VARIANCE TO STAGE 2 OF CALIFORNIA'S ROADMAP TO MODIFY THE STAY-AT-HOME ORDER



COVID-19 VARIANCE ATTESTATION FORM

FOR Monterey County

May 18, 2020

Background

On March 4, 2020, Governor Newsom proclaimed a State of Emergency because of the threat of COVID-19, and on March 12, 2020, through Executive Order N-25-20, he directed all residents to heed any orders and guidance of state and local public health officials. Subsequently, on March 19, 2020, Governor Newsom issued Executive Order N-33-20 directing all residents to heed the State Public Health Officer's Stay-at-Home order which requires all residents to stay at home except for work in critical infrastructure sectors or otherwise to facilitate authorized necessary activities. On April 14th, the State presented the Pandemic Roadmap, a four-stage plan for modifying the Stay-at-Home order, and, on May 4th, announced that entry into Stage 2 of the plan would be imminent.

Given the size and diversity of California, it is not surprising that the impact and level of county readiness for COVID-19 has differed across the state. On May 7th, as directed by the Governor in Executive Order N-60-20, the State Public Health Officer issued a local variance opportunity through a process of county self-attestation to meet a set of criteria related to county disease prevalence and preparedness. This variance allowed for counties to adopt aspects of Stage 2 at a rate and in an order determined by the County Local Health Officer. Note that counties desiring to be stricter or move at a pace less rapid than the state did not need a variance.

In order to protect the public health of the state, and in light of the state's level of preparedness at the time, more rapid movement through Stage 2 as compared to the state needed to be limited to those counties which were at the very lowest levels of risk. Thus, the first variance had very tight criteria related to disease prevalence and deaths as a result of COVID-19.

Now, 11 days after the first variance opportunity announcement, the state has further built up capacity in testing, contact tracing and the availability of PPE. Hospital surge capacity remains strong overall. California has maintained a position of stability with respect to hospitalizations. These data show that the state is now at a higher level of preparedness, and many counties across the state, including those that did not meet the first variance criteria are expected to be, too. For these reasons, the state is issuing a second variance opportunity for certain counties that did not meet the criteria of the first variance attestation. This next round of variance is for counties that can attest to meeting specific criteria indicating local stability of COVID-19 spread and specific levels of county preparedness. The criteria and procedures that counties will need to meet in order to attest to this second variance opportunity are outlined below. It is recommended that counties consult with

cities, tribes and stakeholders, as well as other counties in their region, as they consider moving through Stage 2

Local Variance

A county that has met the criteria in containing COVID-19, as defined in this guidance or in the guidance for the first variance, may consider modifying how the county advances through Stage 2, either to move more quickly or in a different order, of California's roadmap to modify the Stay-at-Home order. Counties that attest to meeting criteria can only open a sector for which the state has posted sector guidance (see <u>Statewide industry guidance to reduce risk</u>). Counties are encouraged to first review this document in full to consider if a variance from the state's roadmap is appropriate for the county's specific circumstances. If a county decides to pursue a variance, the local health officer must:

- 1. Notify the California Department of Public Health (CDPH), and if requested, engage in a phone consultation regarding the county's intent to seek a variance.
- 2. Certify through submission of a written attestation to CDPH that the county has met the readiness criteria (outlined below) designed to mitigate the spread of COVID-19. Attestations should be submitted by the local health officer, and accompanied by a letter of support from the County Board of Supervisors, as well as a letter of support from the health care coalition or health care systems in said county. In the event that the county does not have a health care coalition or health care system within its jurisdiction, a letter of support from the relevant regional health system(s) is also acceptable. The full submission must be signed by the local health officer.

All county attestations, and submitted plans as outlined below, will be posted publicly on CDPH's website.

CDPH is available to provide consultation to counties as they develop their attestations and COVID-19 containment plans. Please email Jake Hanson at Jake.Hanson@cdph.ca.gov to notify him of your intent to seek a variance and if needed, request a consultation.

County Name: Monterey County

County Contact: Edward L. Moreno, MD, MPH, Health Officer & Director of Public Health

Public Phone Number: 831-755-4585

Readiness for Variance

The county's documentation of its readiness to modify how the county advances through Stage 2, either to move more quickly or in a different order, than the California's roadmap to modify the Stay-at-Home order, must clearly indicate its preparedness according to the criteria below. This will ensure that individuals who are at heightened risk, including, for example, the elderly and those with specific co-morbidities, and those residing in long-term

¹ If a county previously sought a variance and submitted a letter of support from the health care coalition or health care systems but did not qualify for the variance at that time, it may use the previous version of that letter. In contrast, the County Board of Supervisors must provide a renewed letter of support for an attestation of the second variance.

care and locally controlled custody facilities and other congregate settings, continue to be protected as a county progresses through California's roadmap to modify the Stay-at-Home order, and that risk is minimized for the population at large.

As part of the attestation, counties must provide specifics regarding their movement through Stage 2 (e.g., which sectors, in what sequence, at what pace), as well as clearly indicate how their plans differ from the state's order.

As a best practice, if not already created, counties will also attest to plan to develop a county COVID-19 containment strategy by the local health officer in conjunction with the hospitals and health systems in the jurisdiction, as well as input from a broad range of county stakeholders, including the County Board of Supervisors.

It is critical that any county that submits an attestation continue to collect and monitor data to demonstrate that the variances are not having a negative impact on individuals or healthcare systems. Counties must also attest that they have identified triggers and have a clear plan and approach if conditions worsen to reinstitute restrictions in advance of any state action.

Readiness Criteria

To establish readiness for a modification in the pace or order through Stage 2 of California's roadmap to modify the Stay-at-Home order, a county must attest to the following readiness criteria and provide the requested information as outlined below:

- **Epidemiologic stability of COVID-19.** A determination must be made by the county that the prevalence of COVID-19 cases is low enough to be swiftly contained by reintroducing features of the stay at home order and using capacity within the health care delivery system to provide care to the sick. Given the anticipated increase in cases as a result of modifying the current Stay-At-Home order, this is a foundational parameter that must be met to safely increase the county's progression through Stage 2. The county must attest to:
 - Demonstrated stable/decreasing number of patients hospitalized for COVID-19 by a 7-day average of daily percent change in the total number of hospitalized confirmed COVID-19 patients of <+5% -OR- no more than 20 total confirmed COVID-19 patients hospitalized on any single day over the past 14 days.

Monterey County has maintained a stable or decreasing number of patients hospitalized for COVID-19 for greater than 2 weeks. The Monterey County Health Department monitors reports on hospital bed status, including COVID-19 cases, daily. As shown in the table below, the 7-day average of daily percent change in the total number of hospitalized confirmed COVID-19 patients was -0.2%. The maximum number of total confirmed COVID-19 patients hospitalized on any single day over the past 14 days was 11 patients.

Date	COVID-19 Hospitalizations (Census, Confirmed)	Relative Percent Change
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14-Day Maximum Daily Total of Hospitalized Cases	11	
7-Day Average Daily Percent Change in Hospitalized Cases	=	-0.2%
5/24/2020	7	0%
5/23/2020	7	-22%
5/22/2020	9	13%
5/21/2020	8	-20%
5/20/2020	10	-9%
5/19/2020	11	38%
5/18/2020	8	0%
5/17/2020	8	
5/16/2020	8	
5/15/2020	6	
5/14/2020	6	
5/13/2020	7	
5/12/2020	6	
5/11/2020	9	

 14-day cumulative COVID-19 positive incidence of <25 per 100,000 -OR- testing positivity over the past 7 days of <8%.

NOTE: State and Federal prison inmate COVID+ cases can be excluded from calculations of case rate in determining qualification for variance. Staff in State and Federal prison facilities are counted in case numbers. Inmates, detainees, and staff in county facilities, such as county jails, must continue to be included in the calculations.

Facility staff of jails and prisons, regardless of whether they are run by local, state or federal government, generally reside in the counties in which they work. So, the incidence of COVID-19 positivity is relevant to the variance determination. In contrast, upon release, inmates of State and Federal prisons generally do not return to the counties in which they are incarcerated, so the incidence of their COVID-19 positivity is not relevant to the variance determination. While inmates in state and federal prisons may be removed from calculation for this specific criteria, working to protect inmates in these facilities from COVID-19 is of the highest priority for the State.

 Counties using this exception are required to submit case rate details for inmates and the remainder of the community separately. As shown in the table below, Monterey County's 14-day cumulative COVID-19 incidence of 28.6 cases per 100,000 population is slightly higher than the criteria of <25 cases per 100,000 population. **Monterey County's testing positivity rate over the past 7 days is 2.3%**, which is below CDPH's target of <8%. When calculating these data, Monterey County included staff and inmates associated with the two state prisons located in Monterey County and the county jail; therefore, no exception for inmates is being requested.

Date	COVID-19 Case Count (Number of Positive Labs Reported)	Number of Tests Conducted	
5/11/2020	11	216	
5/12/2020	11	83	
5/13/2020	9	327	
5/14/2020	5	233	
5/15/2020	5	240	
5/16/2020	9	196	
5/17/2020	3	4*	
5/18/2020	7	265	
5/19/2020	8	280	
5/20/2020	7	213	
5/21/2020	10	612	
5/22/2020	22	718	
5/23/2020	10	414	
5/24/2020	8	562	
7-Day Total	72	3,064	
14-Day Total	125	4,363	
14-Day Cumulative COVID-19 Incidence per 100,000	28.6		
7-Day Test Positivity Rate (%)		2.3%	

^{*}ELR transmission issue affecting number of test results received.

 Protection of Stage 1 essential workers. A determination must be made by the county that there is clear guidance and the necessary resources to ensure the safety of Stage 1 essential critical infrastructure workers. The county must attest to: Guidance for employers and essential critical infrastructure workplaces on how to structure the physical environment to protect essential workers. Please provide, as a separate attachment, copies of the guidance(s).

Provide title of guidance document attached

The County of Monterey has determined that clear guidance and the necessary resources are available to ensure the safety of Stage 1 essential critical infrastructure workers.

Local Health Officer Orders clearly outline measures employers must take to prevent the spread of COVID-19 in the workplace. The May 1 Health Officer Shelter in Place Order includes requirements for social distancing as well as a requirement that essential businesses complete, post and implement Social Distancing Protocols designed to establish environmental measures to prevent transmission of the virus among employees and customers. The Local Health Officer Face Covering order requires employees, customers and clients to cover their faces when in the company of others that are not of the same household.

In addition to Local Health Officer Orders, local guidance documents have been developed by the County Environmental Health Bureau, the Public Health Bureau, the Agricultural Commissioner's Office in coordination with major local agricultural industry stakeholders, the Office of Emergency Services as well as other agencies and organizations. These guidance documents were quickly distributed in the field, online, through the media and via US Postal Service. The following local guidance documents are attached to this attestation as Appendix I:

- Social Distancing Protocol
- Reopening Guidelines for Restaurants COVID-19
- Reopening Guidelines for Essential Businesses COVID-19
- SIP EHB COVID-19
- Food Delivery and Take Out Guidance
- EHB Field Update
- Guidance for Farmer's Markets
- COVID-19 Infection Prevention and Control Guidance for Employers that Offer Employee Housing
- Social Distancing Protocol for Employee Housing
- COVID-19 Shelter in Place Expectations for Food Facilities

In addition to Local Health Officer Orders and local protocols and guidance, the County has directed Stage 1 businesses and employees to sector specific guidance at https://covid19.ca.gov/industry-guidance/.

 Availability of supplies (disinfectant, essential protective gear) to protect essential workers. Please describe how this availability is assessed. The County of Monterey's Emergency Operations Center (EOC) and the Health Department's own Departmental Operations Center (DOC) responded to multiple resource requests for personal protective equipment and supplies from essential businesses for employees. Monterey County has a robust Resource Requesting process coordinated by the Medical Health Operational Area Coordinator (MHOAC). Local essential health facilities submit resource requests to the MHOAC. Public Health has worked with the MHOAC to increase the supply of PPE at each essential health care facility. The requisition system in place has been effective in that health care facilities are increasing their stock of PPE and at this time there are no critical shortages of supplies.

Other essential businesses have submitted requests to the MHOAC for supplies. The MHOAC has limited access to cleaning and disinfecting supplies for other essential businesses but has monitored availability via on-line sources and has identified greater availability of these supplies for other essential businesses to purchase. Local agricultural industry stakeholders were also quick to respond in gathering and coordinating their resources along with County agencies and the hospital network to ensure farm laborers in the field and packing plants were provided additional training, equipment and engineering controls to address concerns.

- Testing capacity. A determination must be made by the county that there is testing
 capacity to detect active infection that meets the state's most current testing criteria,
 (available on CDPH website). The county must attest to:
 - Minimum daily testing capacity to test 1.5 per 1,000 residents, which can be met through a combination of testing of symptomatic individuals and targeted surveillance. Provide the number of tests conducted in the past week. A county must also provide a plan to reach the level of testing that is required to meet the testing capacity levels, if the county has not already reached the required levels.

Monterey County currently has testing capacity to meet the California Department of Public Health's most current testing criteria. The Monterey County Public Health Laboratory serves hospitals across three counties including Watsonville Area Hospital (Santa Cruz), Hazel Hawkins Hospital (San Benito), Community Hospital of the Monterey Peninsula (Monterey), Salinas Valley Memorial Hospital (Monterey), Natividad Medical Center (Monterey), and Mee Memorial Hospital (Monterey). The Monterey County Public Health Laboratory has been providing SARS-CoV-2 PCR testing since March 6, 2020. Its daily capacity for COVID-19 testing is 120 tests, with surge capability to 150 tests per day. The Monterey County Public Health Laboratory has been meeting community testing demand (number of submitted tests has not exceeded their daily testing capacity) and currently operates 7 days a week. Hospitals within Monterey County also have in-house SARS-CoV-2 testing capability. Community Hospital of the Monterey Peninsula, Natividad Medical Center, and Salinas Valley Memorial Hospital are utilizing the GeneXpert testing platform, while Mee Memorial Hospital has validated the Abbott ID Now platform. Combined daily testing capacity of the 4 hospitals in Monterey County is 298 tests per day. There are two California Department of Public Health-sponsored OptumServe test sites in Monterey County, one in Salinas and one in Greenfield.

