Healthcare Partner/EMS Provider Coordination Conference Call

COVID-19

July 9, 2020
8:30 – 9:30 am all facilities/agencies
Purpose of Partner Conference Call

- Assure and coordinate situational awareness between partners and PHD/EMSA
- Share best practices to prevent spread of COVID-19
- Discuss and confirm guidance to assure health care worker and patient safety
- Identify resource shortages and determine solutions
- Promote coordinated and efficient response to protect the community
Agenda

I. Situation Update
II. Updated Guidance
III. Resources, Supply Chain & Request Process
IV. Questions? Additional Issues?
# COVID-19 Situation Update - Santa Barbara County

<table>
<thead>
<tr>
<th>Geographic Area</th>
<th>Daily Cases</th>
<th>Total Confirmed Cases</th>
<th>Recovered by Region</th>
<th>Active Cases by Region</th>
<th>Number of Deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td>SOUTH COUNTY UNINCORPORATED AREA includes communities of Montecito, Summerland and the City of Carpinteria</td>
<td>2</td>
<td>72</td>
<td>57</td>
<td>14</td>
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<td>CITY OF SANTA BARBARA and the unincorporated area of Mission Canyon</td>
<td>11</td>
<td>424</td>
<td>342</td>
<td>80</td>
<td>3</td>
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<td>CITY OF GOLETA</td>
<td>4</td>
<td>79</td>
<td>67</td>
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<td>COMMUNITY OF ISLA VISTA</td>
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<td>20</td>
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<td>UNINCORPORATED AREA OF THE GOLETA VALLEY AND GAVIOTA</td>
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<td>46</td>
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<tr>
<td>SANTA YNEZ VALLEY including the Cities of Solvang &amp; Buellton, and the communities of Santa Ynez, Los Alamos, Los Olivos and Ballard</td>
<td>1</td>
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<td>7</td>
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<tr>
<td>CITY OF LOMPOC and the communities of Mission Hills and Vandenberg Village</td>
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<td>201</td>
<td>168</td>
<td>29</td>
<td>4</td>
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<tr>
<td>FEDERAL PRISON IN LOMPOC</td>
<td>0</td>
<td>984</td>
<td>981</td>
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<tr>
<td>COMMUNITY OF ORCUTT</td>
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<td>17</td>
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<tr>
<td>UNINCORPORATED AREAS of Sisquoc, Casmalia, Garey, Cuyama, New Cuyama, and the City of Guadalupe</td>
<td>9</td>
<td>147</td>
<td>127</td>
<td>20</td>
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</tr>
<tr>
<td>Out of County</td>
<td>—</td>
<td>—</td>
<td>0</td>
<td>0</td>
<td>—</td>
</tr>
<tr>
<td>Pending</td>
<td>11</td>
<td>107</td>
<td>83</td>
<td>24</td>
<td>—</td>
</tr>
<tr>
<td>Total</td>
<td>121</td>
<td>3808</td>
<td>3335</td>
<td>444</td>
<td>29</td>
</tr>
</tbody>
</table>

[https://publichealthsbc.org/status-reports/](https://publichealthsbc.org/status-reports/)
## Testing Status

<table>
<thead>
<tr>
<th>Status</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Positive</td>
<td>3808</td>
</tr>
<tr>
<td>Negative</td>
<td>48439</td>
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<tr>
<td>Inconclusive</td>
<td>152</td>
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<tr>
<td><strong>Total Tests</strong></td>
<td><strong>52399</strong></td>
</tr>
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</table>

## High Risk

<table>
<thead>
<tr>
<th>Category</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Care Workers (HCW)</td>
<td>157</td>
</tr>
</tbody>
</table>

## Transmission Method

<table>
<thead>
<tr>
<th>Method</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community Close Contact Transmission</td>
<td>737</td>
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<tr>
<td>Persons Incarcerated at Federal Prison in Lompoc Close Contact</td>
<td>984</td>
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<tr>
<td>Travel Transmission</td>
<td>12</td>
</tr>
<tr>
<td>Community Transmission</td>
<td>541</td>
</tr>
<tr>
<td>Under Investigation</td>
<td>1534</td>
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</tbody>
</table>

## Symptomatic Status

<table>
<thead>
<tr>
<th>Status</th>
<th>Total</th>
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</thead>
<tbody>
<tr>
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<tr>
<td>Symptomatic</td>
<td>951</td>
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<tr>
<td>Pending</td>
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## Recovery Status

