





# COVID-19 STRATEGY



This strategy highlights key components of HCSA’s COVID-19 response framework. **Community engagement** and **equity** considerations are infused throughout HCSA’s work to reduce near and long-term impacts of the pandemic on disproportionately affected communities.

GOALS	 Prevent & control the spread of COVID-19	 Find, test, & isolate cases and their contacts to prevent further spread	 Support care of COVID-19 patients	 Coordinate an Effective Response
OBJECTIVES	Minimize community transmission  Protect high-risk populations	Test widely  Investigate cases and trace contacts  Isolate infected people and quarantine their contacts	Ensure availability of critical care capacity  Provide high-risk populations with needed support through their illness and recovery  Distribute available treatment and vaccines	Establish a functional incident management system  Use data to drive decisions  Engage communities and the organizations that serve them  Clearly communicate through multiple means

## GOAL 1: Prevent & Control the Spread of COVID-19

### *OBJECTIVE 1.1: Minimize community transmission*

Alameda County was among the first counties in the nation to issue stay at home orders in mid-March, and has subsequently issued modified and extended those orders several times. Our county is culturally and geographically diverse, with urban, suburban, and rural areas; and we have industry representation from small and large manufacturing, agriculture, construction, technology, and retail and hospitality businesses. We have taken a measured and incremental approach to reopening, and throughout the pandemic, have issued guidance to protect community members at high risk, to promote workplace safety, and messaged the importance of preventive measures such as face coverings, physical distancing, and frequent hand washing. Opening and closing actions are considered based on a combination of metrics and other factors, including case rates, COVID-19 hospital census, ICU availability, change in hospitalizations, and disease containment capacity.

Strategy	Tactics
<p>Implement and adapt population-level protective measures to reduce exposure</p>	<ul style="list-style-type: none"> <li>▪ Issue <a href="#">Health Officer orders</a> to require sheltering in place, universal face coverings, physical distancing, blanket isolation &amp; quarantine.</li> <li>▪ Require all businesses operating in Alameda County to prepare and implement site specific safety plans that include plans to accommodate administrative controls, physical distancing, face coverings, employee training on COVID-19 symptoms monitoring and transmission prevention, and enhanced cleaning protocols.</li> <li>▪ Issue <a href="#">guidance to workplaces</a>, including essential workplaces, to ensure employees and customers are adequately protected.</li> <li>▪ Issue guidance for <a href="#">schools, colleges and childcare</a> centers</li> <li>▪ <a href="#">Establish and monitor metrics</a> to measure progress against COVID-19</li> <li>▪ Use metrics to guide forward and backward movement through a <a href="#">reopening plan</a>.</li> </ul>
<p>Provide guidance to individuals, organizations, and businesses on how to minimize risk in various settings</p>	<ul style="list-style-type: none"> <li>▪ Issue <a href="#">Health Officer orders</a> to require Site Specific Protection Plans that identify basic protective measures to be implemented across industries.</li> <li>▪ Issue <a href="#">industry-specific guidance</a> that considers specific challenges associated with particular industries and promotes best practices for that industry.</li> <li>▪ Share resources for <a href="#">worker protection</a></li> </ul>

*OBJECTIVE 1.2: Protect high-risk populations*

Certain populations are at higher risk of transmission or complications resulting from COVID-19 infection, including frontline workers and people in congregate living situations. According to the Center for Economic and Policy Research, which relies on 2014-2018 data from the American Community Survey, **Alameda County has more than 235,000 frontline and essential workers across 11 industry categories.** Women and people of color are disproportionately overrepresented these industries. To promote employee rights and flexibility in caring for themselves and their loved ones, we encourage all employers to comply with local, state, and federal laws about sick leave, retaliation and workplace safety. Our COVID Recovery team provides technical assistance to organizations seeking help with their site specific plans.

**There are currently 1,958 known congregate living settings in Alameda County,** which include skilled nursing facilities, residential care facilities, shelters, residential treatment programs, homeless encampments, and jail. Alameda County has several Specialized Teams dedicated to preventing and mitigating outbreaks in congregate settings, including a Long-Term Care Facilities Task Force, a Correctional Facilities Team, a Food Facilities Team, a Workplace Team, and an Unsheltered Team. We have issued guidance for congregate living settings, including an [order for licensed facilities](#), guidance for [behavioral health residential facilities](#), and provide ongoing technical [support for homeless services providers](#).