These sites combined provide an additional testing capacity of 264 tests per day, for a total testing capacity of 682 tests daily (1.6 tests per 1,000 population).

Additional testing capacity in Monterey County is being developed. Planned Parenthood Mar Monte and Monterey Peninsula College collaborated to create an additional drive-through testing site in Monterey County. This site, located in Monterey opened May 19, 2020 and is staffed to serve an additional 60 Monterey County residents daily. The Monterey County Health Department's primary care clinics, which are FQHCs, are beginning to implement plans to collect specimens and expand access to screening services.

Monterey County's testing volume is less than its testing capacity. Two of Monterey County's hospitals are not currently reporting COVID-19 labs by CalREDIE ELR. Entering negative lab reports received by fax have been given a lower priority in the current workload. We are observing significant delays in receiving results from the OptumServe tests sites. Therefore, the volume of testing being reported below underestimates the true volume of laboratory testing being conducted in Monterey County. The Monterey County Health Department's surveillance plan, discussed later in this attestation, addresses strategies for increasing testing volume.

Current Daily Testing Capacity				
Monterey County Public Health Laboratory	Hospital In-House Testing	OptumServe Test Sites	Total	
120	298	264	682	

Current minimum daily testing capacity = 1.6 per 1,000

Number of Tests Conducted in Last 7 Days

Date	Number of Test by Date Received
5/18/2020	265
5/19/2020	280
5/20/2020	213
5/21/2020	612
5/22/2020	718
5/23/2020	414
5/24/2020	562
Total	3,064

o Testing availability for at least 75% of residents, as measured by the presence of a specimen collection site (including established health care providers) within 30 minutes driving time in urban areas, and 60 minutes in rural areas. Please provide a listing of all specimen collection sites in the county and indicate if there are any geographic areas that do not meet the criteria and plans for filling these gaps if

they exist. If the county depends on sites in adjacent counties, please list these sites as well.

Testing is available within 30 minutes' (urban) to 60 minutes' (rural) drive time for at least 75% of Monterey County residents. Monterey County has three community specimen collection sites, four hospitals where individuals seeking medical care may have specimens collected by an ordering physician, and three additional community collection sites that are situated in the neighboring counties of Santa Cruz, San Benito, and San Luis Obispo. All sites and addresses are listed in the table below. Driving time to the sites was mapped and approximated by drawing 25 and 55 mile radius buffers around each testing site, assuming ideal driving conditions and calculating the percentage of county population within the buffered areas. Specimen collection sites in and around Monterey County ensure that 88% of the county's urban population are within 30 minutes driving time to a site and 95% of the county's rural population are within 60 minutes driving time to a site, as shown in the map in Appendix II.

Site	Address 1428 Abbott St, Salinas, CA 93901		
Optum Salinas			
Natividad Medical Center	1441 Constitution Boulevard, Salinas, CA 93906		
Salinas Valley Memorial Healthcare System	450 East Romie Lane, Salinas, CA 93901		
Optum Greenfield	315 El Camino Real, Greenfield, CA 93927		
Mee Memorial Hospital	300 Canal Street, King City, CA 93930		
Community Hospital of the Monterey Peninsula	23625 Holman Hwy, Monterey, CA 93940		
Monterey Peninsula College (Planned Parenthood Mar Monte)	980 Fremont Street, Monterey, CA 93940		
Ramsay Park Family Center	1301 Main Street, Watsonville, CA 95076		
Veteran's Memorial Building	649 San Benito Street, Hollister, CA 95023		
Veteran's Hall	240 Scott Street, Paso Robles, CA 93446		

Please provide a COVID-19 Surveillance plan, or a summary of your proposed plan, which should include at least how many tests will be done, at what frequency and how it will be reported to the state, as well as a timeline for rolling out the plan. The surveillance plan will provide the ability for the county to understand the movement of the virus that causes COVID19 in the community through testing. [CDPH has a community sentinel surveillance system that is being implemented in several counties. Counties are welcome to use this protocol and contact covCommunitySurveillance@cdph.ca.gov for any guidance in setting up such systems in their county.]

Monterey County has a surveillance plan that provides the ability to understand the movement of COVID-19 in the community through testing. Monterey County's Surveillance Plan is included as Appendix III. In summary, the plan outlines Monterey County's strategy for gathering, analyzing, reporting, and disseminating surveillance information. Also included are testing strategies emphasizing access for vulnerable populations. Except for sections noted in the plan, Monterey County Health Department initiated all areas of its surveillance strategy in mid-March and has continuously evaluated and improved it. The Monterey County COVID-19 Surveillance Plan is attached to this attestation as Appendix III.

- Containment capacity. A determination must be made by the county that it has adequate infrastructure, processes, and workforce to reliably detect and safely isolate new cases, as well as follow up with individuals who have been in contact with positive cases. The county must attest to:
 - Enough contact tracing. There should be at least 15 staff per 100,000 county population trained and available for contact tracing. Please describe the county's contact tracing plan, including workforce capacity, and why it is sufficient to meet anticipated surge. Indicate which data management platform you will be using for contact tracing (reminder that the State has in place a platform that can be used free-of-charge by any county).

Monterey County has adequate infrastructure, processes, and workforce to reliably detect and safely isolate new cases and follow up with contacts. There are currently 44 Health Department staff that are trained in case investigation and/or contact tracing. These staff are either active case or contact investigators or are ready and available for deployment. Monterey County Health Department strives to hire a workforce that is reflective of our community's racial, ethnic, and linguistic diversity. This team reflects those values. Staff can communicate with individuals in English, Spanish, and Tagalog. Outside interpretation services such as Language Line are also utilized as needed.

Monterey County has a plan to train additional staff up to the recommended 65 contact tracers. We will first utilize additional staff from the Health Department and other County departments. We are developing partnerships with local hospitals and organizations, including California State University, Monterey Bay, the Naval Postgraduate School, and Hartnell College Nursing Program to support any additional need for volunteers to assist with contact tracing. These volunteers will be trained using a combination of the on-line training provided by CDPH and local on-the-job training by experienced investigators. If there is a surge of cases, or a large or complex outbreak, the volunteers will be activated to assist with contact tracing.

Case investigation activities are documented in CalREDIE. Currently, the Health Department uses a combination of CalREDIE and an in-house developed Microsoft Access database for contact data management. We look forward to onboard with the new statewide contact tracing platform as soon as we are invited to do so.

The goals of Monterey County Health Department's contact tracing plan are to isolate every infectious case through their infectious period, reach every elicited close contact and screen them for disease, and quarantine every elicited contact through

their incubation period. Case and contact investigations are conducted utilizing standardized workflows. Case investigations focus on verification and disclosure of diagnosis, interviews, health education, isolation, contact elicitation, documentation, monitoring, and release from isolation. Contact investigations similarly focus on disclosure of exposure, health education, quarantine, linkage to screening services, documentation, monitoring, referral to medical care as needed and release from quarantine.

The ability to isolate and quarantine individuals is a critical component of containment. The County has initiated a plan to provide hotel accommodations for high-risk persons experiencing homelessness. In addition, our investigators work directly with cases, medical providers, and hospital discharge planners to identify individuals who are unable to isolate in their current living situation. Those individuals are referred to the County's Alternative Care and Shelter System (ACS). The ACS consists of hotel rooms and trailers that can temporarily house individuals while in isolation. The ACS provides additional support that includes referrals to community resources, social services support, meals, and transportation when released.

Addendum: We expect an additional 11 contact tracers to be trained and available by the end of June and the remaining 10 by the end of July. However, should Monterey County experience a surge in cases, this timeline could be accelerated.

Availability of temporary housing units to shelter at least 15% of county residents experiencing homelessness in case of an outbreak among this population requiring isolation and quarantine of affected individuals. Please describe the county's plans to support individuals, including those experiencing homelessness, who are not able to properly isolate in a home setting by providing them with temporary housing (including access to a separate bathroom, or a process in place that provides the ability to sanitize a shared bathroom between uses), for the duration of the necessary isolation or quarantine period. Rooms acquired as part of Project Roomkey should be utilized.

Monterey County has a multi-pronged approach to temporarily shelter at least 15% of residents experiencing homelessness due to an outbreak of COVID-19, including residents that cannot isolate or quarantine where they reside. The County has signed contracts with 8 hotels to provide a maximum combined capacity of 375 rooms. The County is now in possession of 15 trailers delivered by the State and has located sites to place an additional 34 trailers for a total maximum combined capacity of 136 individuals. Additionally, the County has gareements in place or is negotiating agreements to shelter individuals in semi-congregate large facilities including the Monterey County fairgrounds (230 maximum capacity), Sherwood Hall (90 maximum capacity), and Salinas Valley Fairgrounds (300 maximum capacity). Total maximum capacity for all housing sites is 1,129. According to the 2019 Monterey County Homeless Census & Survey, an estimated 2,422 residents were homeless. Of those experiencing homelessness, 76% or 1,830 were unsheltered at the time of the census. Using the total homeless population, Monterey County could potentially offer temporary shelter to 1,129 individuals, which represents 46% of the total estimated homeless population and 61% of the estimated unsheltered population. These figures are estimates and are likely to have changed due to the economic impact of the pandemic. Residents temporarily sheltered at hotel rooms

have access to a separate bathroom. Individuals housed at semi-congregate locations such as trailers that have restrooms in the trailer will include groups that already live together prior to moving into the trailer facilities. Individuals Covid-19 that are in isolation and needing temporary shelter may be placed in more congregate living settings such as the Monterey County Fairgrounds and will have access to shared restrooms. The County Alternative Housing Plan includes protocols for regularly cleaning and disinfecting restrooms.

Cohorts of county residents that have been and will continue to be sheltered include those who have tested positive for COVID-19, those who have been exposed to the virus and are in quarantine, persons under investigation awaiting virus test results, and the medically fragile high-risk population that is presumed to be non-infectious and needing temporary shelter during the pandemic. The County is currently operating temporary shelter at two locations with approximately 50 people housed as of the writing of this report. Most of these individuals are non-infectious and needing temporary shelter during the pandemic. A small number are in isolation. As noted, significantly more capacity is available.

- Hospital capacity. A determination must be made by the county that hospital capacity, including ICU beds and ventilators, and adequate PPE is available to handle standard health care capacity, current COVID-19 cases, as well as a potential surge due to COVID-19. If the county does not have a hospital within its jurisdiction, the county will need to address how regional hospital and health care systems may be impacted by this request and demonstrate that adequate hospital capacity exists in those systems. The county must attest to:
 - County (or regional) hospital capacity to accommodate COVID-19 positive patients at a volume of at a minimum surge of 35% of their baseline average daily census across all acute care hospitals in a county. This can be accomplished either through adding additional bed capacity or decreasing hospital census by reducing bed demand from non-COVID-19 related hospitalizations (i.e., cancelling elective surgeries). Please describe how this surge would be accomplished, including surge census by hospital, addressing both physical and workforce capacity.

Monterey County hospitals have the capacity to accommodate COVID-19 positive patients at a volume of ≥35% of their baseline average daily census. Four local hospitals serve the residents of Monterey County. All hospitals have implemented their own plans for virus detection and containment, including placement of triage tents outside the hospital Emergency Departments and implementing protocols prevent and control the spread of COVID-19 in their facilities. Hospitals have implemented CDC and CDPH guidance to preserve PPE and slowly increase their cache of protective equipment. Hospital leadership including Chief Executive Officers, Chief Medical Officers, Infectious Disease Physicians and Infection Control Practitioners have participated in weekly meetings to discuss their planning efforts and agree on an integrated approach to increasing bed surge capacity, increasing hospital testing capacity, implementing protocols to refer infectious patients to temporary shelter sites, preserving and increasing caches of PPE, and assisting in testing of SNF that frequently refer ill patients to their Emergency Departments.

Each hospital has implemented their surge plans. As an example, Natividad Medical Center has a surge capacity beyond their recent average daily census of 100

patients to 247 acute care beds. Natividad's ICU capacity has been increased from 10 beds to 45 beds. Natividad has 24 negative pressure rooms and 89 ventilators. Total County bed capacity during a surge for all four hospitals exceeds 600 beds. Additionally, the County has an Alternate Care Site plan that can be implemented at an off-site location and can accept up to 300 additional lower acuity patients from the four hospitals, allowing hospitals to focus on more acute patients.

Date	COVID-19 Patient Hospital System Census (Four Hospital Total)	Hospital System Census Bed Census (Four Hospital Total)
5/11/2020	9	400
5/12/2020	6	425
5/13/2020	7	438
5/14/2020	6	439
5/15/2020	6	401
5/16/2020	8	404
5/17/2020	8	411
5/18/2020	8	400
5/19/2020	11	435
5/20/2020	10	429
5/21/2020	8	450
5/22/2020	9	460
5/23/2020	7	434
5/24/2020	7	396
14-Day Average Daily Hospital System Census	8	423
35% Surge (Average + 35%)	11	571
Number of Licensed Beds in Hospital System	148 ICU	829 All Beds (including ICU)

 County (or regional) hospital facilities have a robust plan to protect the hospital workforce, both clinical and nonclinical, with PPE. Please describe the process by which this is assessed. Monterey County hospitals have robust plans to protect their patients and workforce. Hospitals have their own logistics process including known vendors to obtain appropriate PPE. In addition, the MHOAC for Monterey County utilizes local and State vendors to obtain and support the PPE needs of the hospitals, medical clinics and SNF in Monterey County. Supplies of PPE have been limited nationwide. However, supply chains have increased availability of PPE recently and licensed facilities have been able to increase PPE on-hand by following CDC and State guidance for proper and judicious use of PPE.

