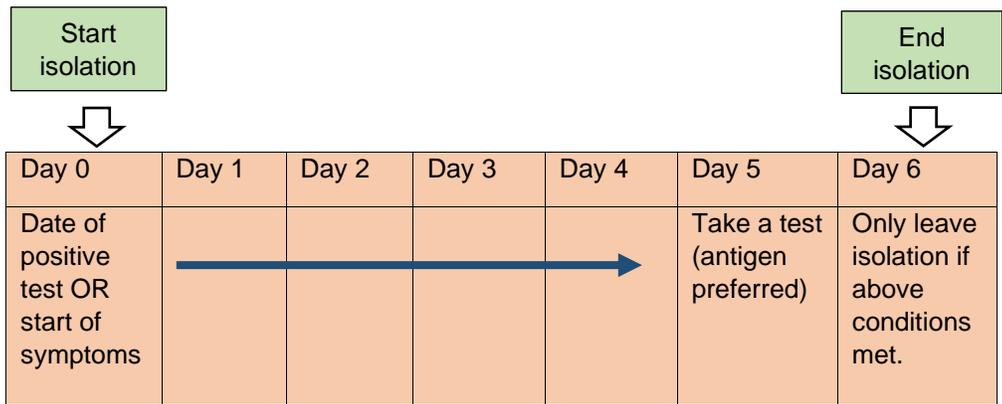
ALL staff and residents are recommended to isolate for 10 days.

- Day 0 is the first day of symptoms. If no symptoms, Day 0 is the positive test date. Day 1 is the first full day after symptoms started **OR** test date.
- If symptoms start *after* testing positive, the isolation period should **start over** with Day 0 as the first day of symptoms.

Staff and residents are required to isolate for at least 5 days. They can leave isolation after Day 5 IF:

- They test negative on Day 5 or later AND
- Their symptoms are getting better AND
- Have no fever for ≥ 24 hours without use of fever-lowering medicines

The earliest staff and residents should leave isolation is Day 6.





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If a STAFF or RESIDENT has a positive test on Day 5, they may choose to test daily after Day 5 and may leave isolation once they receive a negative test. People may leave isolation on Day 11 if their symptoms are better and they have had no fever for ≥ 24 hours, even if they are still testing positive.

Alameda County Health Care for the Homeless (ACHCH) and ACPHD have agreed upon separate isolation guidance below for residents of homeless service provider sites:

All positive resident cases should isolate away from others for at least 10 days.

- These residents can leave isolation on Day 11 if their symptoms are getting better AND they have no fever for ≥ 24 hours.

QUARANTINE & WORK EXCLUSION GUIDANCE (all congregate living facilities) is for people who were in close contact with a person while they were contagious with COVID-19. Quarantine (for residents) & work exclusion (for staff) helps to stop the spread by making sure that close contacts who have been infected do not expose anyone else. The guidance below depends on vaccination status. Again, read carefully and contact your ACPHD OI if you have questions.

Vax status	<u>Boosted</u>	<u>NOT Boosted</u>
	<ul style="list-style-type: none"> ○ <u>Definition:</u> A person is considered “boosted” if they have received one or more booster doses of any of the available COVID-19 vaccine boosters. 	<ul style="list-style-type: none"> ○ <u>Definition:</u> A person who is unvaccinated, partially vaccinated, or fully vaccinated & booster-eligible but has never received a booster dose. <ul style="list-style-type: none"> • Unvaccinated & partially vaccinated: Has not completed a primary vaccine series
Residents	<p><u>Boosted</u></p> <p><u>No quarantine needed but these residents should:</u></p> <ul style="list-style-type: none"> ○ Test negative on Day 5 <li style="text-align: center;">AND ○ Have no symptoms 	<p><u>NOT Boosted</u></p> <p>These residents should quarantine for at least 5 days.</p> <p><u>TEST OPTION:</u> Quarantine can end on Day 6 IF:</p> <ul style="list-style-type: none"> ○ Negative test on Day 5 AND ○ No symptoms <p><u>NO TEST OPTION</u> Quarantine can end after Day 10 if they have no symptoms</p> <p>If residents have jobs, they must be allowed to continue to work through quarantine.</p>



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Resident close contacts are **recommended** to wear a mask at all times (except while eating, drinking, or sleeping) while around others for a full 10 days after their last exposure.