As we anticipate an increase in cases in congregate settings, we are working on expanding our outbreak teams and capacity as well as our outbreak definitions based on facility type. Our case investigations teams monitor and track outbreaks as they occur, and we are in the process of assessing the ability for our various congregate settings to safely isolate and quarantine positive individuals. We use an established referral process to identify individuals who cannot safely isolate or quarantine to isolation and quarantine hotels in Alameda County.

Strategy	Tactics
<p>Work with operators of congregate living facilities to reduce transmission in these facilities and to protect vulnerable residents and staff.</p>	<ul style="list-style-type: none"> <li>▪ Long Term Care Facility Task Force comprising an outbreak team of public health nurses and public health outbreak investigators conducts facility case investigations, assists in managing infection control, and mitigation of additional cases. Team responsibilities:               <ul style="list-style-type: none"> <li>○ Proactively reach out to facilities with cases, contacts, suspect cases, contacts from facilities with known cases;</li> <li>○ Conduct on-site facility investigation to review protocols and procedures, work with staff to manage and control the current outbreak and focus on staffing issues related to continuity of resident care;</li> <li>○ Review current recommendations with facility staff, review of line lists, provision of recommendations, and coordinated sharing of facility information;</li> <li>○ Provide subject matter expertise for infection control to prevent/control outbreaks, including PPE training, review of infection control procedures, review of facility layout, and observation and review of patient movement, resident placement, cohorting isolation.</li> </ul> </li> </ul>

Strategy	Tactics
	<ul style="list-style-type: none"> <li>○ Coordinate with the Medical Health Branch at the EOC regarding priority outbreaks to prioritize requests for staffing, PPE, and other resources, as needed;</li> <li>○ Conduct testing for long-term care facility residents and staff and trains long-term care facility staff to conduct their own testing.</li> <li>○ Conduct weekly conference calls with long-term care facility providers to provide information and guidance using All Facility Letters, CDC, state and local guidance;</li> <li>○ Work in coordination with the Alameda-Contra Costa Medical Association to conduct outreach with Medical Directors of long-term care facilities to provide information and guidance, identify and share best practices.</li> </ul> <ul style="list-style-type: none"> <li>▪ Work in collaboration with the Alameda County Sheriff’s Office and Wellpath, the healthcare provider responsible for the provision of medical services at Santa Rita Jail to prevent transmission, infection, and death associated with COVID-19, including to: <ul style="list-style-type: none"> <li>○ Apply a pre-screening process to provide an initial classification regarding a detainee’s risk for COVID-19, classifying detainees based on symptoms and exposure</li> <li>○ Implement a comprehensive plan for testing detainees for COVID-19</li> <li>○ Designate detainee housing based on their exposure to or risk for COVID-19,</li> <li>○ Implement temperature checks of all visitors and staff prior to entry into Santa Rita Jail</li> <li>○ Report daily on any new positive cases or suspected cases among detainees; intake and release testing of detainees; and contacts.</li> <li>○ Report publicly on all COVID-19 cases at Santa Rita Jail on the County’s COVID-19 data dashboard;</li> <li>○ Conduct site inspection of Santa Rita Jail to assess: 1) screening, isolation, quarantine, and social distancing measures for detainees; 2) use and access to facemasks, PPE, and hand hygiene among detainees and staff; 3) COVID-19 care and testing procedures among detainees; and 4) communication and coordination between ACPHD, Wellpath, and ACSO regarding cases and contacts among detainees and staff.</li> </ul> </li> <li>▪ Establish a tiered PPE Prioritization Matrix based on facilities/professions with the highest need for infection control and/or high-risk exposures to COVID-19, with emergency/receiving hospitals, medical first responders (fire/EMS), skilled nursing facilities (SNF), long term care centers (LTC), home health care, clinics, urgent care, boarding/home health care facilities, COVID-19 test sites working directly with the County’s Public Health Department, and outreach workers who are directly working with high-risk populations in Tier 1.</li> </ul>