<table>
<thead>
<tr>
<th>Status</th>
<th>Community</th>
<th>Federal Prison in Lompoc</th>
<th>Total (Community &amp; Prison)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Active Cases</td>
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<td>0</td>
<td>444</td>
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<tr>
<td>Recovered Cases</td>
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<td>981</td>
<td>3335</td>
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<tr>
<td>Recovering at Home</td>
<td>NO LONGER REPORTING</td>
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<td></td>
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<tr>
<td>Recovering in Hospital</td>
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<tr>
<td>Recovering in ICU</td>
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<td></td>
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</tr>
<tr>
<td>Pending Information</td>
<td>NO LONGER REPORTING</td>
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</tbody>
</table>

[https://publichealthsbc.org/status-reports/]
TOTAL
Cases: 3808
New Cases: 121
Daily Change: 3%
WEEK-ON-WEEK: New Cases (#):
544
WEEK-ON-WEEK: Change in Total Cases:
20%

https://publichealthsbc.org/santa-barbara-county-reopening-metrics/
## Cases Reported at Skilled Nursing Facilities

<table>
<thead>
<tr>
<th>Skilled Nursing Facility</th>
<th>Total Positive Residents</th>
<th>Total Positive Resident Deaths</th>
<th>Total Positive HCW Deaths</th>
<th>Total HCW Deaths</th>
<th>Current Outbreak</th>
<th>Positive Residents</th>
<th>Positive Residents Currently Hospitalized</th>
<th>Positive Resident Deaths</th>
<th>Positive HCW</th>
<th>Positive HCW Currently Hospitalized</th>
<th>Positive HCW Deaths</th>
<th>Date Facility Cleared</th>
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<tbody>
<tr>
<td>Alto Lucero Transitional Care</td>
<td>0</td>
<td>0</td>
<td>&lt;11</td>
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<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>6/20/20</td>
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<tr>
<td>Atterdag Care Center</td>
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<td>NA</td>
<td>NA</td>
<td>NA</td>
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<tr>
<td>Buena Vista Care Center</td>
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<td>0</td>
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<td>Casa Dorinda</td>
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<td>&lt;11</td>
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<tr>
<td>Country Oaks Care Center</td>
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<td>30</td>
<td>0</td>
<td>10</td>
<td>28</td>
<td>0</td>
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<td>0</td>
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<tr>
<td>Lompoc Skilled Nursing &amp; Rehabilitative Care Center</td>
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<td>&lt;11</td>
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<td>0</td>
<td>&lt;11</td>
<td>0</td>
<td>0</td>
<td>&lt;11</td>
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<td>0</td>
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<td>0</td>
<td>0</td>
<td>7/2/20</td>
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<td>Marlen Extended Care</td>
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<td>0</td>
<td>&lt;11</td>
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<td>0</td>
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<tr>
<td>Mission Terrace Santa Barbara</td>
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<td>NA</td>
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<td>0</td>
<td>0</td>
<td>NA</td>
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<tr>
<td>Samarkand Skilled Nursing Facility</td>
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<td>0</td>
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<td>0</td>
<td>0</td>
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</tr>
<tr>
<td>Santa Maria Post Acute</td>
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<td>&lt;11</td>
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<td>The Californian</td>
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<td>NA</td>
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<td>Valle Verde Health Facility</td>
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<td>0</td>
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<td>Under investigation</td>
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<td>Villa Maria Post Acute</td>
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<td>0</td>
<td>0</td>
<td>Under investigation</td>
</tr>
</tbody>
</table>

Source: Confirmed Covid cases reported by Skilled Nursing facilities to the Public Health Department as of 7/6/20; HCW = health care worker

[https://publichealthsbc.org/santa-barbara-county-reopening-metrics/](https://publichealthsbc.org/santa-barbara-county-reopening-metrics/)
Testing Results Metric
Less than 8% testing positive in the past 7 days

Total Tests: 59,388
Total Positive: 2,824
Community Tests Today: 1,114
Positive Tests Today: 78
% Positive Today: 7%

https://publichealthsbc.org/santa-barbara-county-reopening-metrics/
California COVID-19 By The Numbers

July 8, 2020

Numbers as of July 7, 2020

CALIFORNIA COVID-19 SPREAD

289,468 (+11,694)

TOTAL CASES

Ages of Confirmed Cases
• 0-17: 23,960
• 18-49: 170,255
• 50-64: 58,017
• 65+: 36,911
• Unknown/Missing: 325

Gender of Confirmed Cases
• Female: 142,868
• Male: 145,044
• Unknown/Missing: 1,556

6,562 (+114)

Fatalities

Hospitalizations

Confirmed COVID-19
6,100/1,753
Hospitalized/in ICU

Suspected COVID-19
1,605/223
Hospitalized/in ICU

For county-level hospital data:
bit.ly/hospitalsca

https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Immunization/nCOV2019.aspx
COVID-19 Situation Update - Global