The MHOAC program works in concert with the Logistics Section of the EOC to process resource requests. A large number of requests, including requests for PPE have been processed by the MHOAC and Logistics Section.

- Vulnerable populations. A determination must be made by the county that the
 proposed variance maintains protections for vulnerable populations, particularly
 those in long-term care settings. The county must attest to ongoing work with Skilled
 Nursing Facilities within their jurisdiction and describe their plans to work closely with
 facilities to prevent and mitigate outbreaks and ensure access to PPE:
 - Describe your plan to prevent and mitigate COVID-19 infections in skilled nursing facilities through regular consultation with CDPH district offices and with leadership from each facility on the following: targeted testing and patient cohorting plans; infection control precautions; access to PPE; staffing shortage contingency plans; and facility communication plans. This plan shall describe how the county will (1) engage with each skilled nursing facility on a weekly basis, (2) share best practices, and (3) address urgent matters at skilled nursing facilities in its boundaries.

Monterey County's variance maintains protections for vulnerable populations.

Monterey County Public Health attends weekly CDPH calls attended by local health departments. In turn, Public Health distributes information provided by CDPH to our weekly meetings with local hospital and SNF partners, which are well attended. These meetings allow for sharing of best practices, infection prevention strategies, preparation for surge, laboratory testing options, supply shortage issues and resource request procedures. Monterey County Health Department strongly encourages SNF staff to participate in the weekly CDPH calls focused on SNFs.

The Monterey County Ombudsman and Central Coast Alliance for Health Medi-Cal Managed Care Health Plan also participate in our weekly meetings with the SNF. This collaboration allows us to disseminate information to Assisted Living Facilities (ALF) through the Ombudsman. It also allows us to address immediate concerns with our vulnerable populations and to look for solutions to issues that cannot immediately be answered. Public Health recognizes the need and benefit of meeting directly with the ALF and intends to initiate weekly meetings with our ALF beginning no later than June 1, 2020.

Public Health also attends a weekly Access and Functional Needs meeting hosted by the Monterey County Department of Social Services.

Public Health has provided guidance to long-term care facilities including skilled nursing facilities, which is posted at

https://www.co.monterey.ca.us/home/showdocument?id=88477. The guidance includes recommendations to congregate living facilities to prepare for a suspected or confirmed COVID-19 case among staff and residents. The guidance also provides recommendations for facilities that have residents or staff with suspected or confirmed COVID-19. The recommendations include but are not limited to targeted testing and patient cohorting, infection control precaution, access to PPE, staffing shortage contingencies, and facility communication. Public Health and a local hospital have already intervened and instructed management of one local SNF with residents diagnosed with COVID-19 to cohort residents and implement the guidance. The following documents are attached as Appendix IV to this attestation:

- Monterey County Health Department COVID-19 Guidance for Long-Term Care Facilities
- Joint Release from Isolation Guidelines

Addendum: Monterey County has established relationships with the CDPH's Licensing & Certification district offices. We have worked collaboratively in the past with L&C on complex outbreak investigations in SNFs including legionellosis and VIM-producing, multi-drug resistant *Pseudomonas*. Monterey County will encourage SNFs to communicate regularly with L&C. Monterey County will share L&C All Facility Letters (AFL) with SNFs and help answer any questions facilities might have about how to comply with and implement requirements outlined in AFLs.

Skilled nursing facilities (SNF) have >14-day supply of PPE on hand for staff, with established process for ongoing procurement from non-state supply chains. Please list the names and contacts of all SNFs in the county along with a description of the system the county must track PPE availability across SNFs.

Public Health continues to monitor SNF PPE inventory by reviewing CDPH SNF data which is provided by the RDMHS to Public Health. Monterey County has a robust Resource Requesting process coordinated by the Medical Health Operational Area Coordinator (MHOAC). Local health facilities are now accustomed to submitting resource requests to the MHOAC. Public Health has worked with SNF representatives and the MHOAC to increase the supply of PPE at each SNF. Recently, the percentage of SNF that report at least 14 days of PPE in stock has increased from 28% to 75%.

Skilled Nursing Facility Name	Licensed Beds	Facility Address	Facility Telephone	Administrator
Ave Maria Convalescent Hospital	31	1249 JOSSELYN CANYON RD, MONTEREY, CA - 93940	(831) 373- 1216	Barbara Reid
Canterbury Woods	24	651 SINEX AVE, PACIFIC GROVE, CA - 93950	(831) 373- 3111	Elvira Abare
Carmel Hills Care Center	99	23795 HOLMAN HWY, MONTEREY, CA - 93940	(831) 624- 1875	Jarod Christensen

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Carmel Valley Manor	36	8545 CARMEL VALLEY RD, CARMEL, CA - 93923	(831) 624- 1281	Jane Ipsen
Cypress Ridge Care Center	99	1501 SKYLINE DR, MONTEREY, CA - 93940	(831) 373- 3716	Ryan McCormack
Eden Valley Care Center	59	612 MAIN ST, SOLEDAD, CA - 93960	(831) 678- 2462	David Martinez
Forest Hill Manor Health Center	26	551 GIBSON AVE, PACIFIC GROVE, CA - 93950	(831) 657- 5200	Rossetta Chan
George L. Mee Hospital D/P SNF	48	300 CANAL ST, KING CITY, CA - 93930	(831) 385- 6000	Rebecca Grabeal
Katherine Healthcare	51	315 ALAMEDA AVE, SALINAS, CA - 93901	(831) 424- 1878	Steve Bissenger
Pacific Coast Acute Care	149	720 E ROMIE LN, SALINAS, CA - 93901	(831) 424- 8072	Ryan Taylor
Pacific Grove Healthcare Center	51	200 LIGHTHOUSE AVE, PACIFIC GROVE, CA - 93950	(831) 375- 2695	Natasha Prunty
Westland House	28	100 BARNET SEGAL LN, MONTEREY, CA - 93940	(831) 658- 3737	Andrea Fernandez
Windsor Gardens Rehabilitation Center of Salinas	99	637 E ROMIE LN, SALINAS, CA - 93901	(831) 424- 0687	Eddie Hernandez
Windsor Monterey Care Center	78	1575 SKYLINE DR, MONTEREY, CA - 93940	(831) 373- 2731	Daniel Cummings
Windsor Skyline Care Center	80	348 IRIS DR, SALINAS, CA - 93906	(831) 449- 5496	Marthen Lumingkewas
Windsor the Ridge Rehabilitation Center	103	350 IRIS DR, SALINAS, CA - 93906	(831) 449- 1515	Rachyl Bruton

Addendum: Monterey County is working with SNFs to help them identify supply chains, work collaboratively with each other, and utilize local resources. The 25% of Monterey County SNFs (4 facilities) that report less than 15-day supply of PPE have a 15-day supply of some PPE components but not all. For example, one facility reports difficulty obtaining gowns and gloves but has sufficient supplies of N95s, eye protection, and surgical masks. Another facility reports having enough gloves but not enough N95s. Monterey County and SNF representatives meet weekly to discuss issues like PPE availability. Facilities share with each other what processes have been successful for obtaining PPE, and in some instances, have shared PPE across facilities when shipments were delayed. Monterey County links SNFs to community resources such as private businesses that have offered to assist with PPE procurement. In addition, Monterey County provides guidance on PPE conservation strategies so that facilities can better utilize their PPE resources. As long as PPE remains in short supply nationwide, Monterey County will continue to assist SNFs in acquiring the equipment.

• Sectors and timelines. Please provide details on the county's plan to move through Stage 2. These details should include which sectors and spaces will be opened, in what sequence, on what timeline. Please specifically indicate where the plan differs from the state's order. Any sector that is reflective of Stage 3 should not be included in this variance because it is not allowed until the State proceeds into Stage 3. For additional details on sectors and spaces included in Stage 2, please see https://covid19.ca.gov/industry-guidance/ for sectors open statewide and https://covid19.ca.gov/roadmap-counties/ for sectors available to counties with a variance.

On May 4, 2020, an updated Health Officer Shelter in Place Order took effect lifting restrictions on the following lower risk services through May 31, 2020:

- Faith based services provided through streaming or similar technology including drive-in services
- Office-based businesses with telework still being highly encouraged
- Landscaping, gardening and nurseries
- All construction
- Golf courses and driving ranges
- Clarification on residential transactions including rentals, leases, and home sales
- Clarification on in-person vehicle sales
- Clarification on allowance of first responder training
- Reopening of fabric and craft stores for the purpose of supplying materials for face coverings and gowns and personal protective equipment
- Wearing a face covering whenever in the public consistent with Face Covering Health Officer Order issued April 28, 2020

On May 8, 2020, a Supplemental Order to Monterey County's Shelter-in-Place Order was issued in alignment with the modified State Health Officer Stay-at-Home Order issued May 7, 2020 which facilitated Monterey County moving into the early phase of Stage 2 of the COVID-19 reopening process. This Supplemental Order allowed additional lower risk retail businesses and associated manufacturing and supply chain businesses to resume with modifications. Retail businesses (bookstores, clothing stores, toy stores, etc.) could provide services to the public via curbside pick-up and delivery with prohibition of displaying goods on sidewalks.

Many of the retailers have resumed business for curbside pick and delivery only without any challenges and in compliance with the Health Officer Orders. Childcare facilities developed plans for re-opening, and many have reopened to be available for essential workers. The other sectors with lifted restrictions have also resumed in compliance with the Health Officer Order and Sector specific requirements issued by the State. Conversations continue with parks administrators regarding planning for reopening parks in the coming weeks as well as planning for summer youth camps to provide childcare to working families.

Additionally, some of our area hospitals and licensed health care facilities have resumed deferred and elective services and procedures. These services will continue through Stage 2 based on capacity and availability of PPE at each

individual facility. Other disciplines such as dentistry are considering resumption of deferred and non-emergent procedures.

On May 18, 2020, the State expanded the list of businesses that could open with modification as part of Early Stage 2. Monterey County is in the process of reviewing the list of businesses that may open as part of Early Stage 2. These include:

- Childcare for those outside of essential workforce
- Personal services, limited to car washes, pet grooming, dog walking, cleaning and janitorial services.
- Outdoor museums, and open gallery spaces and other public spaces with modifications, not including zoos, amusement parks, indoor galleries or museum spaces.
- Library curb side pick-up.

Monterey County will take into consideration these businesses and may include all or some of them in the next Supplemental Order to be issued. In addition, once Monterey County's Attestation is approved and posted on CDPH's website, Expanded Stage 2 with Attestation businesses may be included in the Supplemental Order. These include:

- Destination retail (retail stores), including shopping malls and swap meets
- Dine-in restaurants (other amenities, like bars or gaming areas, are not permitted in Stage 2)
- Schools with modifications

Monterey County formed Ad Hoc Committees comprised of industry leaders, labor leaders, and others to prepare for a broader reopening of our economy. These Committees are tasked with developing draft plans, protocols, recommendations, and advisories for their sector/industry and presenting to Monterey County Health officials for their review. These Ad Hoc Committees are staffed by the Board of Supervisors and include:

- Agricultural
- Construction
- Hospitality
- Non-Hospital Medical/Personal Services
- Religious Organizations

Monterey County officials will continue to work with sectors to be permitted to reopen in the coming weeks on their plans to adhere to CDPH sector guidance. These Ad Hoc Committees will be instrumental in reviewing CDPH guidance and determining actions needed to comply with State requirements to resume business.

Monterey County intends to submit the Attestation to CDPH by May 31, 2020.

• Triggers for adjusting modifications. Please share the county metrics that would serve as triggers for either slowing the pace through Stage 2 or tightening modifications, including the frequency of measurement and the specific actions triggered by metric changes. Please include your plan, or a summary of your plan, for how the county will inform the state of emerging concerns and how it will implement early containment measures.

Monterey County will continue to monitor the various indictors and metrics included in the Monterey County 2019 Novel Coronavirus Disease (COVID-19) Surveillance Plan (Appendix III). A subset of indicators/metrics from the surveillance plan serve as triggers for either slowing the pace through Stage 2 or tightening modifications. Indicators/Metrics will be monitor on a daily or weekly basis as indicated below.

When a threshold for considering modifications is met, Health Department staff will notify the Monterey County Health Officer. The Health Officer will convene a meeting to review the situation and determine suitable actions. The Health Officer, as appropriate, will also consult with the Director of Health and Health Department staff, local health care system leadership, the Incident Commander of the Monterey County Emergency Operations Center, County Administration officials, County Board of Supervisors members, Health Officers of surrounding local health jurisdictions, industry leaders, and subject matter experts from the California Department of Public Health. Possible actions could include but are not limited to continued monitoring, amending Health Department protocols for case and contact investigations, obtaining additional resources, implementing additional containment measures, and/or issuing more restrictive community mitigation measures. If the Monterey County Health Officer determines that either slowing the pace of movement through Stage 2 or tightening modifications is warranted, the Health Officer will notify the CDPH Duty Officer and consult with State Health Officer. Any re-implementation of restrictions of Stage 2 activities will be executed in stepwise fashion based on available local data as well as CDC and CDPH guidance.