Strategy	Tactics
	<ul style="list-style-type: none"> <li>▪ Conduct a <a href="#">procurement solicitation</a> to identify testing partners, including hospitals seeking to partner to provide testing of long-term care facility residents and staff, and mobile testing vendors that can be dispatched to provide on-site testing at long-term care facilities, homeless shelters, homeless encampments, and other high-risk settings.</li> <li>▪ Maintain a resource request process through the County Emergency Operations Center to request clinical staff when needed, using the California Health Corps Registry of over 1500 individuals.</li> </ul>
<p>Focus intensive infection prevention efforts on people who are experiencing homelessness.</p>	<ul style="list-style-type: none"> <li>▪ Increase shelter and encampment support and multi-jurisdictional coordination (e.g., portable latrines, hand wash stations, hygiene supplies, visiting nurses/outreach teams, daily assessment.)</li> <li>▪ Support homeless service providers with <a href="#">information and guidance</a> on COVID-19 related shelter health protocols, safe outreach and engagement, outbreak response, and COVID-19 testing.</li> <li>▪ Decompress shelters to allow for physical distancing.</li> <li>▪ Secure and support <a href="#">isolation/quarantine hotels</a> for homeless individuals who are COVID+, COVID-exposed, or at high risk for severe illness related to COVID-19.</li> </ul>
<p>Provide guidance and support to reduce transmission among health care workers, pre-hospital transport providers, and other front-line service personnel.</p>	<ul style="list-style-type: none"> <li>▪ Issue Health Officer orders as needed to contain disease and protect the public’s health</li> <li>▪ Issue a Face Covering order, requiring face coverings to be worn in all essential businesses.</li> <li>▪ Require all businesses operating in Alameda County to prepare and implement site specific safety plans that include plans to accommodate administrative controls, physical distancing, face coverings, employee training on COVID-19 symptoms monitoring and transmission prevention, and enhanced cleaning protocols.</li> <li>▪ Issue <a href="#">guidance to workplaces</a>, including essential workplaces, to ensure employees and customers are adequately protected.</li> <li>▪ Issue guidance and support free testing for all health care workers, essential frontline workers, and first responders.</li> <li>▪ Post information on worker protection and employer obligations for safe work environments on our <a href="#">Worker Resources page</a>.</li> <li>▪ Establish a tiered PPE Prioritization Matrix based on facilities/professions with the highest need for infection control and/or high-risk exposures to COVID-19, with emergency/receiving hospitals, medical first responders (fire/EMS), skilled nursing facilities (SNF), long term care centers (LTC), home health care, clinics, urgent care, boarding/home health care facilities, COVID-19 test sites working directly with the</li> </ul>

Strategy	Tactics
	<p>County’s Public Health Department, and outreach workers who are directly working with high-risk populations in Tier 1.</p> <ul style="list-style-type: none"> <li>▪ Encourage all employers to comply with local, state, and federal laws about sick leave, retaliation and workplace safety to promote employee rights and flexibility in caring for themselves and their loved ones.</li> <li>▪ Provide technical assistance to organizations seeking help with their site specific plans through our COVID Recovery Team.</li> <li>▪ Facilitate resource requests from front-line businesses and organizations for supplies and equipment when private supply chains are insufficient.</li> <li>▪ Prioritize essential and frontline workers, healthcare workers, and first responders at free community-based testing sites.</li> </ul>
<p>Require accurate collection and reporting of data on race, ethnicity, language and other sociodemographic factors at all stages of COVID-19 including testing and treatment, hospitalizations and deaths to fully understand the profile of disparities.</p>	<ul style="list-style-type: none"> <li>▪ Issue <a href="#">Health Officer order</a> to require laboratory reporting of key demographic information on all tests with positive, negative, or inconclusive results.</li> <li>▪ Regularly remind providers and testing sites to report complete and accurate information</li> <li>▪ Develop mechanisms to collect data in ways that are significant and meaningful to community members while feasible for medical providers and labs.</li> </ul>

## GOAL 2: Find, Test & Isolate Cases and Contacts

### *OBJECTIVE 2.1: Test Widely*

Increasing COVID-19 testing and lab processing services in the County is key to addressing health disparities resulting from the pandemic as well as implementing a safe reopening plan. A critical aspect of reopening is the availability of COVID-19 testing that is sufficient to monitor community transmission leading to outbreaks. Alameda County is creating equitable access to testing for all residents with a focus on those most impacted by COVID-19. **At the end of June 2020, we reached our goal of 2 tests per 1,000 residents or 3,100 tests per day and have consistently exceeded it since then. As of July 14, 2020, there were 26 testing sites in the County, 10 of which are community testing sites offering no-cost testing.** While sites and providers are encouraged to ensure access for health care workers, first responders, and essential and frontline workers, these sites are available to anyone, regardless of symptoms, immigration or insurance status. The County’s [Testing webpage](#) offers information and guidance.