Total Confirmed
12,077,210

Global Deaths
550,327

US State Level Deaths, Recovered

https://gisanddata.maps.arcgis.com/apps/opsdashboard/index.html#/bda7594740fd40299423467b48e9ecf6
PHD Department Operations Center (DOC)

Open Monday-Friday -8:00 am- 5:00pm

- After hours email and phone
- Provides additional staff to carry out PHD objectives
- Respond to cases and provider/public information requests
- Coordinates contact tracing and additional testing
- Orders and prioritizes resources for distribution
- Supporting symptomatic homeless individuals with alternate sheltering
- Supporting individuals in hotels that are unable to isolate at home or have been discharged from the hospital
# Communication with PHD DOC

<table>
<thead>
<tr>
<th>WHO?</th>
<th>WHEN?</th>
<th>HOW?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Santa Barbara County Disease Control</td>
<td>Used to contact and <strong>report positive cases</strong>, and suspect cases in SNF/LTC and HCW</td>
<td>805-681-5280 – 24/7 number <a href="mailto:dc@sbcphd.org">dc@sbcphd.org</a> – hospitals report discharges via email, submit line lists</td>
</tr>
<tr>
<td>EMS Duty Officer</td>
<td>After hours requests for PPE and assistance</td>
<td>805-694-8301</td>
</tr>
</tbody>
</table>
| PHD Department Operations Center (DOC)    | Operations Section: M-F 8 am- 5pm                                    | [Operations.medicalbranch@sbcphd.org](mailto:Operations.medicalbranch@sbcphd.org)  
Jan Koegler- 805-681-4913  
Stacey Rosenberger- 805-681-4912 |
ACCORDINGLY, UNDER THE AUTHORITY OF CALIFORNIA HEALTH AND SAFETY CODE SECTIONS 101040, 101085, AND 120175, TITLE 17 CALIFORNIA CODE OF REGULATIONS SECTION 2501, THE HEALTH OFFICER OF THE COUNTY OF SANTA BARBARA ORDERS:

1. This Order is effective 5:00 p.m. (PDT) June 10, 2020 and continuing until 5:00 p.m. (PDT), on July 30, 2020 or until it is extended, rescinded, superseded, or amended in writing by the County of Santa Barbara Health Officer (“Health Officer”). This Order applies in the incorporated and unincorporated areas of Santa Barbara County (“County”).

2. Effective as of the date of this Order, the staff of each hospital, and types of licensed residential facilities listed in Section 7 below (each defined as a “Residential Facility”) shall exclude from entry or access to its Premises any Visitors and Non-Essential Personnel including, but not limited to, visitors of residents at the Hospital or Residential Facility. Such Visitors and Non-Essential Personnel, including but not limited to family members of residents and authorized decision-makers, are hereby ordered not to visit any Hospital or Residential Facility except as permitted by this Order. This visitation restriction has limited exceptions described below.

3. Each Hospital or Residential Facility must discourage Non-Essential Resident Movement, as defined in Section 6 below, onto and off of Hospital or Residential Facility Premises where feasible.

4. This Order restricts physical contact between Hospital or Residential Facility residents and Visitors and Non-Essential Personnel. When Visitors and Non-Essential Personnel visit and have physical contact with a Hospital or Residential Facility resident, they will be required to wear a mask and wash their hands to help prevent the spread of COVID-19.
COVID-19 Discharge Criteria for Santa Barbara County

This guidance is provided by the Santa Barbara County Public Health Department in order to maintain standards for coordinated discharge of COVID-19 positive and non-COVID patients from hospitals and emergency departments to skilled nursing, congregate care settings, and homes. This guidance will change according to current guidance from CDPH and the CDC. https://www.cdph.ca.gov/Programs/CHCQLG/Pages/AFL-20-53.aspx

Facilities may choose to implement policies that provide stricter guidelines for standard and transmission-based precautions (e.g., contact, droplet) and isolation periods. The Public Health Department is available for consultation regarding each facility’s individual situation and residents via phone 805-681-5280 or email dcp@sbphd.org

The following discharge guidance is covered in this document:

- Patients with Laboratory Confirmed COVID-19 Discharged to SNF/LTC and Congregate Living
- Patients without COVID-19 Discharged to SNF/LTC and Congregate Living
- Patients Transferred from SNF/LTC to another SNF/LTC
- Patients with Laboratory Confirmed COVID-19 Discharged to Non-Congregate Isolation Settings
- Patients Awaiting Laboratory Results Discharged to PHD Non-Congregate Isolation Settings
- Patients with Laboratory Confirmed COVID-19 Discharged to Home Settings