Indicator or Metric	Frequency of Measurement	Baseline	Threshold for Considering Modifications
Ability to Test, Contact Trace, Isolate, o	and Support the Ex	posed	
14-Day cumulative incidence per 100,000 population	Daily	28.6	≥32
Percent of cases reached	Daily for first 3 weeks then weekly	98.5%	<90%
Percentage of Alternative Housing Site Beds designated for individuals diagnosed with COVID-19 or who are awaiting test results that are filled	Daily for first 3 weeks then weekly	2%	≥25%
Ability to Protect Those at High Risk for	COVID-19		
Percentage of skilled nursing facilities with no new cases in the last 14 days	Daily	94%	<75%
Number of deaths over 14 days	Daily	2	≥5
Surge Capacity for Hospitals and Heal	th Systems		
7-Day average of daily percent change in total number of hospitalized COVID-19 patients	Daily for first 3 weeks then weekly	-0.2%	≥5%

Percentage of ICU beds available averaged over the last 14 days	Daily for first 3 weeks then weekly	71%	<54%
Percentage of hospitals with ≥14 days' supply of PPE	Daily for first 3 weeks then weekly	100	<75%
Epidemiology and General Surveillanc	е		
Overall test positivity rate for the past 7 days	Daily	2.3%	≥8%
Case doubling rate	Daily	29 days	<8 days

COVID-19 Containment Plan

Please provide your county COVID-19 containment plan or describe your strategy to create a COVID-19 containment plan with a timeline.

Monterey County has implemented a variety of strategies to contain COVID-19 and to mitigate its impact on the community. Many of the following containment strategies are detailed in existing plans or plans under development. The County has worked with the State and local health agencies to secure and increase specimen collection and testing. Additional efforts are underway to increase the volume of testing. Public Health has trained a sufficient number of individuals to perform case investigation and close contact tracing, reaching consistently over 90% of cases and contacts. Plans are underway to increase the number of investigators and tracers in anticipation of increased cases as restrictions are released. The County has isolated individuals with COVID-19 who are living in congregate settings either in their current location or in temporary alternative housing sites. Additional alternative housing capacity has been identified and necessary agreements are in place. Public Health has worked with numerous organizations to implement state and local guidance to prevent and control the spread of COVID-19 and to perform surveillance among individuals residing or working in congregate living settings and among individuals working in public safety and health care. The County and other agencies have partnered to implement plans to protect vulnerable populations including older adults, people with chronic medical conditions and compromised immune systems, families living in poverty, individuals experiencing homelessness, long-term care facility residents, individuals with substance use disorders and mental health conditions, and others. Hospitals have implemented plans to achieve and maintain adequate hospital surge capacity including bed, staff and PPE availability. Many businesses have implemented State and local guidance to protect essential workers through worksite safety protocols and the County has encouraged businesses and government to advocate for adequate support for essential workers in isolation or quarantine. The County and stakeholders are engaging the broader community to resume certain services and recreational activities while adhering to social distancing and sector specific requirements. Finally, the County continues to coordinate with neighboring counties to promote uniformity of Health Officer orders which affords uniformity of restrictions for residents that travel between counties. The County intends to develop a written containment plan that summarizes these strategies and that reference the detailed plans that include these strategies.

Addendum: Monterey County's containment plan will be finalized by June 15.

While not exhaustive, the following areas and questions are important to address in any containment plan and may be used for guidance in the plan's development. This containment plan should be developed by the local health officer in conjunction with the hospitals and health systems in the jurisdiction, as well as input from a broad range of county stakeholders, including the County Board of Supervisors. Under each of the areas below, please indicate how your plan addresses the relevant area. If your plan has not yet been developed or does not include details on the areas below, please describe how you will develop that plan and your timeline for completing it.

Testing

- Is there a plan to increase testing to the recommended daily capacity of 2 per 1000 residents?
- Is the average percentage of positive tests over the past 7 days <8% and stable or declining?
- Have specimen collection locations been identified that ensure access for all residents?
- Have contracts/relationships been established with specimen processing labs?
- Is there a plan for community surveillance?

The County plans to increase testing capacity to the recommended daily capacity of 2 tests per 1,000 residents per day. The State and County recently launched two OptumServe centers with a total testing capacity of 528 samples per day. In addition, Planned Parenthood Mar Monte collaborated with Monterey Peninsula College to recently open a no-cost drive up testing center with the capacity to collect 100 samples per day. Furthermore, Monterey County Clinic Services Bureau is preparing to initiate testing at primary care clinic sites.

Four local hospital laboratories in Monterey County currently perform rapid virus testing and they plan to further increase testing, particularly pre-procedure testing. Allocation of certain test kits and supplies is improving weekly. The US Army California Medical Detachment laboratory recently acquired three COVID-19 testing instruments and plans to increase testing in the coming months as test kit availability and allocation improves.

Monterey County Public Health Laboratory (MCPHL) plans to increase testing capacity by expanding lab staff, purchasing high throughput instruments for serology and PCR testing and implementing additional FDA EUA approved testing methods, including methods that can identify influenza and other respiratory viruses concurrently with SARS-CoV-2. MCPHL is one of 8 labs in California that is receiving a total of 19,200 tests from the federal HHS through June 30, 2020. MCPHL was one of 14 labs in California that obtained an Abbott ID Now instrument from California Department of Public Health that was deployed at a local hospital in South County that had no COVID-19 testing instruments. MCPHL also distributes Abbott ID Now test kits to four hospital labs in the region on a weekly basis,

expanding testing capacity using the Abbott ID NOW by an average of 400 tests per month.

MCPHL recently loaned a GeneXpert testing instrument to a local hospital lab and also procured GeneXpert test kits to another local hospital expanding testing capacity by approximately 1,000 tests per month.

MCPHL is exploring wastewater testing as a means of conducting community surveillance of COVID-19.

The average percentage of positive tests over the past 7 days is 2.3% and stable. Please see the data table below.

Date	Number of Positive Tests (by Dated Resulted	Number of Tests (by Date Resulted)	Percent Positive
5/18/2020	7	265	2.6%
5/19/2020	8	280	2.9%
5/20/2020	7	213	3.3%
5/21/2020	10	612	1.6%
5/22/2020	22	718	3.1%
5/23/2020	10	414	2.4%
5/24/2020	8	562	1.4%
7-Day Average Percent of Positive Tests	-	-	2.3%

^{*}ELR transmission issue affecting number of test results received.

The three free specimen collection locations in Monterey County described earlier are strategically located throughout the county and contribute to the availability and accessibility of COVID-19 testing to all residents. The OptumServe testing sites are located at Salinas, the most populous city in Monterey County, and Greenfield located 33 miles southeast of Salinas in South County. Samples are collected from symptomatic and asymptomatic persons, including essential workers, vulnerable persons and now the general public.

MCPHL has contracts and business relationships in place with specimen processing labs to test overflow specimens, including the UCSF Clinical Laboratory and Viral and Rickettsial Diseases Laboratory at CDPH. MCPHL is currently working on a MOU with the Chan-Zuckerberg BioHub lab for genome sequencing of positive specimens for epidemiological surveillance studies.

Monterey County has a plan for community surveillance, which is attached as Appendix III. Monterey County Health Department and sixteen skilled nursing facilities are planning to implement monthly surveillance testing of approximately 900 SNF residents and staff. MCPHL is planning to perform testing and has agreements with testing laboratories to handle overflow testing as needed. The Department also works with the local food banks and Spanish language media

outlets to advertise and promote community utilization of the OptumServe and Mar Monte specimen collection locations.

Contact Tracing

- How many staff are currently trained and available to do contact tracing?
- Are these staff reflective of community racial, ethnic and linguistic diversity?
- Is there a plan to expand contact tracing staff to the recommended levels to accommodate a three-fold increase in COVID-19 cases, presuming that each case has ten close contacts?
- Is there a plan for supportive isolation for low income individuals who may not have a safe way to isolate or who may have significant economic challenges as a result of isolation?

There are currently 44 staff that are trained in case investigation and/or contact tracing.

Monterey County Health Department strives to hire a workforce that is reflective of our community's racial, ethnic, and linguistic diversity. This team reflects those values. Staff can communicate with individuals in English, Spanish, and Tagalog. Outside interpretation services such as Language Line are also utilized as needed.

We have a plan to train additional staff up to the recommended 65 staff. We will first utilize additional staff from County Health and other departments. We are developing partnerships with other organizations, including California State University, Monterey Bay, the Naval Postgraduate School, and Hartnell College Nursing Program to support any additional need for volunteers to assist with contact tracing. These volunteers will be trained using a combination of on-line training provided by CDPH and local on-the-job training provided by experienced disease investigators. If there is a surge of cases, or a large or complex outbreak, the additional team members would be activated to assist with contact tracing.

The County has initiated a plan to provide hotel accommodations for high-risk persons experiencing homelessness. In addition, our investigators work directly with cases, medical providers, and hospital discharge planners to identify individuals who are unable to isolate in their current living situation. Those individuals are referred to the County's Alternative Care and Shelter System (ACS). ACS resources include hotel rooms and State provided trailers that can temporarily house individuals while in isolation. The ACS provides additional support that includes meals, housekeeping, security, prescription medication delivery and referrals to community resources.

Living and Working in Congregate Settings

- How many congregate care facilities, of what types, are in the county?
- How many correctional facilities, of what size, are in the county?
- How many homelessness shelters are in the county and what is their capacity?
- What is the COVID-19 case rate at each of these facilities?

- Is there a plan to track and notify local public health of COVID-19 case rate within local correctional facilities, and to notify any receiving facilities upon the transfer of individuals?
- Do facilities have the ability to adequately and safely isolate COVID-19 positive individuals?
- Do facilities have the ability to safely quarantine individuals who have been exposed?
- Is there sufficient testing capacity to conduct a thorough outbreak investigation at each of these facilities?
- Do long-term care facilities have sufficient PPE for staff, and do these facilities have access to suppliers for ongoing PPE needs?
- Do facilities have policies and protocols to appropriately train the workforce in infection prevention and control procedures?
- Does the workforce have access to locations to safely isolate?
- Do these facilities (particularly skilled nursing facilities) have access to staffing agencies if and when staff shortages related to COVID-19 occur?

Monterey County has the following congregate living facilities:

Care Facilities:

- 16 licensed Skilled Nursing Facilities with a total bed capacity of 1034 beds. One facility has a sub-acute wing.
- 50 Assisted Living Facilities with a total bed capacity of 1805 beds.

Detention and Correction Facilities:

- 1 County Jail with a total capacity of 825 Inmates. This number has decreased due to early release as a COVID-19 mitigation strategy.
- · Several city jails that serve as temporary detention facilities.
- 1 Juvenile Hall with a maximum capacity of 114 beds.
- 1 Correctional Training Facility (CTF) with a total design capacity of 3,312 Inmates
- 1 Salinas Valley State Prison with a total design capacity of 2,452 inmates. The prison averages approximately 2,900 inmates.

Homeless Shelters based on 2019 Housing Inventory:

Emergency Shelters

Organization Name	Project Name	Total Beds	Utilization Rate
Community Homeless Solutions	Hamilton	16	56%
Community Homeless Solutions	Homeless Medical Respite	6	67%
Community Homeless Solutions	Natividad	32	66%
Community Homeless Solutions	Salinas Warming Shelter	68	100%
Community Human Services	Safe Place	12	8%
Interim Inc.	MCHOME- Monterey	1	100%
Interim Inc.	McHOME- Salinas	1	100%
Outreach United	I-HELP for Men	25	72%
Outreach United	I-HELP for Women	14	100%

Pajaro Rescue Mission	Pajaro Rescue Mission	34	94%
Salvation Army	Frederikson House	16	56%
Veterans Transition Center	ERS	10	90%
Victory Mission	Victory Mission	71	85%
YWCA	YWCA Safe House	10	30%

Transitional Shelters

Solutions	Court (Intact Families)	18	111%
Community Homeless Solutions	Homeward Bound - Wittenmeyer Court	75	75%
Community Homeless Solutions	Men in Transition	24	50%
Community Homeless Solutions	Women in Transition	12	42%
Community Human Services	Safe Passage	6	50%
Franciscan Workers	House of Peace	33	67%
Housing Authority	Pueblo Del Mar	162	47%
Salvation Army	Casa de las Palmas	36	56%
Salvation Army	Phase II	24	96%
Sun Street Centers	Seven Suns Transition Housing	36	92%
Veterans Transition Center	GPD- Bridge	11	91%
Veterans Transition Center	GPD- Clinical	22	105%
Veterans Transition Center	GPD- Service Intensive Transitional Housing	40	98%
Total		815	

The case rate for these facilities is yet to be determined. However, every resident in these facilities that tests positive for COVID-19 is reported to Public Health by the testing laboratory. In addition, Monterey County Public Health receives data from our four (4) hospitals and sixteen (16) SNF daily that includes case counts, PPE days on hand, PPE needs, and staffing status. Public Health receives hospital data from CDPH which receives the date from the California Hospital Association (CHA). Public Health compiles this data and shares it with leadership at all four hospitals, Public Health and the County Office of Emergency Services (OES) for the purpose of surge planning. The data for the SNF comes from CDPH via Region II RDMHS. Data is compiled and shared with Public Health. This data affords the County an accurate picture of daily case counts.

Laboratories are required to notify Public Health of COVID-19 positive test results. Every SNF residents that tests positive will be assigned to a Case Investigator who will work closely with the congregate living facility to communicate to any receiving facility of the infectious status of the person being transferred.

Correctional facilities, hospitals and SNF have plans in place to isolate individuals diagnosed with COVID-19. The County Jail has isolation rooms for inmates diagnosed with COVID-19 that do not require hospital acute care. The Jail has also released certain inmates to reduce the jail population as part of mitigation and containment plans to cohort individuals that will be exposed to COVID-19 and will require quarantine. The

County has multiple Alternate Housing Sites established at local hotels to safely isolate COVID positive and persons under investigation (PUI) that cannot isolate where they reside. The County is also ready to activate an alternate housing site at the Monterey County Fairgrounds. Healthcare workers also have the option of using the CALTRAVELSTORE website at https://www.caltravelstore.com/ to locate local housing.