Strategy	Tactics
<p>Ensure that no-cost testing is available countywide, with a focus on low-income and ethnically diverse neighborhoods, vulnerable populations, and symptomatic individuals.</p>	<ul style="list-style-type: none"> <li>▪ Create and post <a href="#">testing information and guidance</a> for residents and providers.</li> <li>▪ Established no-cost community testing sites with a focus on testing in geographies and among populations with highest health disparities who are at high risk for transmission and severe illness due to COVID-19.</li> <li>▪ Conduct a <a href="#">procurement</a> to identify testing partners in four key areas:               <ul style="list-style-type: none"> <li>○ Covid-19 Testing Vendors (i.e., testing registration, point of service, and lab processing vendors, or the partnership of primary vendor and subcontractor(s) who can provide the full set of services). These vendors may apply to provide services at stationary community testing sites and mobile testing sites, including testing in Long Term Care Facilities (LTCFs);</li> <li>○ Community Health Centers and Primary Care Medical Clinics who serve the Medi-Cal, HealthPAC, and/or uninsured populations and are looking to expand testing for their population and the general public;</li> <li>○ Hospitals seeking to partner with the County to provide testing in Long Term Care Facilities and other congregate settings; and</li> <li>○ Labs who are able to provide COVID-19 lab processing to expand the capacity of the County Public Health Lab.</li> </ul> </li> <li>▪ Create a <a href="#">County-City COVID-19 Testing Partnership Framework</a> to guide testing collaborations with cities.</li> </ul>

*OBJECTIVE 2.2: Contact Cases and Trace Contacts*

Prior to COVID-19, Alameda County had a team of 7 case investigation/contact tracing (CI/CT) staff for more than 80 reportable diseases. **As of July 14<sup>th</sup>, we have 93 staff trained and deployed in a team-based model to perform case investigations and contact tracing. The staff reflect ethnic, racial, and linguistic diversity. We have an additional 40 people are in the training pipeline and are working toward a CI/CT workforce of 300 to meet surge needs.** We are partnering with community-based organizations in a two-phase plan to expand staffing capacity and ensure cultural and racial sensitivity in our work. The first phase, launched in late June, includes emergency contracts with four clinical providers serving areas and communities experiencing high case rates. For the second phase, to be launched in August, we will issue an RFP for interested community partners who would either hire people or leverage their existing workforce to integrate with our case investigation and contact tracing program.

Strategy	Tactics
Expand case investigation and contact tracing operations.	<ul style="list-style-type: none"> <li>▪ Convert from a function-based case investigation/contact tracing operation to a scalable team-based staffing model with the goal of 300 case investigation/contact tracing staff.</li> <li>▪ Contract with community-based organizations to do contact tracing, informing and outreach work</li> </ul>
Employ technology to improve reach and efficiency of case investigation and contact tracing efforts.	<ul style="list-style-type: none"> <li>▪ Join State data platform, CalConnect, to support case investigation/contact tracing efforts</li> <li>▪ Supply sufficient data and tech support across the contact investigation/contact tracing workforce, providing access to laptops, headsets, and other technological supports, with 7 day a week and evening tech support</li> </ul>
Ensure the contact tracing workforce is culturally and linguistically appropriate and trauma-informed.	<ul style="list-style-type: none"> <li>▪ Contract with trusted partners with strong relationships and cultural and linguistic ties to the community.</li> <li>▪ Recruit individuals from directly impacted communities who have a long-term commitment to underserved and unserved communities.</li> <li>▪ Supplement State Contact Tracing Academy, with additional training in local community needs, operating procedures, and working with diverse populations.</li> </ul>

*OBJECTIVE 2.3: Isolate infected people and quarantine their contacts*

People who face safety or economic barriers to appropriate isolation and quarantine are supported through collaboration across the Alameda County Health Care Services Agency, the Alameda County Social Services Agency, All-In (the County’s anti-poverty initiative), and community partners. Resources such as food, hotel rooms, and links to other resources including social services, behavioral health, and resources for workers and renters are available to ensure that people can safely isolate and quarantine. We are applying an extra focus to coordinating community



resources in five hot spot areas that have high rates of COVID-19 and high health disparities. **We currently operate 810 Project Roomkey isolation/quarantine units and are on our way to surpassing our goal of 1,203 units.**