Additional guidance:
- COVID-19 Hospital Reporting for Confirmed Cases, Discharges and Deaths- Santa Barbara County

Contact Information:

| Santa Barbara County PHD Disease Control | 805-681-5280 24/7 | Call and report confirmed cases in HCWs and residents in SNFs/LTC or congregate settings |
| COVID-19 Discharge to PHD COVID-19 Non-Congregate Hotel setting | 805-681-5165 24/7 | In-patients: 8am-5pm M-F. PHD will not accept weekend discharges of confirmed COVID-19 inpatients. ED patients: Confirmed or suspect cases within the ED that are unable to isolate, or quarantine at home awaiting test results |

[Logo: Santa Barbara County Public Health Department]
Patients with Negative COVID-19 Discharged to SNF/LTC and Congregate Living Settings

All hospitalized patients not admitted for COVID-19 will be tested and have results for COVID-19 within 4 days prior to admission or re-admission to a skilled nursing facility, long term care facility, or non-medical congregate living setting.

| Patient is negative continue with discharge | Non-SNF receiving facility, at their discretion, may implement transmission-based precautions. |
| | SNFs are required by CDPH to have all new admissions quarantine for 14 days and test negative at end of quarantine time. [https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-53.aspx](https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-53.aspx) |
| | These patients should NOT be placed in a location designed for COVID-19 patients and may NOT be placed in a shared room with other COVID-19 patients. |
| | If SNF/LTC facility is experiencing an outbreak, hospitals must contact PHD 805-681-5280 for approval for discharge to the facility. |
| | o If patient’s departure from the SNF/LTC facility was less than 14 days prior patient may be allowed to return to SNF/LTC with prior approval from PHD. |
| | o While facilities experiencing outbreaks are closed to new admissions, they may be able to take to returning patients within the 14-day exposure period if they can isolate the readmission for 14 days, implement cohorting, meet infection control guidelines, and provide adequate staffing. |
| | o If the patient’s departure from the SNF/LTC was greater than 14 days prior and the patient has remained symptom free, the patient should be transferred to a different facility, if their original facility is still closed to admissions. |

*Skilled nursing facility outbreaks are at least one case of laboratory-confirmed COVID-19 in a resident. [https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/OutbreakDefinitionsandReportingGuidance.aspx](https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/OutbreakDefinitionsandReportingGuidance.aspx)
What is an exposure? - Healthcare professional

<table>
<thead>
<tr>
<th>Exposure</th>
<th>Personal Protective Equipment Used</th>
<th>Work Restrictions</th>
</tr>
</thead>
</table>
| HCP who had prolonged⁵ close contact⁵ with a patient, visitor, or HCP with confirmed COVID-19⁵ | • HCP not wearing a respirator or facemask⁴  
• HCP not wearing eye protection if the person with COVID-19 was not wearing a cloth face covering or facemask  
• HCP not wearing all recommended PPE (i.e., gown, gloves, eye protection, respirator) while performing an aerosol-generating procedure¹ | • Exclude from work for 14 days after last exposure⁵  
• Advise HCP to monitor themselves for fever or symptoms consistent with COVID-19⁶  
• Any HCP who develop fever or symptoms consistent with COVID-19⁶ should immediately contact their established point of contact (e.g., occupational health program) to arrange for medical evaluation and testing. |

What is an exposure in the community?

<table>
<thead>
<tr>
<th>Person</th>
<th>Exposure to</th>
<th>Recommended Precautions for the Public</th>
</tr>
</thead>
</table>
| • Individual who has had close contact (< 6 feet)** for ≥15 minutes*** | • Person with COVID-19 who has symptoms (in the period from 2 days before symptom onset until they meet criteria for discontinuing home isolation; can be laboratory-confirmed or a clinically compatible illness)  
| | • Person who has tested positive for COVID-19 (laboratory confirmed) but has not had any symptoms (in the 2 days before the date of specimen collection until they meet criteria for discontinuing home isolation).  
| | Note: This is irrespective of whether the person with COVID-19 or the contact was wearing a cloth face covering or whether the contact was wearing respiratory personal protective equipment (PPE) | • Stay home until 14 days after last exposure and maintain social distance (at least 6 feet) from others at all times |
| | | • Self-monitor for symptoms  
| | | ◦ Check temperature twice a day  
| | | ◦ Watch for fever*, cough, or shortness of breath, or other symptoms of COVID-19 |
| | | • Avoid contact with people at higher risk for severe illness from COVID-19 |
| | | • Follow CDC guidance if symptoms develop |