Testing capacity to respond to a suspected outbreak in a congregate living setting has improved. The Monterey County Public Health Laboratory has several weeks of PCR viral testing supplies in stock to provide reliable results within 12 to 24 hours of receipt of specimens. Local hospitals also have COVID-19 testing capability which could be utilized to test residents of SNF during an outbreak. Staff of these facilities could be tested by local providers and specimens sent to the local public health laboratory or commercial laboratories. Staff could also schedule appointments at one of three free testing locations in the county.

Public Health receives reports of PPE availability at all 4 hospitals from CDPH, which receives its information from the California Hospital Association which collects data from local hospitals. The data set includes PPE availability as days on-hand. Public Health also receives data on our 16 SNF via the CDPH report sent out by RDMHS. Monterey County also has a strong MHOAC program which is well utilized by our HCF for resource requests. This process also tracks staffing shortages and staffing resource requests submitted to the local MHOAC. PPE shortages continue to be a challenge for all HCF in the region. A more coordinated national strategy for PPE procurement is needed.

Infection Prevention staff are present at our 4 hospitals. Skilled nursing facilities have had access to infection prevention specialists, but are now required to identify a fulltime infection prevention specialist. Public Health will continue to provide guidance to newly identified SNF infection prevention specialists before and during facility outbreaks.

Public Health case investigators will assist congregate living setting employees diagnosed with COVID-19 with isolating where they reside. Those employees that cannot isolate where they reside will be offered lodging at one of the County's alternative shelter sites during their isolation period. Employees can also access shelter options at the CALTRAVELSTORE website https://www.caltravelstore.com/.

Hospitals and SNFs have utilized staffing agencies but availability has been difficult since COVID-19 has impacted the availability of temporary staff nationwide. Limited staffing agency capacity has led congregate living facilities to rely more on the State for medical staffing.

Protecting the Vulnerable

- Do resources and interventions intentionally address inequities within these populations being prioritized (i.e. deployment of PPE, testing, etc.)?
- Are older Californians, people with disabilities, and people with underlying health conditions at greater risk of serious illness, who are living in their own homes, supported so they can continue appropriate physical distancing and maintain wellbeing (i.e. food supports, telehealth, social connections, in home services, etc.)?

Certain populations in Monterey County may be more vulnerable to the impact of COVID-19 and restrictions in place to slow the spread of the virus. Consequently, Monterey County and partnering agency COVID-19 response plans, strategies, protocols, interventions and resources have been developed and implemented with these and other inequities in mind.

Older adults and individuals with chronic medical conditions such as heart, kidney, liver and lung disease as well as individuals with compromised immune systems are at greater risk of experiencing complications of COVID-19 and of dying from the infection. individuals and families living in poverty may delay health care for COVID-19 related symptoms or other conditions, due to lack or financial resources or concern about use of publicly funded programs. In response to reports from clinicians that some patients are presenting to health care facilities at later stages of illness or disease, the County has engaged in more extensive outreach to encourage older adults, individuals with chronic medical conditions and low income and impoverished families to seek appropriate and timely health care and to not delay essential services. In addition, residents with limited financial resources who do not need to be seen by a physician but would still like to be tested for the virus can schedule an appointment to have a specimen collected and tested for COVID-19 at no cost.

Individuals experiencing homelessness live in congregate settings and often struggle with alcohol and substance abuse and mental health conditions in addition to poorly managed chronic medical conditions. They may be at greater risk of coming in close contact with other homeless individuals infected with the virus that causes COVID-19 and themselves becoming infected with the virus. In cooperation with the State supported project Room Key, the county is temporarily housing many individuals experiencing homelessness in hotels and is providing meals, housekeeping, transportation and assistance with prescription medications.

In addition, residents of long-term care facilities are also are greater risk of becoming exposed to COVID-19 due to the congregate living environment and are at greater risk of complications and death due to their chronic medical conditions. The County, in partnership with local hospitals and the local Managed Care Medi-Cal health plan, are meeting regularly with SNF to implement COVID-19 infection prevention and control plans, consistent with California All Facility Letter directives and local Public Health guidance. SNF regularly make PPE resource requests to the MHOAC, who in turn acquires supplies and distributes to the SNF. These PPE are essential to protecting this vulnerable population and the SNF employees from COVID-19.

Recognizing the tremendous stress that the COVID-19 and local Shelter in Place orders have on individuals living with substance use disorders and mental health conditions, the MCHD Behavioral Health provides a crisis, suicide, and substance use hotline that is available 24 hours a day. In addition, some appointments can be provided via telehealth due in part to implementation of new technology. The Zoom application is now used to promote access to behavioral health services and can be downloaded for free from the Behavioral Health webpage. Mental health stress relief and coping resources are also freely available in English and Spanish. Special populations such as children, adolescents, individuals in recovery and post-partum women can access specific resources and supports.

Monterey County residents, in particular vulnerable residents, are encouraged to access the Monterey County Health Department COVID-19 Hotline, which is available Monday through Friday, 8:00 am to 5:00 pm, for immediate answers to questions about sheltering in place, PPE availability, testing sites, and other COVID-19 related questions. Residents can also submit Email with questions during non-business hours and expect a response the next business day. Hotline and email access is available on all MCHD website landing pages. Three local hospitals also provide free health care advice to county residents 7 days a week from 7:00 am to 7:00 pm, for anyone experiencing COVID-19 related symptoms.

To support health care providers serving vulnerable populations, the County has created a Provider Resource Guide in English and Spanish and made it available online. The link to the Guide has been distributed widely for use by primary care clinics and nonprofit organizations providing or connecting vulnerable patients and clients to wellbeing resources, in particular for those areas of the County and populations most impacted by COVID-19. The Guide is updated regularly in collaboration with United Way Monterey County. The Guide includes sections to assist older county residents, people with disabilities, and people with underlying health conditions to resources that support safe and healthy sheltering in place. The Monterey County Office of Emergency Services also maintains a webpage for community members to access wellbeing resources. The County also promotes 211 Monterey County as a source of COVID-19 information. 211 has recently expanded their call center staffing to in response to a 50%-100% increase in call volume.

Acute Care Surge

- Is there daily tracking of hospital capacity including COVID-19 cases, hospital census,
 ICU census, ventilator availability, staffing and surge capacity?
- Are hospitals relying on county MHOAC for PPE, or are supply chains sufficient?
- Are hospitals testing all patients prior to admission to the hospital?
- Do hospitals have a plan for tracking and addressing occupational exposure?

Public Health receives reports of hospital daily case counts, bed census, ICU census, ventilator availability, surge capacity, staffing and PPE availability from CDPH, which receives its information from the California Hospital Association which collects data from local hospitals. This data is compiled and shared with executives at all four hospitals, Public Health and Office of Emergency Services (OES) for the purpose of surge planning.

Monterey County has a strong MHOAC program which is well utilized by our hospitals for medical/health resource requests. This process also tracks staffing shortages and staffing resource requests submitted to the local MHOAC. Hospitals can now submit resource requests at https://apps.co.monterey.ca.us/emsrequest.

PPE shortages continue to be a challenge for all health facilities in the region. At this time, hospitals have been able to meet the majority of their PPE resource needs without dependency on MHOAC requests. Hospitals have well-developed collaborative relationships and frequently exchange supplies with each other to cover unanticipated demands or temporary shortfalls.

At this time, hospitals are not testing all patients prior to admission to the hospital. Hospitals have implemented protocols for pre-surgical screening. As the Abbott and Cepheid test kits become more available, hospitals will have added capacity to screen more patients prior to admission.

Local hospitals have plans and protocols in place to prevent occupational exposures. Plans are consistent with State Aerosolized Transmissible Disease Prevention standards. Hospitals also adhere to CDC and state COVID-19 specific guidance for prevention and control of COVID-19. Hospitals also have plans and protocols to respond to occupational exposures to COVID-19. Response plans include close cooperation with Monterey County Public Health to identify all employees that experience close contact with confirmed and suspected cases of COVID-19 at their facilities.

Essential Workers

- How many essential workplaces are in the county?
- What guidance have you provided to your essential workplaces to ensure employees and customers are safe in accordance with state/county guidance for modifications?
- Do essential workplaces have access to key supplies like hand sanitizer, disinfectant and cleaning supplies, as well as relevant protective equipment?
- Is there a testing plan for essential workers who are sick or symptomatic?
 Is there a plan for supportive quarantine/isolation for essential workers?

According to local Health Department permit data available from the Environmental Health Bureau, essential workplaces include, but are not limited to, permitted restaurants, gas stations, agricultural industrial businesses and schools. The number and identity of permitted essential workplaces are on record with the Environmental Health Bureau.

Local and State Health Officer Orders provide requirements for essential businesses to operate in a manner that reduces the spread of COVID-19. Local guidance documents for essential businesses have been developed by the Environmental Health Bureau, the Public Health Bureau, the Agricultural Commissioner's Office in coordination with major local agricultural industry stakeholders, the Office of Emergency Services and other State and local agencies and organizations. These documents have been distributed in the field, on-line, through the media and via US Postal Service. Environmental Health Specialists conduct inspections and educate employers and management on sector specific and general guidance to prevent COVID-19. The following guidance documents are attached to this attestation as Appendix V:

- Guidance for Farmer's Markets
- COVID-19 Infection Prevention and Control Guidance for Employers that Offer
- Employee Housing
- Social Distancing Protocol for Employee Housing
- COVID-19 Shelter in Place Expectations for Food Facilities

In addition to Health Officer Orders and local protocols and guidance, the County has referred Stage 1 businesses and employees to sector specific guidance at

https://covid19.ca.gov/industry-guidance/. Future State guidance will be provided for other sectors of commerce and society such as schools.

Medical and non-medical essential businesses can purchase cleaning supplies and disinfectants from vendors or directly through retail outlets. The Logistics Section of the County EOC maintains an inventory of available supplies for County essential workplaces. The Medical Health Operational Area Coordinator (MHOAC) at the Emergency Operation Center (EOC) receives and tracks protective equipment, sanitizer, cleaning and disinfectant resource requests from essential businesses. The MHOAC has established on on-line mechanism for essential health care businesses to submit requests for supplies. The MHOAC processes the requests and responds to requests as supplies are available. The MHOAC and EOC also maintain a list of vendors and checks status of product availability and shares this information with essential businesses to use to purchase hand sanitizer, disinfectant and cleaning supplies, as well as relevant protective equipment.

The Monterey County Health Department COVID-19 Surveillance Plan includes guidance for testing of sick or symptomatic essential workers. Symptomatic essential workers are encouraged to contact their healthcare provider for health advice and guidance. Symptomatic workers may be referred to health facilities that also collect specimens for COVID-19 testing such as hospital emergency departments. Sick workers with mild symptoms may choose to be tested at the State sponsored OptumServe sites or the newly opened Planned Parenthood Mar Monte sites. These sites do not provide health evaluations and there is no charge to the individual for collecting specimens or testing. Several commercial labs and hospitals are now performing viral testing. The County Public Health Laboratory performs the COVID-19 polymerase chain reaction viral test and reports results to the ordering physician and to Public health within 12-24 hours of receipt of specimens, which allows for rapid case contact and isolation. Prompt identification and isolation is essential to preventing further spread of the virus and keeping our essential workplaces operating.

Based on local experience, nearly all essential workers can quarantine and isolate at home. Essential health care workers that cannot quarantine or isolate at home may request assistance with temporary lodging through the MHOAC. Health care providers caring for essential workers that cannot isolate at their residence may contact Public Health to request assistance with placement. If Public Health confirms that the essential worker cannot isolate at their residence, then Public Health will refer the individual to the EOC who will arrange for isolation at a predetermined alternative shelter site. Food, social services, housekeeping and transportation are provided at no cost to each participating individual.

In addition to County resources to temporarily shelter essential workers needing isolation or quarantine, the Grower-Shipper Association of Central California has united several of its members to offer temporary shelter to isolate their employees that are diagnosed with COVID-19 that cannot isolate due to congregate living settings. Public Health, the EOC and the Association coordinate efforts to identify the most appropriate temporary housing option for employees of the participating Association members.

- Are there industries in the county that deserve special consideration in terms of mitigating the risk of COVID-19 transmission, e.g. agriculture or manufacturing?
- Are there industries in the county that make it more feasible for the county to increase
 the pace through Stage 2, e.g. technology companies or other companies that have
 a high percentage of workers who can telework?

Maintaining safe and healthy work environments for our farmworkers and other agricultural employees has always been a priority for Monterey County. To prevent the spread of COVID-19 and minimize the impact of COVID-19 in agricultural workplaces, Monterey County leadership and the agricultural industry collaborated to create the Advisory for Agricultural Worker Protection During COVID-19 Crisis on the Central Coast of California, which was recently updated May 5, 2020 to further protect worker health, safety, and hygiene. Agriculture worker advocacy groups including local universities, hospitals, and health care facilities have conducted COVID-19 education in the fields and have provided PPE to this sector. Monterey County is committed to maintain the nation's food supply chain while protecting the health of our workers and the broader community.

Currently there are 45 employee housing operators with 2,769 employees, which does not include family members. Attached is the Ag Employee List Employee Housing document. Housing and Community Development currently has an additional 110 employee housing operators with an unknown number of employees. Attached is the Ag Employee List Employee Housing Community Development. The following notifications have been provided to all agricultural field operations and employee housing facilities and are attached to this attestation as Appendix VI:

- Ag Worker Safety Protocol Sign
- Ag Worker Safety Protocol Letter
- Social Distancing Protocol
- Ag Worker Protection Advisory

Additionally, Monterey County is home to a robust tourism business sector. Representatives from the hospitality sector meet locally to develop and promote industry standards to promote COVID-19 responses in this sector.

Community Engagement

- Has the county engaged with its cities?
- Which key county stakeholders should be a part of formulating and implementing the proposed variance plan?
- Have virtual community forums been held to solicit input into the variance plan?
- Is community engagement reflective of the racial, ethnic, and linguistic diversity of the community?