Strategy	Tactics
<p>Provide culturally and linguistically appropriate, person-centered wrap-around services to ensure vulnerable populations can remain in isolation or quarantine without hardship.</p>	<ul style="list-style-type: none"> <li>▪ Establish a Community Resources team to identify and/or create community resources needed for appropriate isolation and quarantine (deliveries of food and medicines, isolation supplies, access to alternative living arrangements when isolation in the home is not feasible, etc.).</li> <li>▪ Provide dedicated social workers/case managers as part of the case investigation/contact tracing teams to assist the most vulnerable individuals and families in developing plans and linking to needed resources.</li> <li>▪ Ensure half of the dedicated social workers are bilingual in the primary languages other than English seen in our caseload.</li> </ul>
<p>Identify alternate isolation and quarantine locations for people who cannot safely isolate at home.</p>	<ul style="list-style-type: none"> <li>▪ Procure hotel rooms to provide a safe isolation and quarantine option for people who cannot safely isolate at home.</li> <li>▪ Establish referral process to identify individuals who cannot safely isolate or quarantine to isolation and quarantine hotels in Alameda County.</li> </ul>

## GOAL 3: Support Care of COVID-19 Patients

### *OBJECTIVE 3.1: Ensure availability of critical care capacity*

During a catastrophic emergency, the movement from individual-based care to population-based outcomes challenges the professional, regulatory and ethical paradigms of the healthcare delivery system. Surge capacity refers to the ability of hospitals and healthcare providers to evaluate and care for a markedly increased volume of patients that challenge or exceed the normal capacity of a hospital or healthcare system. Very large incidents may affect local, regional, and state resources so a coordinated response in addition to forecasting for a future surge response plan is critical.

**Alameda County maintains health care system readiness through the Disaster Preparedness Health Coalition comprised of four core partners including EMS, Public Health, Emergency Management and Hospitals. We maintain direct and continuous communication and collaboration with our skilled nursing facilities, clinics, dialysis, home health, hospice and other healthcare partners, county agencies, city partners and other organizations.** The healthcare system includes provider networks of hospital, ambulatory care, in-home services, long-term care, behavioral health and ancillary care services. There are 13 acute care receiving facilities in Alameda County that provide a wide range of services to care for the health needs of residents and visitors of Alameda County and feature specialized care programs including trauma, stroke, pediatric, psychiatric and cardiac services. All Alameda County hospitals have plans in place to track and address occupational exposure and are testing patients prior to admission to hospital.

Strategy	Tactics
<p>Plan with healthcare providers to ensure they can safely surge their capacity to meet the critical care needs of current and projected cases.</p>	<ul style="list-style-type: none"> <li>▪ Track hospital capacity, including COVID-19 cases, hospital census, ICU census, ventilator availability on a daily basis.</li> <li>▪ Hold weekly calls with health facilities in the County for ongoing healthcare systems planning.</li> <li>▪ In partnership with health care partners, developed the Alameda County COVID-19 Surge Plan, which documents and quantifies the activities and discussions to date, provides projections of anticipated surge scenarios, provides an inventory of expected surge resources, and coordinates the optimal utilization of those resources during crisis conditions.</li> <li>▪ Conduct regular health care system polls via ReddiNet.</li> </ul>
<p>Equip and protect healthcare providers with appropriate controls and supplies.</p>	<ul style="list-style-type: none"> <li>▪ Manage all requests for PPE and supplies (including masks, gown, face shields, gloves and other items such as hand sanitizer, thermometers, sanitizing wipes and other items) through the Medical Health branch of the Emergency Operations Center.</li> <li>▪ Establish a PPE Prioritization Matrix based on facilities/professions with the highest need for infection control and/or high-risk exposures to COVID-19:</li> </ul>

Strategy	Tactics
	<ul style="list-style-type: none"> <li>○ Tier 1: emergency/ receiving hospitals medical first responders (fire/EMS); skilled nursing facilities (SNF); long term care centers (LTC); home health care; clinics; urgent care; boarding/home health care facilities; covid-19 test sites working directly with the County’s Public Health Department; outreach workers who are directly working with high-risk populations</li> <li>○ Tier 2: other hospitals; non-medical first responders; hospice; dialysis centers; surgery centers; support services for tier 1 and 2 (cleaning/disinfecting, drivers, deliveries); jail</li> <li>○ Tier 3: standard transportation workers; community-based organizations; dental providers; utilities (power, water, waste management); workers in public (dock/Port of Oakland, airport, construction)</li> <li>▪ Require weekly certification of PPE supplies from each hospital.</li> </ul>

*OBJECTIVE 3.2: Provide vulnerable populations with needed support through their illness and recovery*

Approximately 25,000 low-income uninsured Alameda County residents have access to a regular source of health care through the HealthPAC program. HealthPAC provides coordinated health services through a network of primary care medical homes and acute care providers. Non-medical needs are met through the same Community Resources Team infrastructure, providing resources such as food, hotel rooms, and links to other resources including social services, behavioral health, and resources for workers and renters are available to ensure that people can safely isolate and quarantine.