	<u>Boosted</u>	<u>NOT Boosted</u>
Staff	<p><u>No work exclusion needed but these staff must:</u></p> <ul style="list-style-type: none"> ○ Test negative by Day 5 (required) <p>AND</p> <ul style="list-style-type: none"> ○ Have no symptoms 	<p>These staff should be excluded from work for at least 5 days.</p> <p><u>TEST OPTION:</u></p> <p>Work exclusion can end on Day 6 IF:</p> <ul style="list-style-type: none"> ○ Negative test by Day 5 (required) <p>AND</p> <ul style="list-style-type: none"> ○ No symptoms <p><u>NO TEST OPTION</u></p> <p>Work exclusion can end after Day 10 if they have no symptoms</p>

Per [Cal/OSHA's ETS](#), staff close contacts are **required** to wear masks at all times around others for 10 days after their last exposure. Staff are also **required** to get tested between days 3-5 after their last exposure.

For settings where there are larger shared indoor spaces, it may not be possible to quarantine all residents & staff within these spaces. In these situations, you may need to think about high-risk contacts when identifying close contacts who should quarantine or be excluded from work.

High-risk contacts are people who may experience severe illness or death if they become infected with COVID-19 OR people who are more likely to get COVID-19 due to their closeness to the positive case in the setting and/or the duration or intensity of their exposure.

- Examples of high-risk contacts may include roommates, friends, sex partners/couples, or immunocompromised people.

ACHCH and ACPHD have agreed upon separate quarantine guidance below for residents of homeless service provider sites:

Within homeless shelter settings, ALL residents who are considered high-risk contacts to a positive case should quarantine for 10 days, regardless of their vaccination status.

Recommendations and referrals to the isolation & quarantine hotel for quarantine will be based on risk by considering the following for close contacts:

1. Individual health risks and medical needs
2. Level of exposure to a positive case
3. Vaccination status

If residents have jobs, they must be allowed to continue to work through quarantine.

If you have questions about who should quarantine, ask your ACHCH contact or ACPHD OI for help.



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STAFF and RESIDENT close contacts who have had test-confirmed COVID-19 infection in the past 90 days do not have to quarantine or be restricted from work as long as they remain without symptoms, but they should monitor for symptoms and must continue to wear a face covering. STAFF and RESIDENTS who develop symptoms must isolate immediately and follow the isolation guidance above.

STAFF and RESIDENTS who are severely ill or have weakened immune systems may need to isolate for up to 20 days. These people should talk to their healthcare providers to find out when to end isolation.

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's Interim Public Health Recommendations for Fully Vaccinated People](#).

- It is **very important** for residents and staff to stay up-to-date with COVID-19 vaccination. In addition to being fully vaccinated, residents and staff should be referred for booster doses when eligible. Everyone ages 5 and up are now eligible to receive a bivalent booster if it has been at least 2 months since their last COVID-19 vaccine dose. Bivalent boosters are updated COVID-19 vaccines that help to protect against current variants. Staying up-to-date with vaccination is the best way to protect against severe illness and death from COVID-19. See [CDC's COVID-19 Vaccine Booster Shots](#).

<input type="checkbox"/>	<p>ISOLATION & QUARANTINE HOTEL (OPERATION COMFORT): If cases or contacts are not able safely isolate or quarantine where they are, make a referral IMMEDIATELY to the isolation & quarantine hotel (Operation Comfort) by using this link: https://docs.google.com/forms/d/e/1FAIpQLSdxrTwn8FUux4xbV_uHcPoSG8nzKxzVIQgOPTd_-Zo1ldqRrQ/viewform. If you need assistance with the referral, contact (510) 891-8950 or achch@acgov.org. If you have questions email: covidhousing@acgov.org</p>
<input type="checkbox"/>	<p>For all residents who are transferred to the isolation and quarantine hotel, release dates will be determined by the hotel staff. This has been approved by ACPHD's Health Officer.</p>
<input type="checkbox"/>	<p>Both vaccinated and unvaccinated staff members must still follow all Cal/OSHA ETS requirements.</p>
<input type="checkbox"/>	<p>Tell all close contacts (regardless of vaccination status) 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.</p> <ul style="list-style-type: none"> IF close contacts start having symptoms, they should isolate away from others until they can take a test for COVID-19. If they use an antigen test and the result is negative, they should stay in isolation and repeat testing after 24 to 48 hours. If they get a PCR test and the result is negative, a second test is not needed. If they have TWO