The County has regular communication with its City elected officials and managers. Board of Supervisors host regular "Hot Topics" or "Fireside Chats" for District elected officials and residents. County staff have been regular presenters on these virtual forums. Additionally, other community virtual forums have been coordinated by the

Board of Supervisors in partnership with City Mayors and local media in English and Spanish.

Chair Chris Lopez formed an Executive Briefing for all area elected officials to include City Mayors, County Treasurer/Tax Collector, County Assessor/Recorder, County District Attorney, County Auditor-Controller, and State Representatives and Senators. This Briefing convenes weekly to provide a forum for elected officials to provide input into the County's COVID-19 Recovery efforts and to have their questions answered directly by the County Administrative Officer, County Health Officer, and County Health Director.

Healthcare partners are critical in our County's response and recovery efforts. Weekly virtual convenings between Health Department and healthcare/hospital staff take place and this forum will be used for ongoing discussions on implementation of the variance plan. In addition, weekly virtual convenings between Health Department and skilled nursing facility staff occur. Once the County drafts its Attestation and Containment Plan, it will be shared with these healthcare/hospital and skilled nursing facility partners for input as they are instrumental in assuring the County's ability to meet Variance Indicators.

Lastly, Monterey County formed Ad Hoc Committees comprised of industry leaders, labor leaders, and others to prepare for a broader reopening of our economy. These Committees are tasked with developing draft plans, protocols, recommendations, and advisories for their sector/industry and presenting recommendations to Monterey County Health officials for review. The following Ad Hoc Committees are staffed by the Board of Supervisors.

- Agriculture
- Construction
- Hospitality
- Non-Hospital Medical/Personal Services
- Religious Organizations

Our community engagement efforts are reflective of the demographics of our community.

Relationship to Surrounding Counties

- Are surrounding counties experiencing increasing, decreasing or stable case rates?
- Are surrounding counties also planning to increase the pace through Stage 2 of California's roadmap to modify the Stay-at-Home order, and if so, on what timeline? How are you coordinating with these counties?
- What systems or plans are in place to coordinate with surrounding counties (e.g. health care coalitions, shared EOCs, other communication, etc.) to share situational awareness and other emergent issues.
- How will increased regional and state travel impact the county's ability to test, isolate, and contact trace?

Monterey County Health officials have regular communication with Health Department colleagues in surrounding counties including Santa Cruz, San Benito, Santa Clara, and San Luis Obispo. With the exception of Santa Clara County, the other surrounding counties are experiencing a decreasing or stable case rate. San Benito County and San Luis Obispo County have submitted their Attestation Form and are advancing through State 2 of California's roadmap to modify the Stay-at-Home order. Santa Cruz County is on a similar timeline as ours and plans on increasing pace through Stage 2 in the coming couple of weeks. We are coordinating with Santa Cruz County on the drafting of the Attestation Form and Containment Plan and proposed supplement to local Shelter-in-Place Orders.

Recently a formal discussion took place between San Benito, Santa Cruz, and Monterey County health departments' staff to discuss plans for reopening, coordinating promotion of OptumServe testing sites, and coordination on meeting housing needs of agricultural workers. The discussion was so valuable that the group agreed to hold regular meetings for further coordination amongst these three counties. After Monterey and Santa Cruz counties finalize their Attestation Forms, all three counties will be able to advance through Stage 2. These discussions will be instrumental in coordinating communication, establishing some consistency in advancing through Stage 2, better coordination in meeting housing needs for agricultural employees with COVID-19 or those considered close contacts, ability to coordinate on data platforms, and development of infographics and other public facing documents.

As restrictions are eased, Monterey County must coordinate with surrounding counties to develop plans and strategies to address any impacts resulting from increased travel across county borders which may include an increase in case and hospitalization rates. With ongoing support from the State, Monterey County will maintain adequate testing capacity. The County will continue to train and reassign individuals to the investigation and tracing team to reach and isolate a high percentage of COVID-19 cases, and reach and quarantine a high percentage of close contacts.

In addition to your county's COVID-19 VARIANCE ATTESTATION FORM, please include:

- Letter of support from the County Board of Supervisors
 - Appendix VII
- Letter of support from the local hospitals or health care systems. In the event that the county does not have a hospital or health care system within its jurisdiction, a letter of support from the relevant regional health system(s) is also acceptable.
 - o Appendix VIII
- County Plan for moving through Stage 2
 - o Appendix IX

All documents should be emailed to Jake Hanson at <u>Jake.Hanson@cdph.ca.gov.</u>

I Edward L. Moreno, MD, MPH, hereby attest that I am duly authorized to sign and act on behalf of Monterey County. I certify that Monterey County has met the readiness criteria outlined by CDPH designed to mitigate the spread of COVID-19 and that the information provided is true, accurate and complete to the best of my knowledge. If a local COVID-19 Containment Plan is submitted for Monterey County, I certify that it was developed with input from the County Board of Supervisors/City Council, hospitals, health systems, and a broad range of stakeholders in the jurisdiction. I acknowledge that I remain responsible for implementing the local COVID-19 Containment Plan and that CDPH, by providing technical guidance, is in no way assuming liability for its contents.

I understand and consent that the California Department of Public Health (CDPH) will post this information on the CDPH website and is public record.

Printed Name <u>Edward L. Moreno, MD, MPH</u>	
Signature	
Position/Title <u>Health Officer and Director of Public Health</u>	
Date _ 5/27/20	

VARIANCE TO STAGE 2 OF CALIFORNIA'S ROADMAP TO MODIFY THE STAY-AT-HOME ORDER



COVID-19 VARIANCE ATTESTATION FORM

FOR Monterey County

Appendix I

- A. Social Distancing Protocol
- B. Reopening Guidelines for Restaurants During COVID-19 Outbreak
- C. Reopening Guidelines for Essential Businesses During COVID-19 Outbreak
- D. EHB Shelter in Place Letter
- E. Food Delivery and Take Out Guidance
- F. EHB Field Update
- G. Guidance for Farmer's Markets
- H. COVID-19 Infection Prevention and Control Guidance for Employers that Offer Employee Housing
- I. Social Distancing Protocol for Employee Housing
- J. COVID-19 Shelter in Place Expectations for Food Facilities



MONTEREY COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH BUREAU

1270 Natividad Road, Salinas, CA 93906, (831) 755-4508, FAX (831)755-455 EHB COVID19 Information Site: mtyhd.org/covid-19-EHB

Social Distancing Protocol

Business Name:		
Facility Address:		

Signage:

- Signage at each public entrance of the facility to inform all employees and customers that they should:
 - avoid entering the facility if they have a cough or fever
 - sneeze and cough into a cloth or tissue, or if not available, into one's elbow
 - not shake hands or engage in any unnecessary physical contact
- Signage posting a copy of the social distancing protocol at each public entrance to the facility.
- Signage of "No Dine In, Take Out Only" at each public entrance to the facility.

Measures to Protect Employee Health (Check all that apply to the facility):

- o Everyone who can carry out their work duties from home has been directed to do so.
- All employees have been told not to come to work if sick.
- Symptom checks are being conducted before employees may enter the work space.
- All desks or individual work stations are separated by at least six feet.
- Break rooms, bathrooms, and other common areas are being disinfected frequently.
- Disinfectant, soap and water, hand sanitizer, and related supplies are available to all employees at the following location(s):
 - Cashier/Check Out Area
 - Food Preparation Area
 - o Bathroom
 - Warewashing Area
- Copies of this protocol has been distributed to all employees.

Measures to Prevent Crowds from Gathering (check all that apply to the facility):

0	Limit the number of customers in the store at any one time to allow for customers and employees to easily maintain at least 6 feet distance from one another at all practicable times.
	o MAX number of customers:people
0	Post an employee at the door to ensure that the maximum number of customers in the facility set forth above is not exceeded.
0	Placing per person limits on goods that are selling out quickly to reduce crowds and lines.
0	Optional—describe other measures.
Meas	ures to Keep People At Least Six Feet Apart (check all that apply to the facility):
0	Placing signs outside the store reminding people to be at least six feet apart, including when in line.
0	Placing tape or other markings at least six feet apart in customer line areas inside the store and on sidewalks at public entrances with signs directing customers to use the markings to maintain distance.
0	Separate order areas from delivery areas to prevent customers from gathering.
0	All employees have been instructed to maintain at least six feet distance from customers and from each other, except employees may momentarily come closer when necessary to accept payment, deliver goods or services, or as otherwise necessary.
0	Optional – describe other measures.
Measi	ares to Prevent Unnecessary Contact (check all that apply to the facility):

Mea

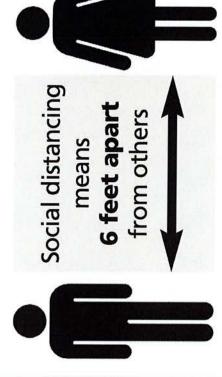
- o Preventing people from self-serving any items that are food-related.
 - o Lids for cups and food-bar type items are provided by staff.
 - o Bulk-item food bins are not available for customer self-service use.
- $\circ \quad \text{Not permitting customers to bring their own bags, mugs, or other reusable items from home.} \\$

Providing for contactless payment systems or, if not feasible, sanitizing payment systems regularly. Describe:	
Optional – describe other measures.	
ures to Increase Sanitization (check all that apply to the facility):	
Disinfecting wipes that are effective against COVID-19 are available near shopping carts and shopping baskets.	
Employee(s) assigned to disinfect cars and baskets regularly.	
Hand sanitizer, soap and water, or effective disinfectant is available to the public at or near the entrance of the facility, at checkout counters, and anywhere else inside the store or immediately outside where people have direct interactions.	
Disinfecting all payments portals, pens, and styluses after each use.	
Disinfecting all high-contact surfaces frequently.	
Optional – describe other measures.	

Any additional measures not included here should be listed on separate pages, which the business should attach to this document*

For everyone's health and safety

Please keep your social distance







MONTEREY COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH BUREAU 1270 Natividad Road Salinas. CA 93906

Direct: (831) 755-4505, Fax: (831)755-4880

EHB COVID-19 Information Site: mtyhd.org/covid-19-EHB

Reopening Guidelines for Restaurants During COVID-19 Outbreak

According to the Food and Drug Administration (FDA) and the Centers for Disease Control (CDC), currently there is no evidence to support transmission of COVID-19 associated with food. Existing food safety requirements are already very stringent and reduce the likelihood of foodborne disease transmission. Additional measures can be taken to reduce the risk of transmitting COVID-19 from touching surfaces or from person-to-person spread through respiratory droplets.

What should an Employer do to protect themselves and their customers?

- Restaurant owners should continually monitor international (World Health Organization (WHO)), Federal (CDC), Occupational Safety and Health Administration (OSHA), state, and local guidelines for changes in recommendations, cleaning strategies, and other best management practices.
- Employers should also consider developing a team to monitor, assess, and implement new strategies as they become available.
- In addition, employers should consider the following strategies for reducing the risk of COVID-19 transmission regarding:
 - Employee Wellness, Personal Hygiene, Personal Protective Equipment, Physical Distancing, Communication, Enhanced Cleaning Practices, Disinfection, Restrooms, and Ventilation
- > Due to the wide variety of restaurants, functions, and sizes, it may not be possible for establishments to implement all the following, however, trying to tackle the problem from multiple angles can help reduce health risks

I. <u>Employee Health and Wellness</u> -

- Continue your employee health policy of excluding or restricting food handlers with vomiting, diarrhea, fever with sore throat, infected wounds on the hands and arms, and jaundice (yellow tinting to skin/eyes).
- Consider using an employee screening questionnaire for COVID-19 symptoms at the beginning of each person's shift.
- Employees with laboratory-confirmed COVID-19 shall be excluded. If an employee is confirmed to have COVID-19, employers should inform fellow employees of their possible exposure to COVID-19 in the workplace but maintain confidentiality.
- Employees who have symptoms of fever, cough, or shortness of breath should notify their supervisor and stay home.
 - Employees should not return to work until ALL THREE things have happened:
 - No fever for at least three full days without the use medicine that reduces fever AND
 - 2. Other symptoms such as cough or shortness of breath have improved AND
 - 3. At least 7 days have passed since the first symptoms appeared.
- Employees who appear to have symptoms upon arrival at work or who become sick during the shift should immediately be sent home and follow CDC recommendations for "What To Do if You Are Sick."
- Employees who are well but who have a household member sick with COVID-19 should selfquarantine for 14 days and monitor their health. They should call their healthcare provider if they develop symptoms suggestive of COVID-19 during their self-isolation.

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II. Personal Hygiene -

- Wash hands before starting food preparation tasks. Establish a "before and after service" hand washing or sanitizing for all staff including bar staff.
- Wear single-use gloves or use other barriers while working with ready-to-eat (RTE) foods.
 - Wash hands prior to putting on gloves.
- Wash hands or use an alcohol-based hand sanitizer with at least 60% alcohol after in-person transactions.
 - o Hand sanitizer is **not** to be used to replace proper hand washing.
- Staff should wash hands between serving and clearing dishes or establish a dedicated person to clear dishes and wait staff arrange for dish pick up if a customer requests their dishes cleared
- Provide hand-washing stations at the front of the establishment and throughout the
 establishment for customers to wash hands before being seated or when needed, or
 alternatively, hand sanitizer if not feasible.
- Consult the <u>CDC webpage</u> for information for good hygiene practices and personal hygiene.