Community Transmission

**Substantial**
- Large scale community transmission, including communal settings (e.g. schools, workplaces)

**Minimal to Moderate**
- Sustained transmission with high likelihood or confirmed exposure within communal settings and potential for rapid increase in cases

**No to Minimal**
- Evidence of isolated cases or limited community transmission, case investigations underway, no evidence of exposure in large communal settings

CDC Infection Control Guidance

Implement Universal Use of Personal Protective Equipment

- HCP working in facilities located in areas with moderate to substantial community transmission are more likely to encounter asymptomatic or pre-symptomatic patients with SARS-CoV-2 infection. If COVID-19 is not suspected in a patient presenting for care (based on symptom and exposure history), HCP should follow Standard Precautions (and Transmission-Based Precautions if required based on the suspected diagnosis). They should also:
  - Wear eye protection in addition to their facemask to ensure the eyes, nose, and mouth are all protected from splashes and sprays of infectious material from others.
  - Wear an N95 or equivalent or higher-level respirator, instead of a facemask, for:
    - Aerosol generating procedures (refer to Which procedures are considered aerosol generating procedures in healthcare settings FAQ) and
    - Surgical procedures that might pose higher risk for transmission if the patient has COVID-19 (e.g., that generate potentially infectious aerosols or involving anatomic regions where viral loads might be higher, such as the nose and throat, oropharynx, respiratory tract) (refer to Surgical FAQ).
  - Respirators with exhalation valves are not recommended for source control and should not be used during surgical procedures as unfiltered exhaled breath would compromise the sterile field.

- For HCP working in areas with minimal to no community transmission, the universal eye protection and respirator recommendations described for areas with moderate to substantial community transmission are optional. However, HCP should continue to adhere to Standard and Transmission-Based Precautions, including use of eye protection and/or an N95 or equivalent or higher-level respirator based on anticipated exposures and suspected or confirmed diagnoses. Universal use of a facemask for source control is recommended for HCP.

Discontinuation of Transmission-Based Precautions for patients with COVID-19:

The decision to discontinue Transmission-Based Precautions for patients with confirmed COVID-19 should be made using either a test-based strategy or a symptom-based (i.e., time-since-illness-onset and time-since-recovery strategy) or time-based strategy as described below. Meeting criteria for discontinuation of Transmission-Based Precautions is not a prerequisite for discharge.

Symptomatic patients with COVID-19 should remain in Transmission-Based Precautions until either:

- **Symptom-based strategy**
  - At least 3 days (72 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications and improvement in respiratory symptoms (e.g., cough, shortness of breath); and,
  - At least 10 days have passed since symptoms first appeared

- **Test-based strategy**
  - Resolution of fever without the use of fever-reducing medications and
  - Improvement in respiratory symptoms (e.g., cough, shortness of breath), and
  - Negative results of an FDA Emergency Use Authorized COVID-19 molecular assay for detection of SARS-CoV-2 RNA from at least two consecutive respiratory specimens collected ≥24 hours apart (total of two negative specimens) [1]. See Interim Guidelines for Collecting, Handling, and Testing Clinical Specimens for 2019 Novel Coronavirus (2019-nCoV). Of note, there have been reports of prolonged detection of RNA without direct correlation to viral culture.

Patients with laboratory-confirmed COVID-19 who have not had any symptoms should remain in Transmission-Based Precautions until either:

- **Time-based strategy**
  - 10 days have passed since the date of their first positive COVID-19 diagnostic test, assuming they have not subsequently developed symptoms since their positive test. Note, because symptoms cannot be used to gauge where these individuals are in the course of their illness, it is possible that the duration of viral shedding could be longer or shorter than 10 days after their first positive test.

- **Test-based strategy**
  - Negative results of an FDA Emergency Use Authorized COVID-19 molecular assay for detection of SARS-CoV-2 RNA from at least two consecutive respiratory specimens collected ≥24 hours apart (total of two negative specimens). Note, because of the absence of symptoms, it is not possible to gauge where these individuals are in the course of their illness. There have been reports of prolonged detection of RNA without direct correlation to viral culture.

Note that detecting viral RNA via PCR does not necessarily mean that infectious virus is present.

Consider consulting with local infectious disease experts when making decisions about discontinuing Transmission-Based Precautions for patients who might remain infectious longer than 10 days (e.g., severely immunocompromised).
Provider Alert: COVID-19 Request for Assistance
Patient Information for Isolation and Quarantine
July 6, 2020

The Health Officer is requesting assistance from all healthcare providers to help communicate and assure compliance with isolation and quarantine for COVID-19. This effort is needed to respond to increasing numbers of positive cases, and significant challenges with CalREDIE’s electronic lab reporting system. Resources to assist you are located on the PHD website and linked in this document.