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	<p>negative antigen tests or ONE negative PCR test and their symptoms are improving (and no fever for 24 hours), they no longer need to isolate but must continue to follow the quarantine guidance above.</p> <ul style="list-style-type: none"> • IF close contacts test positive, they should follow the isolation guidance above. If close contacts with symptoms do not test, they should isolate away from others for at least 10 days. See CDPH's isolation & quarantine guidance page for more info.
<input type="checkbox"/>	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.
<input type="checkbox"/>	Ask your OI when it is okay for residents/staff to release from isolation/quarantine and/or return to work.
<input type="checkbox"/>	If the cases and contacts are able to isolate/quarantine where they are staying but need help with food and other items, please check ACPHD's Food, Housing, & Financial Resources page.
STEP 3: Closing your facility	
<input type="checkbox"/>	<p>While the outbreak is active, do not accept new residents. Your OI will let you know when it is okay to reopen.</p> <ul style="list-style-type: none"> ✦ ACPHD has the authority to suspend operations while an outbreak is being investigated.
<input type="checkbox"/>	If residents transfer out to a different facility, tell the new facility that there is COVID-19 in your facility.
<input type="checkbox"/>	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 .
<input type="checkbox"/>	Stop indoor group activities. If there are therapy or treatment groups, try to move them outdoors or use online platforms like Zoom.
STEP 4: Masks, Distancing, Handwashing	
<input type="checkbox"/>	Follow CDPH instructions Infection Control Guidance for Clients in Congregate Shelters, Including Shelters for People Experiencing Homelessness or CDC's COVID-19 Guidance for Shared or Congregate Housing depending on your setting type. Guidance for Congregate Housing is an archived version. Some information may not be current, but general recommendations for preparation of your facility still apply.
<input type="checkbox"/>	If you run a homeless shelter or other homeless service provider facility, check with the Alameda County Health Care for the Homeless (HCH) program at (510) 891-8950 for additional guidance and resources.
<input type="checkbox"/>	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.



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<input type="checkbox"/>	<p>Staff and residents should:</p> <ul style="list-style-type: none"> ○ Social distance by staying 6+ feet apart. ○ Wash hands and/or use hand sanitizer often. ○ Cover mouth when coughing.
<input type="checkbox"/>	<ul style="list-style-type: none"> ○ Per CDPH's Guidance for the Use of Face Masks, masks are required to be worn by residents & staff in homeless shelters during outbreaks and/or when the COVID-19 Community Level is medium or high. ○ The risk of spreading COVID-19 within a congregate living facility is reduced when all residents & staff wear masks. Residents & staff within homeless shelters and other congregate living settings are still recommended to mask at all times within indoor communal areas (except while eating or sleeping), regardless of the current COVID-19 Community Level or outbreak status. ○ Residents & staff should also consider their individual risk when determining whether they should wear a mask. It is especially important for vulnerable people to consider masking within indoor communal areas of the facility and within indoor public spaces. <ul style="list-style-type: none"> ○ Vulnerable people include those who: are NOT up to date with recommended vaccine doses, are immunocompromised, and/or have disabilities or health conditions that put them at higher risk for severe illness or death from COVID-19 infection. ○ Residents & staff should make sure that their masks provide the best fit and filtration. See CDPH's 'Get the Most Out of Masking' page for more information.
<input type="checkbox"/>	<ul style="list-style-type: none"> ○ Cal/OSHA ETS also has strict requirements for face coverings for staff. <ul style="list-style-type: none"> ○ You are REQUIRED to provide and ensure use of face coverings at all times in certain settings AND in all settings during outbreaks and major outbreaks. ○ You are also REQUIRED to provide N95 respirators to any staff who requests one. ○ You should evaluate the need for personal protective equipment (PPE) to prevent exposure to COVID-19 hazards, such as gloves, goggles, and face shields, and provide this PPE as needed. ○ You must allow staff to wear face coverings if they wish to unless wearing a face covering would create a safety hazard
<input type="checkbox"/>	<p>Put hand sanitizer in multiple locations around the facility especially:</p> <ul style="list-style-type: none"> ● Near entrances ● Dining and kitchen areas