III. Personal Protective Equipment -

- Require gloves for all back of house (BOH) staff and ensure the gloves are changed per current
 industry standards. For more information and training to use disposable gloves, refer to the <u>CDC</u>
 webpage and guidelines.
- Provide instruction and training to employees on how to:
 - o Handle their work clothing properly at home if laundry service is not provided
 - Properly put on and remove gloves.
 - Clean and disinfect tables according to product specifications
- Although not necessary if hand-washing protocols are rigorously followed, consider providing gloves to servers.
 - If they are worn, they must be changed regularly and are <u>not</u> a substitution for handwashing.
- Provide training for employees and management of the proper use of face coverings per the <u>CDC</u> webpage and guidelines.
- Provide Safety Data Sheets for cleaning chemicals and ensure employees are aware of the hazards of use.
- **IV.** <u>Social Distancing</u> The virus is thought to spread mainly from person-to-person through respiratory droplets produced when an infected person speaks, coughs, or sneezes. Protect yourself and others with the following guidelines:

A. For employees

- Employee pre-shift meetings and trainings should be conducted virtually or in areas that allow for appropriate physical distancing between employees.
- Eliminate person-to-person contact for delivery of goods whenever possible. Designate
 drop-off locations to receive deliveries away from high traffic areas. Maintain physical
 distance of at least six feet with delivery drivers. Takeout food items should be made
 available using contactless pick-up and delivery protocols.
- Reconfigure office spaces, lobbies, beverage bars, kitchens and workstations, host stand areas, and other spaces wherever possible to allow for at least six feet of distance between people dining, working, and passing through areas for entry and exit.
- If feasible, restrict the number of employees in shared spaces, including kitchens, break rooms, and offices to maintain at least a 6-foot distance between people.
- Close areas where customers may congregate or touch food or food ware items that other guests may use. Provide these items to guests individually and discard or clean and disinfect after each use,

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as appropriate. This includes but is not limited to:

- o Self-service areas with condiment caddies, utensil caddies, napkins, lids, straws, water pitchers, to-go containers, etc.
- o Self-service machines including ice, soda, frozen yogurt dispensers, etc.
- o Self-service food areas such as buffets, salsa bars, salad bars, etc.

B. For customers

- Limit the number of customers dining at one time. Consider starting with a "Reservation Only policy" to start. Limit the group size to six or less
- Mark distances of 6 feet for customers waiting to be seated. Consider having customers wait in their cars until called to be seated
- If possible, use phone app technology to alert patrons when their table is ready to avoid touching and use of "buzzers."
- Try to distance tables or customers so that the nearest customer at one table is at least to 6 feet from another customer at another table.
 - If tables cannot be moved, consider putting signage on every other table or booth marking them as "PHYSICAL DISTANCE TABLE" or "RESERVED FOR YOUR SAFETY".
 Consider Plexiglass partitions between booths as an alternative.
- Place plastic partitions between employees and customers wherever possible (e.g., fast food windows, host stands, and bars).
- In lieu of bars, consider providing table-only service for alcoholic beverages.
 - Alternatively, consider handing out signs at the bar that customers can use to put on either side of them to maintain physical distancing.
- Consider non-traditional ordering and payment processing to minimize contact time between servers and customers.
 - Consider an app-based system
 - Consider writing a numbered menu on a wall/ large board that can be easily communicated at a distance.
 - Encourage credit card use over cash, when possible.
 - Go electronic, if possible. Limit payments and receipts to online transactions.
- Effective 12:01 a.m. on Thursday, April 30, 2020, the Monterey County Health Officer is requiring residents to wear a face covering when going out into the public to perform essential activities to help stop the spread of COVID-19. For more information regarding this order go to:
 - https://www.co.monterey.ca.us/Home/Components/News/News/7283/1336

V. <u>Communication</u> -

- Communicate to the customers what the restaurant is doing to mitigate the spread of COVID-19 (e.g., disinfection routine, health policies for staff, and health & safety measures in place).
 - Consider communicating to diners when dining out may not be a good option (e.g. taking care of someone who is COVID-19 positive, exhibiting symptoms of COVID-19, being in a high-risk category, etc.).
 - Consider placing signage on tables to show that they have been disinfected after previous customers.
- Communicate that the restaurant has the right to refuse service to anyone exhibiting symptoms or not following guidelines (e.g., physical distancing, wearing a face mask, etc.).
- Platforms for communication could include websites, reservation processes, hand-outs, and outdoor signage. Refer to these <u>CDC guidelines</u> for more information.

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VI. Enhanced Cleaning Practices

- Select appropriate disinfectants to consider effectiveness and safety
 - The U.S. Environmental Protection Agency (EPA) has developed a <u>list of products</u> that meet EPA's criteria for use against SARS-CoV-2.
 - Review product labels and Safety Data Sheet and follow manufacturer specifications
- Establish a disinfection routine no more wet rag approach (use disposable products).
 - Ensure disinfection protocols follow product instructions for application and contact time.
 - Consider establishing a single staff position whose responsibility is to disinfect per shift rotation. This person should be continuously cleaning and visible to customers.
 - Each table, chairs (as possible), highchairs, booster seats, and partitions should be disinfected after each customer.
 - Consider using a checklist or audit system to track how often cleaning is conducted.
- Consider covering chairs in a non-porous material for easy cleaning.
- Menus should be non-porous and disinfected between use. If paper menus are used, make them single use only. Consider alternatives like a menu board or phone app.
- Apron, towels, work clothing, etc. should be placed in trash bags and treated as potentially contaminated and laundered.
- Take steps to ensure that all water systems and features (for example, drinking fountains, decorative fountains) are safe to use after a prolonged facility shutdown to minimize the risk of <u>Legionnaires' disease</u> and other diseases associated with water.
- Ensure all reusable food service items are handled with gloves and washed with dish soap and hot water or in a dishwasher. Employees should wash their hands after removing their gloves and after directly handling used food service items.
- Pre-roll utensils in napkins prior to use by customers. Employees must wash hands before pre-rolling utensils in napkins. The pre-roll should then be stored in a clean container. After customers are seated, the pre-roll should be put on the table by an employee who recently washed their hands.
- Discontinue pre-setting tables with napkins, cutlery, glassware, food ware, etc. These should be supplied individually to customers as needed. Do not leave card stands, flyers, napkin holders, or other items on tables.
- Do not leave out after-meal mints, candies, snacks, or toothpicks for customers. Offer them with the check or provide only on request.
- VII. <u>Disinfection</u> Disinfection is recommended for rooms or areas that people with suspected or confirmed COVID-19 have visited and for high touch surfaces. CDC guidelines at "<u>Environmental Cleaning and Disinfection Recommendations</u>" provide instructions on how to disinfect with a product that is on the <u>EPA's List N</u>.
 - High touch surfaces include, but are not limited to:
 - Light switches, host stands, equipment handles, check-out counters, order kiosks, ATM PIN pads, receipt trays, bus tubs, serving trays, phones, waiting area chairs, workstations, doorknobs, door handles and door push plates, pens, soda fountain touchpoints, electronic payments and point of sale terminals, and countertops or racks used to stage orders.
 - It is important to follow the manufacturer's directions on how to apply the disinfectant, and train employees on how to use the product (e.g. concentration, application method, personal protective equipment, and contact time, etc.).
 - o If surfaces are dirty, they should be cleaned using soap and water prior to disinfection.
 - After disinfection-level chemicals are used on food contact surfaces, they must be washed, rinsed, and sanitized with chemicals and concentrations approved for food contact surfaces.

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VIII. Restrooms -

- Doors to multi-stall restrooms should be able to be opened and closed without touching handles if possible.
 - o Place a trash can by the door if the door cannot be opened without touching the handle.
- For single restrooms, provide signage and materials (paper towels and trash cans) for individuals to
 use without touching the handles, and consider providing a key so disinfection measures can be
 better controlled.
- Place signs indicating that toilet lids (if present) should be closed before flushing.
- Place signs asking customer and employees to wash hands before and after using the restroom.
- Provide paper towels in restrooms and disconnect or tape-off hand air dryers if possible
- Maintain a thorough cleaning and disinfection schedule for the restroom.

IX. Ventilation -

- Get fresh air to the customers and staff and properly utilize ventilation system. Some ways to do this
 or seek help:
 - Encourage outdoor dining, and open doors and windows if possible.
 - Maximize fresh air through your ventilation system if possible
 - Maintain relative humidity at 40-60%.
- Ensure that all doors and windows used to ventilate the restaurant are properly equipped with 16x16 inch mesh screens to prevent entrance of vectors or vermin
- If doors and windows are equipped with automatic air curtains, ensure they are routinely cleaned and sanitized to prevent spread of airborne particles
- If fans such as pedestal fans or hard mounted fans are used in the restaurant, take steps to minimize
 air from fans blowing from one person directly at another individual. If fans are disabled or removed,
 employers should remain aware of, and take steps to prevent, heat hazards such as heat exhaustion.

For more information, please call the Monterey County Health Department COVID-19 Hotline at 831-769-8700 or 831-755-4521 or email covid-19@co.monterey.ca.us.

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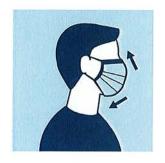
MONTEREY COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH BUREAU 1270 Natividad Road, Salinas, CA 93906

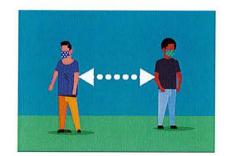
Phone: (831) 755-4505 Fax: (831) 755-4880

EHB COVID-19 Information Site: mtyhd.org/covid-19-EHB

Best Practices for Re-Opening Dine-In Restaurants During the COVID-19 Pandemic – Food Safety Checklist

This document provides guidance for dine-in restaurants, brewpubs, breweries, bars, pubs, and wineries to support a safe, clean environment for workers and customers. This is not a comprehensive list. Owners and operators are encouraged to modify their own checklist specifically for their operations where possible.







For brewpubs, breweries, bars, pubs, and wineries:

- Any brewpubs, breweries, bars, pubs, and wineries that offer sit-down, dine-in meals shall refer to the guidelines below. Alcohol can only be sold in the same transaction as a meal.
- This guidance is not intended for concert, performance, or entertainment. Those types of
 establishments shall remain closed until further notice. Establishments that serve full meals
 must discontinue this type of entertainment until these types of activities can resume
 modified or full operation.
- Brewpubs, breweries, bars, and pubs that <u>do not</u> <u>offer sit-down, dine-in meals shall remain</u> closed in accordance with the current <u>Shelter in Place Order</u> for Monterey County.

For more information, please call the Monterey County Health Department COVID-19 Hotline at 831-769-8700 or 831-755-4521 or email covid-19@co.monterey.ca.us.

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Employee Health and Wellness
Do you have a protocol to check employee health and personal hygiene practices within your food establishment? Continue your employee health policy of excluding or restricting food handlers with the following symptoms: • Vomiting, diarrhea, fever with sore throat, infected wounds on the hands and arms,
and jaundice (yellow tinting to skin/eyes).
Are you following <u>CDC guidance</u> and practices for employee health checks/screenings?
Have you checked <u>CDC</u> and local regulatory/health authority guidance for employees returning back to work?
Employees with laboratory-confirmed COVID-19 shall be excluded. If an employee is confirmed to have COVID-19, employers should inform fellow employees of their possible exposure to COVID-19 in the workplace but maintain confidentiality.
 Employees who have symptoms of fever, cough, or shortness of breath should notify their supervisor and stay home. Employees should not return to work until <u>ALL THREE</u> things have happened: No fever for at least three full days without the use medicine that reduces fever <u>AND</u> Other symptoms such as cough or shortness of breath have improved <u>AND</u> At least 7 days have passed since the first symptoms appeared.
Employees who appear to have symptoms upon arrival at work or who become sick during the shift should immediately be sent home and follow CDC recommendations for "What To Do if You Are Sick."
Employees who are well but who have a household member sick with COVID-19 should self- quarantine for 14 days and monitor their health. They should call their healthcare provider if they develop symptoms suggestive of COVID-19 during their self-isolation.
Personal Hygiene
Require employees to avoid handshakes and similar greetings that break physical distance.
Food, beverages, food ware, PPE, etc., should not be shared between employees.
Wash hands before starting food preparation tasks. Establish a "before and after service" hand washing or sanitizing for all staff including bar staff.
Wear single-use gloves or use other barriers while working with ready-to-eat (RTE) foods. Wash hands prior to putting on single-use gloves.
Wash hands for 20 seconds handwashing with soap and warm water , including scrubbing with soap or use an alcohol-based hand sanitizer with at least 60% alcohol after in-person transactions.
Refer to <u>CDC guidelines</u> for using alcohol-based sanitizers. Hand sanitizers <u>do not</u> replace proper hand washing with soap and warm water.
Consult the <u>CDC webpage</u> for information for good hygiene practices and personal hygiene.

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Personal Protective Equipment	
 Provide training for employees and management of the proper use of face coverings per the CDC webpage and guidelines. Proper use of face coverings, including: Face coverings do not protect the wearer and are not personal protective equipment (PPE). Face coverings can help protect people near the wearer, but do not replace the need for physical distancing and frequent handwashing. Employees should wash or sanitize hands before and after using or adjusting face coverings. Avoid touching the eyes, nose, and mouth. Face coverings should be washed after each shift 	
Is there a plan or policy for, and an adequate supply of, personal protective equipment (PPE) and/or cloth face coverings?	
Require gloves for all back of house (BOH) staff and ensure the gloves are changed per current industry standards. For more information and training to use disposable gloves, refer to the CDC webpage and guidelines.	
 Provide instruction and training to employees on how to: Handle their work clothing properly at home if laundry service is not provided Properly put on and remove gloves. Clean and disinfect tables according to product specifications 	
Although not necessary if hand-washing protocols are rigorously followed, consider providing gloves to servers. If they are worn, they must be changed regularly and are <u>not</u> a substitution for handwashing.	
Social Distancing for Employees and Staff	
Employee pre-shift meetings and trainings should be conducted virtually or in areas that allow for appropriate physical distancing between employees if possible.	
Eliminate person-to-person contact for delivery of goods whenever possible. Designate drop-off locations to receive deliveries away from high traffic areas. Maintain physical distance of at least six feet with delivery drivers. Takeout food items should be made available using contactless pick-up and delivery protocols.	
Reconfigure office spaces, lobbies, beverage bars, kitchens and workstations, host stand areas, and other spaces wherever possible to allow for at least six feet of distance between people dining, working, and passing through areas for entry and exit if possible.	
If feasible, restrict the number of employees in shared spaces, including kitchens, break rooms, and offices to maintain at least a 6-foot distance between people.	
Close areas where customers may congregate or touch food or food ware items that other guests may use. Provide these items to guests individually and discard or clean and disinfect after each use, as appropriate. This includes but is not limited to: • Self-service areas with condiment caddies, utensil caddies, napkins, lids, straws, water pitchers, to-go containers, etc. • Self-service machines including ice, soda, frozen yogurt dispensers, etc. • Self-service food areas such as buffets, salsa bars, salad bars, etc.	