Strategy	Tactics
<p>Ensure uninsured individuals have access to the care and treatment they need.</p>	<ul style="list-style-type: none"> <li>▪ Ensure uninsured Alameda County residents enrolled in the HealthPAC program have access to COVID-19 care and treatment through the HealthPAC provider network.</li> <li>▪ Support cost-free community testing sites available to all residents of the county, regardless of insurance or immigration status</li> </ul>
<p>Provide culturally and linguistically appropriate, person-centered wrap-around services to support vulnerable patients.</p>	<ul style="list-style-type: none"> <li>▪ Establish a Community Resources Team to identify and/or create community resources needed for appropriate isolation and quarantine (deliveries of food and medicines, isolation supplies, access to alternative living arrangements when isolation in the home is not feasible, etc.).</li> <li>▪ Provide dedicated social workers/case managers as part of the case investigation/contact tracing teams to assist the most vulnerable individuals and families in developing plans and linking to needed resources.</li> <li>▪ Ensure half of the dedicated social workers are bilingual in the primary languages other than English seen in our caseload.</li> </ul>

*OBJECTIVE 3.3: Distribute available treatment and vaccines*

While COVID-19 treatment options are limited at this time, Remdesivir has been approved by the FDA and made available to counties in small quantities. The Health Care Services Agency leveraged its provider readiness network and surge planning efforts to develop an equitable process for the distribution of Remdesivir across hospitals in the county. Our collaborative clinical planning group identified an effective workflow and allocation process. This experience will be useful in the future, when introduction of new treatments and vaccines will require continued thoughtful prioritization and allocation planning. We also plan to leverage our Immunization Team’s infrastructure and experience during flu season as practice for future COVID-19 vaccine distribution plans.

Strategy	Tactics
Ensure equitable and ethical access to medication and therapies.	<ul style="list-style-type: none"><li>▪ Develop a methodology for distribution of therapies, such as Remdesivir</li><li>▪ Develop a vaccine deployment plan</li><li>▪ Use Fall 2020 flu season as preparation and practice for future vaccine deployment</li></ul>

## GOAL 4: Coordinate an Effective Response

### *OBJECTIVE 4.1: Establish a functional incident management system*

The Alameda County Health Care Services Agency (HCSA) includes the departments of Public Health, Behavioral Health, and Environmental Health, as well as multiple cross-agency programs, including a Whole Person Care pilot, indigent care programs, and an Office of Homelessness Care and Coordination. Hundreds of staff across the agency are deployed to the COVID-19 response within HCSA’s Department Operations Center while others are deployed to the County’s Emergency Operations Center, managed by the Alameda County Sheriff’s Office. The magnitude and duration of the pandemic will test and strain our traditional emergency response structures and requires attention to immediate needs as well as parallel planning for sustainability and the potential for overlapping emergency events, such as fire and flu seasons.

Strategy	Tactic
Support the Department Operations Center (DOC) to effectively coordinate HCSA’s response.	<ul style="list-style-type: none"> <li>▪ Deploy staff from all HCSA departments</li> <li>▪ Procure extra staff as needed, including through partnerships with community based organizations and medical staff registries</li> <li>▪ Develop medium and long-term plans for sustaining COVID-19 response</li> <li>▪ Maintain continuity of operations for essential functions</li> </ul>
Ensure coordination between the DOC and the County Emergency Operations Center (EOC).	<ul style="list-style-type: none"> <li>▪ Appoint an EOC Liaison to serve as bridge between DOC and EOC</li> <li>▪ Isolation and quarantine housing procurement</li> <li>▪ Coordinate with the Care &amp; Shelter Branch to support isolation and quarantine (food, supplies, temporary housing, etc)</li> <li>▪ Leverage size and scope of EOC for large procurement requests for staff and vendors</li> <li>▪ Prepare for coordinated messaging and response for potentially overlapping emergency events (fire season, PSPS, flu season, etc)</li> </ul>
Support healthcare providers and pre-hospital first responders.	<ul style="list-style-type: none"> <li>▪ Manage EOC’s Medical Health Branch</li> <li>▪ Develop consistent processes for PPE prioritization, inventory management, and request fulfillment</li> <li>▪ Provide relevant and timely <a href="#">clinical guidance</a> and health alerts</li> </ul>

*OBJECTIVE 4.2: Use data to drive decisions*

Alameda County has developed [multiple dashboards](#) to publicly share information regarding cases, hospitalizations, deaths, geographic spread, race/ethnicity, and long-term care facilities. These dashboards include data from the City of Berkeley, which is within Alameda County borders, but is a separate local health jurisdiction. We use data and metrics to measure the pace and scope of economic reopening, as well as to guide decisions regarding resource deployment to address immediate areas of need for the response. We intend to share more information as it becomes available. Incoming data sources include CalREDIE, ReddiNet, HAVBED/census reports, and EMS surveys/polling.