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	<ul style="list-style-type: none"> • Each bedroom • All bathrooms
<input type="checkbox"/>	Teach your staff and residents how to prevent COVID-19. Plan to check and remind them often. Encourage COVID-19 Prevention Actions .
<input type="checkbox"/>	Put up signs in key locations to remind staff and residents about prevention measures .
STEP 5: Set up	
<input type="checkbox"/>	Space furniture to avoid crowding.
<input type="checkbox"/>	<p>Increase airflow inside the house or facility:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Open windows and doors to the outside <input type="checkbox"/> 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?" <input type="checkbox"/> Make sure exhaust fans in restrooms work at full capacity. <input type="checkbox"/> 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.
<input type="checkbox"/>	<p>Shared Bedrooms:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Beds should be set up in opposite directions (head-to-toe) and at least 6 feet apart. If this is not possible, then set up beds head to toe and at least 3 feet apart. <input type="checkbox"/> People in bunkbeds should also sleep head-to-toe. <input type="checkbox"/> Put up temporary barriers like curtains between beds.
<input type="checkbox"/>	<p>Shared kitchen and dining rooms:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Best to make bagged meals or have residents eat meals on trays in their rooms or outside. <input type="checkbox"/> Set places at the table a minimum of 6 feet apart and make sure diners keep 6 feet apart at all times. <input type="checkbox"/> Don't crowd. Have residents eat in shifts to limit the number eating together. <input type="checkbox"/> 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. <input type="checkbox"/> Make sure there is a person watching and making sure rules are followed.



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<input type="checkbox"/>	<p>Shared bathrooms:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Make sure bathrooms are continuously stocked with soap and paper towels or automated hand dryers. Hand sanitizer could also be made available. <input type="checkbox"/> Make sure trash cans are emptied regularly. <input type="checkbox"/> Provide information on how to wash hands properly. Hang signs in bathrooms. <input type="checkbox"/> 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.
<input type="checkbox"/>	<p>Shared laundry rooms:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Maintain access and adequate supplies to laundry facilities to help prevent spread of COVID-19. <input type="checkbox"/> Restrict the number of people allowed in laundry rooms at one time to ensure everyone can stay at least 6 feet (2 meters) apart. <input type="checkbox"/> Provide disposable gloves, soap for washing hands, and household cleaners and products from EPA's List N: Disinfectants for Coronavirus (COVID-19) for residents and staff to clean and disinfect buttons, knobs, and handles of laundry machines, laundry baskets, and shared laundry items. <input type="checkbox"/> Post guidelines for doing laundry such as washing instructions and handling of dirty laundry.
<input type="checkbox"/>	<p>Shared living areas:</p> <ul style="list-style-type: none"> <input type="checkbox"/> During an outbreak consider closing TV rooms and other shared spaces. <input type="checkbox"/> Post signs where people get together to talk, smoke, or eat. These activities are high risk especially if they involve mask removal. <input type="checkbox"/> Put visual markers on the ground that are 6 feet apart. <input type="checkbox"/> Unless it is necessary, staff should not enter residents' living quarters. Instead try using phone or video chat to check in. <input type="checkbox"/> Limit the presence of non-essential volunteers and visitors in shared areas, when possible.
Step 6: Cleaning and disinfecting	
<input type="checkbox"/>	See CDC Guidance on Cleaning and Disinfection for Community Facilities .
<input type="checkbox"/>	<p>When a resident or staff tests positive for COVID-19, carefully clean and disinfect all areas they touched using EPA approved cleaning agents.</p> <ul style="list-style-type: none"> <input type="checkbox"/> See List of EPA approved cleaning agents. <input type="checkbox"/> Pay close attention to dilution instructions and contact time on the product label. <input type="checkbox"/> Make sure that staff who are doing the cleaning wear the proper PPE and follow safety instructions.