The Public Health Department is asking providers to communicate specific instructions on isolation and quarantine to:

1. Persons who are diagnosed based on a positive test
2. Persons who are likely to have COVID-19 based on symptoms
3. Persons who have had close contact with a positive case

Action Steps for Providers:
If COVID-19 is presumed or confirmed, the provider is asked to:

- **Instruct the patient to immediately self-isolate** and provide the patient with SBCPHD Isolation and Quarantine Instructions in English and Spanish or at [https://publichealthsb.org/testing/](https://publichealthsb.org/testing/)
- **Review home isolation instructions** with patient emphasizing the content of the following sections:
  - When to seek medical care, and what to do if symptoms worsen, when to call 9-1-1.
  - Protect others-stay isolated, expect to get medical care, until the home isolation period ends.
- **Ask patient to identify and inform their close contacts to quarantine for 14 days**
  - Close contacts are persons who were within 6 feet, for 15 minutes or more, of the case for the following time periods:
    - 48 hours before symptoms began until 10 days after symptoms began, or until symptoms resolve, whichever is longer.
    - If asymptomatic from 48 hours before and until 10 days after the date of positive test

The patient should provide each of their close contacts with quarantine instructions in English or Spanish at [https://publichealthsb.org/testing/](https://publichealthsb.org/testing/)

- Inform patients that Santa Barbara County Public Health will attempt to call them to interview them for contact tracing. Please encourage them to answer Public Health’s calls.
- **Plan to closely monitor patients at increased risk** for severe disease, such as older adults and persons with underlying medical conditions (see CDC High-Risk Conditions). If these patients are living alone or are the only responsible adult in the home, discuss with them virtual daily check-in option. Consider contacting them frequently as there is potential for rapid clinical deterioration.

- **Submit positive result in Cal REDIE** within 24 hours and include patients current phone number and address. This will facilitate disease investigation.
- **Report** by phone confirmed or suspect cases in congregate living residents or workers, and healthcare workers 24/7 to 805-681-5280
- **Consult Healthcare Worker Exposure Isolation Algorithm** or **Persons Exposed in Community or Household Algorithm** as needed.

**Ending Isolation and Return to Work/School—SBCPHD recommends the CDC’s symptom-based and time-based criteria to end home isolation.** No test of cure is needed once the patient has met the criteria as outlined below.

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When Does My Home Isolation End?
You must stay home and separate yourself from others until your home isolation or quarantine ends.

If you had symptoms, you must stay home until:
- You have had no fever for at least 72 hours (without the use of medicine that reduces fevers) **AND**
- Your respiratory symptoms have improved (for example, cough or shortness of breath) **AND**
- At least 10 days have passed since your symptoms first appeared. If your symptoms persist you should remain in isolation for 14 days.

If you tested positive for COVID-19 but never had any symptoms:
- You must stay home for 10 days after the test was taken. **but**
- If you develop symptoms, you need to follow the instructions above.

Home Isolation and Quarantine Instructions for People with COVID-19 Infection

The following instructions are for people who have positive tests for COVID-19. It also includes quarantine information for their close contacts, families, or caregivers.

If you are a health care worker or first responder, please refer to guidance from your employer. If you test positive at a community testing site, urgent care or hospital, inform your medical provider of your positive result.

All persons who test positive for COVID-19 must isolate themselves and inform their close contacts.

More information on how to isolate and inform your contacts is on the next page.

Home Care

There is no specific treatment for the virus that causes COVID-19. Here are steps that you can take to help you get better:

- Rest
- Drink plenty of fluids
- Take acetaminophen (Tylenol®) to reduce fever and pain.
- Note that children younger than age 2 should not be given any over-the-counter cold medications without first speaking with a doctor.
- Note that these medicines do not "cure" the illness and do not stop you from spreading germs.

Seeking Medical Care

Make a note of when your symptoms started and continue to monitor your health. Stay in touch with your doctor and seek prompt medical care if your symptoms get worse. People who are age 65 years and older or who have a health problem such as a chronic disease or a weak immune system may be at a higher risk of serious illness.

Call 911 if there are emergency warning signs

- Difficulty Breathing
- Pressure or pain in chest
- Bluish lips or face
- Confused or hard to wake
- Other serious symptoms

People with emergency warning signs, *including a Pulse Ox reading of less than 94%, should call 911.