Alameda County coordinates with the seven Bay Area county health officers in strategizing actions to both open and close activities. Alameda County and Berkeley have, to date, restricted and re-opened the same sectors at the same time, with the same guidance. Both health jurisdictions intend to continue this approach.

Strategy	Tactics
<p>Maintain local situational awareness of the prevalence and impact of COVID-19.</p>	<ul style="list-style-type: none"> <li>▪ Communicate regularly for situational awareness and planning with the seven Bay Area health jurisdictions that collectively shelter-in-place orders for the region.</li> <li>▪ Coordinate with regional health officials through the Association of Bay Area Health Officers (ABAHO), to share information, coordinate actions and communications regionally.</li> </ul>
<p>Continuously analyze data for patterns and trends to inform and adapt response efforts.</p>	<ul style="list-style-type: none"> <li>▪ Monitor <a href="#">Alameda County COVID-19 indicators</a> and State Monitoring Project indicators</li> <li>▪ Expand and develop a robust DOC Data Branch</li> <li>▪ Collect and report data on race/ethnicity wherever possible</li> <li>▪ Build and support data intelligence functions in the DOC response structure</li> <li>▪ Identify thresholds for sector closing or opening decisions               <ol style="list-style-type: none"> <li>1. Case rates                   <ol style="list-style-type: none"> <li>a. Metric: case rate per 100,000 population averaged over 14 days (3-day lag)</li> <li>b. Frequency of measurement: daily</li> <li>c. Criteria for opening: flat or decreasing case rate sustained over 14 days</li> <li>d. Threshold for closure: case rate of &gt;200 per 100,000 per day sustained over 7 days</li> </ol> </li> <li>2. COVID hospital census                   <ol style="list-style-type: none"> <li>a. Metric: daily COVID hospital census as reported to CDPH in California Hospital Association survey</li> <li>b. Frequency of measurement: daily</li> </ol> </li> </ol> </li> </ul>

Strategy	Tactics
	<ul style="list-style-type: none"> <li>c. Criteria for opening: flat or decreasing daily COVID hospital census for 14 days</li> <li>3. Change in COVID hospitalizations               <ul style="list-style-type: none"> <li>a. Metric: percent change in the 3-day average daily number of confirmed COVID-19 patients currently hospitalized over the prior 3-day interval</li> <li>b. Frequency of measurement: daily</li> <li>c. Threshold for closure: 10% or greater increase sustained over 7 consecutive days</li> </ul> </li> <li>4. ICU bed availability               <ul style="list-style-type: none"> <li>a. Metric: percent of ICU beds currently available</li> <li>b. Frequency of measurement: daily</li> <li>c. Threshold for closure: &lt;20%</li> </ul> </li> </ul>
<p>Monitor COVID-19 tests, cases, hospitalizations, and deaths by key social demographics, including race/ethnicity and zip code.</p>	<ul style="list-style-type: none"> <li>▪ Develop and maintain a <a href="#">data dashboard</a> sharing relevant Alameda County COVID-19 data.</li> <li>▪ Use data to drive real-time decisions regarding disease containment, resource deployment, procurements, and community engagement</li> </ul>
<p>Share data with the public and with partners.</p>	<ul style="list-style-type: none"> <li>▪ Develop and maintain a <a href="#">data dashboard</a> sharing relevant Alameda County COVID-19 data.</li> <li>▪ Provide regular public presentations, participate in community forums, and share information with media</li> </ul>

*OBJECTIVE 4.3: Engage communities and the organizations that serve them*

During the COVID-19 pandemic the Alameda County Board of Supervisors and cities have been regularly apprised of the local data and progress toward the State’s reopening criteria. Health Care Services Agency leaders have held regular calls with a wide variety of stakeholders representing diverse sectors of our community. We engage with multiple coalitions and organizations that serve Black/African American, Asian, Native Hawaiian/Pacific Islander, Latino, homeless and other highly impacted communities. We partner with faith-based leaders and also participate in place-based conversations particularly in areas of high health disparities and COVID-19 impact.