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	<input type="checkbox"/> Close off areas visited by the ill persons until carefully disinfected. <input type="checkbox"/> Open outside doors and windows and use fans in the area to increase circulation while cleaning. <input type="checkbox"/> Wait 24 hours, or as long as possible, before cleaning or reopening for use.
<input type="checkbox"/>	High-touch surfaces and shared bathrooms should be cleaned at least once per day. If you want to use cleaning products with disinfectants, choose products from approved EPA list above.
STEP 7 Protect Staff	
<input type="checkbox"/>	Employers are required to do what they can to keep staff safe from COVID-19 in the workplace. Please see Cal/OSHA's COVID-19 Emergency Temporary Standards
<input type="checkbox"/>	Cal/OSHA's COVID-19 Emergency Temporary Standards FAQ includes a helpful summary and link to a model Prevention Program.
To keep staff safe:	
<input type="checkbox"/>	If there is a shared office, try to stagger use or set up workstations at least 6 feet apart.
<input type="checkbox"/>	Staff should avoid sharing equipment; if equipment must be shared, clean it between use. Staff should never share objects (like phones) that may come into contact with their face, mouth, or nose.
<input type="checkbox"/>	Try to arrange stable work groups (by shifts, locations, and/or work duties) so that the same staff stay together without mixing across groups.
<input type="checkbox"/>	<p>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.</p> <input type="checkbox"/> Stagger break times <input type="checkbox"/> Use outside space for breaks if weather is good. <input type="checkbox"/> Ask staff to use their own cars when removing their masks to eat/drink. <input type="checkbox"/> 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. <input type="checkbox"/> Put EPA approved disinfectant wipes and hand sanitizers in break rooms and shared offices so that staff can clean between uses. <input type="checkbox"/> Post signs to remind staff to follow prevention practices.
<input type="checkbox"/>	<p>Cal/OSHA ETS requires that employers provide thorough staff training that includes the below topics and much more:</p> <ul style="list-style-type: none"> • Your facility's COVID-19 policies and procedures • Worker benefits • COVID-19 transmission • Face coverings and respirators • Hand hygiene <p>See Cal/OSHA ETS training requirements for more information.</p>



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STAFF RESOURCES	
<input type="checkbox"/>	ACPHD has a list of staff resources and website that should be shared with staff.
<input type="checkbox"/>	See Equal Employment Opportunities Commission’s (EEOC) info on staff protection laws .
Step 8. TESTING	
<input type="checkbox"/>	View CDC’s Testing Strategies for SARS-CoV-2 .
<input type="checkbox"/>	Follow CDC testing guidance : <ul style="list-style-type: none"> ○ All close contacts should get tested between 3-5 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.
<input type="checkbox"/>	If a staff member or resident tests positive, you will need to do facility-wide testing. Test all residents and staff (except recent positive cases) at least weekly (more frequent testing is better) 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.
<input type="checkbox"/>	Screening testing involves testing people without symptoms and without known exposure. When screening testing is done for residents and staff in congregate living settings, it helps to identify positive cases quickly and prevent outbreaks. <ul style="list-style-type: none"> • It is recommended that screening testing is done on a regular basis (such as weekly) in congregate living facilities when the COVID-19 Community Level is medium or high. • If your facility is partnered with HCH, please review the HCH Shelter Health and COVID-19 page OR reach out to the HCH team at achch@acgov.org for additional testing guidance.
<input type="checkbox"/>	People can get tested through their own healthcare provider, at a community testing site , or you could set up on-site testing. Talk to your OI about mobile testing options. Your OI can help you make a plan and find local testing resources.
<input type="checkbox"/>	As an employer, you are required to inform staff, even those with no known exposure, of how to get tested. You are also required to follow all testing requirements for workplaces outlined in Cal/OSHA’s ETS. View Cal/OSHA ETS FAQ under testing requirements for more information.
<input type="checkbox"/>	Keep a record of test results, if possible, to give to your OI.
<input type="checkbox"/>	See ACPHD Criteria for Release from Home Isolation and/or How Long Should I stay in Quarantine?
<input type="checkbox"/>	Per Cal/OSHA ETS, staff close contacts are required to test by Day 5 in order to continue to work (regardless of their vaccination status). See Cal/OSHA’s ETS page for more information.



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<input type="checkbox"/>	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.
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Step 9. Vaccine Status Verification

<input type="checkbox"/>	<p>Staff within residential substance use treatment and mental health treatment facilities must get vaccinated & receive eligible boosters unless they have a qualifying exemption. These facilities must also maintain vaccine status records of all staff per the State Public Health Officer Order: Health Care Worker Vaccine Requirement.</p> <ul style="list-style-type: none"> • Staff with vaccine exemptions must wear an approved respirator or surgical mask at all times while in the facility. <p>All facilities are strongly encouraged to verify vaccine status of all staff and residents. Check the Vaccine Record Guidelines & Standards for preferred proof.</p>
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Ongoing: MONITORING FOR ILLNESS & EXPOSURE

<input type="checkbox"/>	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.
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<input type="checkbox"/>	Screen all residents, staff, and essential visitors for signs and symptoms of COVID-19 each day. If symptoms develop, the person should immediately isolate and test as soon as possible.
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<input type="checkbox"/>	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	Observe for illness (even if not reported)			
Temperature check	Fever of $\geq 100^{\circ}$ F (37.8° C)			