Separate yourself from other people in your home

- Stay in a specific room and away from other people in your home as much as possible. It is particularly important to stay away from people who are at higher risk of serious illness.
- Use a separate bathroom. If this is not possible, clean the bathroom after use (see below).
- Stay at least 6 feet from others or wear a face covering when you are not able to maintain physical distancing.
- Open windows or use a fan or an air conditioner in shared spaces in the home, if possible, to ensure good airflow.
- Do not allow visitors and limit the number of people in your home.
- Do not handle pets or other animals.
- Do not prepare or serve food to others. Do not eat with other household members.
- Stay home except to get medical care. Do not go to work, school, or public areas.
- If you must leave home, do not use public transportation. Use a personal vehicle if possible. If you cannot drive yourself, keep as much distance as possible between you and the driver, leave the windows down, and wear a mask or cloth face covering.
- If you do not have someone to help you, if possible, arrange for food and other necessities to be left at your door. If you need help finding free delivery services, social services, or essential items like food and medicines call (833) 899-5561 x 211.
Positive Cases in the Workplace: How employers can help limit the spread of COVID

Employers can prepare and respond to a confirmed or suspected case of COVID-19 by taking the following actions:

1. Refer to the link below for guidance from the California Department of Public Health

   https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Workplace-Outbreak-Employer-Guidance.aspx

2. Determine cleaning or disinfection that may be needed. Refer to the link below for guidance to help you determine appropriate actions:


3. Determine which employees may have been exposed to the virus and meet “close contact” criteria.
   - Review CDC definition of a “close contact” or “6-15:48”
     - Persons who are within 6 feet of an infected person, for at least 15 minutes, starting from 48 hours before symptoms of the illness.
     - For persons who test positive, but have no symptoms, this period is 2 days prior to testing date plus 10 days. https://www.cdc.gov/coronavirus/2019-ncov/php/contact-tracing/contact-tracing-plan/contact-tracing.html#text=For%20COVID%2019%2C%20the%20patient%20is%20isolated.
   - Workers who were wearing personal protective equipment (PPE) during their interaction with a positive case may not be considered contacts. Guidance can be found here: https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assessment-hcp.html

4. Create a list of all employees that have positive tests or are close contacts
   - List name, date of birth, phone number, dates that the employee worked with the positive staff, dates of symptoms, county of residence, shift hours, and job assignment.
   - The list identifies employees who should quarantine for 14 days and will assist the Public Health Department in a contact investigation.

5. Inform the health department by phone if there are 3 or more positive cases or employees with symptoms in your workplace. (805)681-5280. Assure that positive employees isolate at home and do not report to work. This flyer provides more information:


Positives in Workplace
Community-Based Testing Sites

• Locations:
  • **Santa Maria**: Fairpark
  • **Santa Barbara**: Earl Warren
  • **Buellton**: AMR Conference Room- 240 CA-246 Buellton, CA

• Can test approx. 144 at each site each day
• PCR test not serology
• Open 5 days a week. Days and times for appointments will be adjusted based on community needs
• To make appointments:
  • To register online: [https://lhi.care/covidtesting](https://lhi.care/covidtesting)
  • To register by phone: 888-634-1123
  • **For help with registration**: 833-688-5551
COVID-19 Testing Training

• Santa Barbara: July 2, 2020 1-3pm
  • 10 spots to start with
  • RN, EMT accepted
  • Registration link will be sent out on Friday

• Santa Maria & Lompoc training TBD
Assistance with Testing

- PHD has a contract with AMR to assist in transport of positive or suspect patients and testing in the county.
- Many SNFs have utilized AMR to assist in testing at their facility during outbreak testing.
- Starting June 25, 2020 – facilities that utilize AMR will invoiced by PHD for AMRs time assisting with testing.
- Used during an outbreak at facility or for surveillance testing
- Fill this out in advance so you are ready when you have an outbreak
- Different tab for staff and residents
- Completed on computer and submit to: dc@sbcphd.org
Outbreak Line List List Reminders

- Complete ahead of time (list staff and residents with DOB)
- Complete electronically and email to dc@sbcphd.org daily when you are doing response based testing
- Make sure names and birthdays are correct
- Don’t delete positives
  - Line list provides a complete picture for our disease control and epi staff
  - Make sure you include first positive test
- Highlight additions and updates
Resources and Supply Chain

Current supply chain issues/shortages
• Procedure masks
• Isolation gowns
• Hand sanitizer
• Gloves
• Eye protection
• Healthcare disinfecting wipes

PHD PPE Distribution:
• Requests reviewed on Monday
• Pick or delivery will occur on Tuesday
• Urgent requests can be picked up on other days
• Urgent needs please call 805-681-5253 or email operations.medicalbranch@sbcphd.org
To request resources:

http://www.countyofsb.org/phd/epp/forms.sbc
BYD N95s

N95 Healthcare Particulate Respirator (Surgical Mask)

Foldable (for single use only)  Non-sterile

BYD CARE ❤

+ Very close facial fit
+ ≥ 95% filtrations efficiency against solid and liquid aerosols free of oil.