Strategy	Tactics
<p>Engage community leaders, including faith leaders as well as community networks, in a two-way dialogue to build trust and monitor concerns and barriers to implementing public health and social measures.</p>	<ul style="list-style-type: none"> <li>▪ Hold regular calls with cities, including mayors, councilmembers, and city managers to provide situation updates and hear feedback on plans for moving forward.</li> <li>▪ Hold regular Operational Area briefings that include emergency managers from cities, higher education, regional parks, and various special districts.</li> <li>▪ Provide subject matter experts to participate in virtual town halls hosted by cities, chambers of commerce, and other organizations.</li> <li>▪ Hold regular calls with multiple stakeholders to build partnerships for community engagement, including: health care providers to coordinate surge planning and clinical policies; shelter providers to coordinate resources and guidance; and faith-based communities to offer updates and technical assistance for safe reopening.</li> <li>▪ Create a <a href="#">County-City COVID-19 Testing Partnership Framework</a> to guide testing collaborations with cities.</li> </ul>
<p>Consult with community-based organizations on population-specific needs, messages and modalities for relaying culturally and linguistically appropriate public health information on COVID-19.</p>	<ul style="list-style-type: none"> <li>▪ Establish a Health Equity Team that ensures the infusion of equity considerations throughout the response, including in areas of data collection and reporting, case investigations and contact tracing, information and guidance, testing, and community engagement</li> <li>▪ Participate with Oakland in a joint County/City Racial Diversity Task Force.</li> <li>▪ Deploy community engagement plan that focuses on reducing disparities and improving messaging and resource coordination for African American, Latino, and low-income communities hardest hit by pandemic.</li> <li>▪ Provide <a href="#">educational and outreach materials</a> in multiple threshold languages, including Spanish, Chinese, Vietnamese, Tagalog, Farsi, Korean, and others.</li> <li>▪ Create outreach materials for the Mayan Mam community, which does not have a written language.</li> <li>▪ Develop culturally responsive messaging with trusted community messengers</li> </ul>



*OBJECTIVE 4.4: Clearly communicate through multiple means*

Timely and accurate communication with the public, elected officials, community partners, and cities is a key function of the Health Care Services Agency’s COVID-19 response. Strategic communication efforts include regular briefings, near- and long-term prevention and outreach campaigns, media engagement, and ongoing guidance and technical assistance for the community and clinical providers. Ensuring an equity and cultural sensitivity lens, materials and information are available in multiple languages and developed in partnership with community whenever possible.

Strategy	Tactics
<p>Provide timely and accurate information to the public that is tailored to the stage of the epidemic and local conditions.</p>	<ul style="list-style-type: none"> <li>▪ Staff the Joint Information Center at the County’s EOC to engage and respond to media, and coordinate with public information officers across the county</li> <li>▪ Staff a robust Information and Guidance Section within the DOC to provide <a href="#">clinical guidance</a>, <a href="#">community guidance</a>, <a href="#">resources for businesses, schools and community serving organizations</a></li> <li>▪ Provide updated and timely information on <a href="#">website</a> and <a href="#">@Dare2BeWell</a></li> <li>▪ Post timely and relevant data on the County’s COVID-19 <a href="#">dashboards</a></li> <li>▪ Proactively plan and use established engagement channels/networks and trusted messengers</li> <li>▪ Manage misinformation</li> <li>▪ Ensure communications are culturally responsive &amp; linguistically appropriate</li> </ul>
<p>Conduct regular briefings for leaders and partners on case counts, countermeasures, recommendations and outlook.</p>	<ul style="list-style-type: none"> <li>▪ Present to the Board of Supervisors as a standing item on regular agenda</li> <li>▪ Hold regular and ongoing updates for all elected representatives in the County, including state and federal elected officials, mayors, council members, city managers, special districts, etc.</li> <li>▪ Regular and ongoing updates to BOS, cities, the health care community and other community partners</li> <li>▪ Regularly engage with community serving coalitions and task forces, business organizations, and</li> </ul>
<p>Conduct education campaigns to support adherence to public health recommendations and social measures.</p>	<ul style="list-style-type: none"> <li>▪ Launch the <i>Mask On Alameda County!</i> campaign, which pairs free face coverings with messaging, to encourage broad adoption of face coverings throughout Alameda County</li> <li>▪ Develop workplace safety and social contract campaigns to message that we are all responsible for protecting each other</li> <li>▪ Conduct outreach and health promotion activities with community partners</li> <li>▪ Develop medium and long-term messaging and health promotion campaigns in partnership with community serving organizations</li> </ul>