<input type="checkbox"/>	Encourage residents and staff to get vaccinated against COVID-19. See info about how to get vaccinated .
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Ongoing: COMMUNICATION with ACPHD

<input type="checkbox"/>	<p>Please see CDPH REPORTING requirements for Non-Healthcare Congregate Facilities.</p> <p>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</p>
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	Reporting Threshold for Shelters and Congregate Living Facilities for more information.
<input type="checkbox"/>	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.
<input type="checkbox"/>	Send your OI a map/floor plan of your facility as soon as possible.
<input type="checkbox"/>	If you have a COVID Safety Prevention Plan in place, please send it to your OI.
<input type="checkbox"/>	Send a list of all staff members to your OI with: <ul style="list-style-type: none"> ✦ Job description ✦ Work location ✦ Work schedule ✦ Contact information
REOPENING to new residents	
<input type="checkbox"/>	When you do take new residents, consider requesting a negative COVID-19 test taken within 48 hours of move-in. While waiting for results, the new resident should isolate away from others.
<input type="checkbox"/>	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) unless approved by your OI.
<input type="checkbox"/>	Do not accept residents with a recent close contact until they have completed their quarantine period of 10 days from last exposure unless approved by your OI.
<input type="checkbox"/>	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.
<input type="checkbox"/>	If a new resident develops symptoms of COVID-19, they should isolate and test as soon as possible.
<input type="checkbox"/>	New residents without symptoms should be encouraged to retest 5 days after move-in but don't have to isolate while waiting for results.
<input type="checkbox"/>	Talk to your OI about safely reopening to admissions or to group activities.



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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 (OI) who will help you prevent and/or control an outbreak as quickly as possible. Regular and open communication with your OI is essential.

Alameda County

Alameda County Public Health Department (ACPHD) MAIN COVID-19 website
<https://covid-19.acgov.org/index.page>

ACPHD Masking Resources
<https://covid-19.acgov.org/face-masks>

ACPHD Isolation and Quarantine Resources
<https://covid-19.acgov.org/isolation-quarantine.page>

Alameda County Resources for Help Finding a Healthcare Provider

- **Family Health Line Toll Free Number:** 1-888-604-4636
 - Use this number if you currently have or recently applied for Medi-Cal.
- **Health Insurance Enrollment Assistance Toll Free Number:** 1-800-422-9495
- **HealthPAC:** 1-877-879-9633; <http://www.acgov.org/health/indigent/pac-all.htm>
 - Use this number for help applying for free or low-cost health insurance including Medi-Cal and Covered CA. Visit the page linked above to learn more about HealthPAC.
- Alameda County Child Health and Disability Prevention (CHDP) program's Find-a-Doctor web page: <https://acphd.org/chdp/find-a-doctor/medical/>
- **CHDP Information Line:** 1.510.567.2070
- **CHDP Family Help Line:** 1.888.604.4636
- Resource locator for low-cost healthcare services in Alameda County:
<http://achealthcare.org>

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

ACBH COVID-19 Web Page: <https://www.acbhcs.org/providers/COVID-19/index.htm>



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Alameda County COVID-19 Recovery Resources for the Workplace

<https://covid-19.acgov.org/recovery>

- COVID-19 Worksite-Specific Protection Plan Guidance & Template for Developing Your Own Plan: <https://covid-19.acgov.org/covid19-assets/docs/shelter-in-place/20-21-appendix-a-protection-plan-guidance-and-template-eng-2021.03.01.pdf>
- Staff Resources: <https://covid-19.acgov.org/recovery>

ACPHD Vaccination Information webpage

<https://covid-19.acgov.org/vaccines>

California

Infection Control Guidance for Clients in Congregate Shelters, Including Shelters for People Experiencing Homelessness

<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/infection-control-guidance-clients-congregate-shelter-including-homelessness.aspx>

CDPH The California SMARTER Plan

<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/California-Response.aspx>

CDPH Guidance for The Use of Face Masks

<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

<https://www.cdc.gov/coronavirus/2019-ncov/communication/guidance.html>

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

<https://www.cdc.gov/coronavirus/2019-ncov/community/homeless-shelters/plan-prepare-respond.html>



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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>

CDC Guidance for Retirement Communities and Independent Living

<https://www.cdc.gov/coronavirus/2019-ncov/community/retirement/index.html>