Description

The N95 Healthcare Particulate Respirator (Surgical Mask) is designed to help provide respiratory protection for the user. This product has a filter efficiency of 95% or greater against solid and liquid aerosols free of oil. This product contains no components made from natural rubber latex.
Resource Request Process

http://www.countyofsb.org/phd/epp/forms.sbc

Situation Report Forms for Healthcare Partners

Situation Report Forms
All Updated 3/24/20 for the use during COVID-19 response.

We ask that all facilities/agencies complete a situation report weekly or whenever you need to submit a resource request.

Outpatient Provider Situation Report Forms:
- Clinic (HCOS, FMHC, CHC), Urgent Care, Private Practice Situation Report
- Ambulatory Surgery Center Situation Report
- Home Health & Hospice Agency Situation Report
- STD Provider Situation Report

Inpatient Provider Situation Report Forms:
- Hospital Situation Report
- Skilled Nursing Facility/CORO Assisted Living/CIF Situation Report

Non-Medical Situation Report Form:
- Non-Medical Situation Report

Resource Request Process
Requests for PPE and other scarce medical resources are going through our Scarce Medical Resource Committee. All organizations wanting to make a resource request will need to complete a situation report. Once the situation report is completed you will be automatically linked to the resource request form. We will not backorder requests or do partial fills for requests. Organizations will need to submit a new request if they do not receive all the supplies that they need.

- Complete situation report weekly and whenever you do a resource request
- Access resource request form is in sit rep
- Different situation reports based on your facility or agency type
- If you have questions about which one to fill out let us know!
Requesting N-95 Fit Testing Kits

- PHD has 8 fit testing kits to loan
- Facility/agency can request up to 2 kits
- To request: [https://app.smartsheet.com/b/form/386bce37fa7b4e21a5c11af7948fdb50](https://app.smartsheet.com/b/form/386bce37fa7b4e21a5c11af7948fdb50)
CMS Conference Calls - July

Home Health and Hospice Call (twice a month on Tuesday at 3:00 PM Eastern)

Tuesday, July 7th at 3:00 – 3:30 PM Eastern
Toll Free Attendee Dial-In: 833-614-0820; Access Passcode: 9480618
Audio Webcast Link: https://protect2.fronetlink.com/url?k=9e9be372-c2ceaa2-9e9bd24d-0cc17a6a52de-fb8f791d3db00d2&u=https://engage.vevent.com/vt/cms2/index.jsp?seid=2302

Tuesday, July 21st at 3:00 – 3:30 PM Eastern
Toll Free Attendee Dial-In: 833-614-0820; Access Passcode: 6080197

Nursing Homes Call (twice a month on Wednesday at 4:30 PM Eastern)

Wednesday, July 8th at 4:30 – 5:00 PM Eastern
Toll Free Attendee Dial-In: 833-614-0820; Access Passcode: 2997136

Wednesday, July 22nd at 4:30 – 5:00 PM Eastern
Toll Free Attendee Dial-In: 833-614-0820; Access Passcode: 1145564

CMS Conference Calls Cont.

Dialysis Organizations Call (twice a month on Wednesday at 5:30 PM Eastern)

Wednesday, July 8th at 5:30 – 6:00 PM Eastern

Toll Free Attendee Dial-In: 833-614-0820; Access Passcode: 8481378


Wednesday, July 22nd at 5:30 – 6:00 PM Eastern

Toll Free Attendee Dial-In: 833-614-0820; Access Passcode: 7692208


Lessons from the Front Lines: COVID-19 (twice a month on Fridays at 12:30 – 2:00 PM Eastern)

Friday, July 17th at 12:30 – 2:00 PM Eastern

Toll Free Attendee Dial-In: 833-614-0820; Access Code: 3096434

Web Link: https://protect2.flyeye.com/url?k=e90f977f-b55a9eaf-e90fa640-0cc47a6a52de-94729173f25755c&u=https://engage.vevent.com/rt/cms2/index.jsp?soid=2322

Conference lines are limited, so we highly encourage you to join via audio webcast, either on your computer or smartphone web browser. You are welcome to share this invitation with your colleagues and membership.

To listen to the audio files and read the transcripts for the COVID-19 Stakeholder calls, visit the Podcast and Transcripts page.
Questions?

Thank you for everything