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Social Distancing for Customers
Limit the number of customers dining at one time. Consider starting with a "Reservation Only policy" to start. Limit the group size to six or less. Encourage reservations to allow for time to disinfect restaurant areas and provide guidance via digital platforms if possible, to customers for physical distancing while at the restaurant.
Mark distances of six feet for customers waiting to be seated. Consider having customers wait in their cars until called to be seated
If possible, use phone app technology to alert patrons when their table is ready to avoid touching and use of "buzzers" or similar electronic devices.
 Try to distance tables or customers so that the nearest customer at one table is at least to 6 feet from another customer at another table. If tables cannot be moved, consider putting signage on every other table or booth marking them as "PHYSICAL DISTANCE TABLE" or "RESERVED FOR YOUR SAFETY". Consider Plexiglass partitions between booths as an alternative.
Place plastic partitions between employees and customers wherever possible (e.g., fast food windows, host stands, cash registers, and bars).
 Consider non-traditional ordering and payment processing to minimize contact time between servers and customers. Consider an app-based system Consider writing a numbered menu on a wall/large board that can be easily communicated at a distance. Encourage credit card use over cash, when possible.
Go electronic, if possible. Limit payments and receipts to online transactions. Provide takeout, delivery, and drive through antique for each antique through antique for each antique through the same through the same transactions.
Provide takeout, delivery, and drive through options for customers when possible. Any area where guests or employees' queue should also be clearly marked for appropriate physical distancing. This includes check-stands and terminals, deli counters and lines, restrooms, elevator lobbies, host stands and waiting areas, valet drop off and pickup, and any other area where customers congregate.
Discontinue seating of customers where customers cannot maintain six feet of distance from employee work and food and drink preparation areas.
Limit the number of patrons at a single table to a household unit or patrons who have asked to be seated together. People in the same party seated at the same table do not have to be six feet apart. All members of the party must be present before seating and hosts must bring the entire party to the table at one time.
Has the facility taken measures (e.g. tape on floors/sidewalks, partitions, and signage on walls) to minimize face-to-face contact that allows, to the extent possible, at least a 6-foot distance between workers, customers, and visitors?
Effective 12:01 a.m. on Thursday, April 30, 2020, the Monterey County Health Officer is requiring residents to wear a face covering when going out into the public to perform essential activities to help stop the spread of COVID-19. For more information regarding this order go to: https://www.co.monterey.ca.us/Home/Components/News/News/7283/1336

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	Communication
	 Communicate to the customers what the restaurant is doing to mitigate the spread of COVID-19 (e.g., disinfection routine, health policies for staff, and health & safety measures in place). Consider communicating to diners when dining out may not be a good option (e.g. taking care of someone who is COVID-19 positive, exhibiting symptoms of COVID-19, being in a high-risk category, etc.). Consider placing signage on tables to show that they have been disinfected after previous customers.
	Communicate that the restaurant has the right to refuse service to anyone exhibiting symptoms or not following guidelines (e.g., physical distancing, wearing a face mask, etc.)
	Platforms for communication could include websites, reservation processes, handouts, and outdoor signage. Refer to these <u>CDC guidelines</u> for more information.
e ar a	Enhanced Cleaning Practices
	Are high-touch areas and equipment cleaned and disinfected (e.g. doors, door handles, light switches, host stands, equipment handles, check-out counters, order kiosks, ATM PIN pads, receipt trays, bus tubs, serving trays, phones, waiting area chairs)?
	Are high touch self-service containers and items requiring frequent hand contact removed from use? These should be supplied as needed to customers and disinfected after each use. (e.g. condiments such as ketchup bottles, salt/pepper shakers, sugar packets, syrup bottles, hot sauce containers, and reusable menus.)
	Consider covering chairs in a non-porous material for easy cleaning.
	Menus should be non-porous and disinfected between use. If paper menus are used, make them single use only. Consider alternatives like a menu board or phone app.
	Aprons, towels, work clothing, etc. should be placed in trash bags and treated as potentially contaminated and laundered.
	Take steps to ensure that all water systems and features (for example, drinking fountains, decorative fountains) are safe to use after a prolonged facility shutdown to minimize the risk of <u>Legionnaires' disease</u> and other diseases associated with water.
	Ensure all reusable food service items are handled with gloves and washed with dish soap and hot water or in a dishwasher. Employees should wash their hands after removing their gloves and after directly handling used food service items.
	Discontinue pre-setting tables with napkins, cutlery, glassware, food ware, etc. These should be supplied individually to customers as needed. Do not leave card stands, flyers, napkin holders, or other items on tables.
	Takeout containers must be filled by customers and available only upon request.
	Do not leave out after-meal mints, candies, snacks, or toothpicks for customers. Offer them with the check or provide only on request.
	Avoid sharing audio equipment, headsets, clipboards, phones, tablets, laptops, desks, pens, and other work supplies wherever possible. Never share PPE .
	Pre-roll utensils in napkins prior to use by customers. Employees must wash hands before pre-rolling utensils in napkins. The pre-roll should then be stored in a clean container. After customers are seated, the pre-roll should be put on the table by an employee who recently washed their hands.

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Disinfection
Are common use areas such as restrooms being cleaned and disinfected_more frequently? Refer to CDC's guidance for cleaning and disinfecting.
Disinfection is recommended for rooms or areas that people with suspected or confirmed COVID-19 have visited and for high touch surfaces. CDC guidelines at "Environmental Cleaning and Disinfection Recommendations" provide instructions on how to disinfect with a product that is on the EPA's List N
Are necessary sanitizers and disinfectants that meet EPA's criteria for use against SARS-CoV-2 available and used per label instructions to clean and disinfect the facility during hours of operation?
 Establish a disinfection routine - no more wet rag approach (use disposable products). Ensure disinfection protocols follow product instructions for application and contact time. Consider establishing a single staff position whose responsibility is to disinfect per shift rotation. This person should be continuously cleaning and visible to customers. Each table, chairs (as possible), highchairs, booster seats, and partitions should be disinfected after each customer. Consider using a checklist or audit system to track how often cleaning is conducted.
Are food contact surfaces and counters cleaned and sanitized? (Wash, rinse, and sanitize food contact surfaces, food preparation surfaces, and beverage equipment.)
Dirty linens used at dining tables such as tablecloths and napkins should be removed as needed and transported from dining areas in sealed bags. Employees should wear gloves when handling dirty linens. Remove gloves and wash hands after handling dirty linens.
Staff should wash hands between serving and clearing dishes or establish a dedicated person to clear dishes and wait staff arrange for dish pick up if a customer requests their dishes cleared.
Reusable customer items including utensils, food ware, breadbaskets, etc., must be properly washed, rinsed, and sanitized. Cleaned flatware, stemware, dishware, etc., must be properly stored away from customers and personnel until ready for use. Use disposable items if proper cleaning of reusable items is infeasible.
Thoroughly clean each customer dining location after every use. This will include disinfecting tables, chairs, armrests, booster seats, highchairs, booths, etc. and allowing adequate time for proper disinfection, following product instructions.
Discontinue tableside food preparation and presentation such as food item selection carts and conveyor belts, guacamole preparation, etc.
Frequently clean items touched by patrons, especially those that might attract contact from children including candy and toy vending machines, decorative fish tanks, display cases, decorative fountains, etc.
Discontinue use of shared entertainment items such as board games, pool tables, arcade games, vending machines, etc. Close game and entertainment areas where customers may share items such as bowling alleys, etc.
Establish a written, worksite-specific COVID-19 prevention plan at every location, perform a comprehensive risk assessment of all work areas, and designate a person at each establishment to implement the plan.

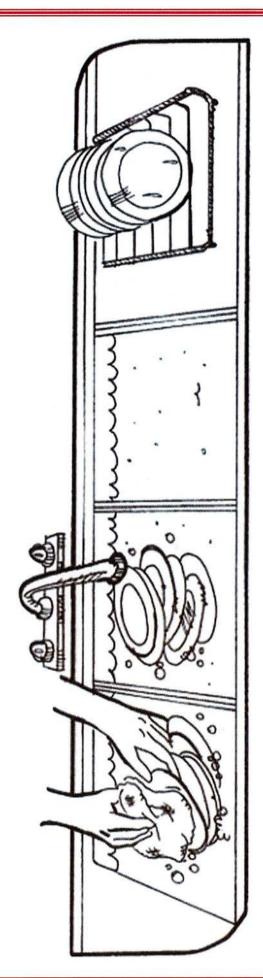
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Restrooms
Doors to multi-stall restrooms should be able to be opened and closed without touching handles if possible. Place a trash can by the door if the door cannot be opened without touching the handle.
For single restrooms, provide signage and materials (paper towels and trash cans) for individuals to use without touching the handles, and consider providing a key so disinfection measures can be better controlled.
Place signs indicating that toilet lids (if present) should be closed before flushing.
Place signs asking customer and employees to wash hands before and after using the restroom.
Provide paper towels in restrooms and disconnect or tape-off hand air dryers if possible
Maintain a thorough cleaning and disinfection schedule for the restroom.
Are all the handwashing sinks functional and able to reach 100°F minimum?
Ventilation
Get fresh air to the customers and staff and properly utilize ventilation system. Some ways to do this or seek help:
 Encourage outdoor dining, and open doors and windows if possible.
 Maximize fresh air through your ventilation system if possible
Maintain relative humidity at 40-60%.
Ensure that all doors and windows used to ventilate the restaurant are properly equipped with 16x16 inch mesh screens to prevent entrance of vectors or vermin
If doors and windows are equipped with automatic air curtains, ensure they are
routinely cleaned and sanitized to prevent spread of airborne particles
If fans such as pedestal fans or hard mounted fans are used in the restaurant, take steps to minimize air from fans blowing from one person directly at another individual. If fans
are disabled or removed, employers should remain aware of, and take steps to prevent,
heat hazards such as heat exhaustion.

For more information, please call the Monterey County Health Department COVID-19 Hotline at 831-769-8700 or 831-755-4521 or email covid-19@co.monterey.ca.us.

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Three Compartment Sink Method For Washing and Sanitizing



Soap and Warm Water

Clear Rinse Water

Per 10 Gallons Water Sanitizer and Water 3 Ounces Bleach Per Product

Air Dry Utensils On Racks

NO TOWEL DRYING



Monterey County Health Department

Section 114097

California Health & Safety Code



MONTEREY COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH BUREAU

1270 Natividad Road Salinas, CA 93906 Direct: (831) 755-4505, Fax: (831) 755-4880

EHB COVID-19 Information Site: mtyhd.org/covid-19-EHB

Reopening Guidelines for Essential Business during COVID-19 Outbreak

What should an Employer do to protect themselves and their customers?

- Business owners should continually monitor international (World Health Organization (WHO)), Federal (CDC), Occupational Safety and Health Administration (OSHA), state, and local guidelines for changes in recommendations, cleaning strategies, and other best management practices.
- > Employers should also consider developing a team to monitor, assess, and implement new strategies as they become available.
- In addition, employers should consider the following strategies for reducing the risk of COVID-19 transmission regarding:
 - Employee Wellness, Personal Hygiene, Personal Protective Equipment, Physical Distancing,
 Communication, Enhanced Cleaning Practices, Disinfection, Restrooms, and Ventilation
- Due to the wide variety of essential businesses, functions, and sizes, it may not be possible for establishments to implement all the following, however, trying to tackle the problem from multiple angles can help reduce health risks

Employee Health and Wellness -

- Continue your employee health policy of excluding or restricting employees with vomiting, diarrhea, fever with sore throat, infected wounds on the hands and arms, and jaundice (yellow tinting to skin/eyes).
- Consider using an employee screening questionnaire for COVID-19 symptoms at the beginning of each person's shift.
- Employees with laboratory-confirmed COVID-19 shall be excluded. If an employee is confirmed to have COVID-19, employers should inform fellow employees of their possible exposure to COVID-19 in the workplace but maintain confidentiality.
- Employees who have symptoms of fever, cough, or shortness of breath should notify their supervisor and stay home.
 - Employees should not return to work until ALL THREE things have happened:
 - 1. No fever for at least three full days without the use medicine that reduces fever AND
 - 2. Other symptoms such as cough or shortness of breath have improved AND
 - 3. At least 7 days have passed since the first symptoms appeared.
- Employees who appear to have symptoms upon arrival at work or who become sick during the shift should immediately be sent home and follow CDC recommendations for "What To Do if You Are Sick."
- Employees who are well but who have a household member sick with COVID-19 should selfquarantine for 14 days and monitor their health. They should call their healthcare provider if they develop symptoms suggestive of COVID-19 during their self-isolation.

II. Personal Hygiene -

- Wash hands regularly and before eating.
- Wash hands or use an alcohol-based hand sanitizer with at least 60% alcohol after in-person transactions.
 - Hand sanitizer is <u>not</u> to be used to replace proper hand washing.

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Consult the <u>CDC webpage</u> for information for good hygiene practices and personal hygiene.

III. Personal Protective Equipment -

- For information and training to use disposable gloves, refer to the CDC webpage and guidelines.
- Provide instruction and training to employees on how to:
 - Handle their work clothing properly at home if laundry service is not provided
 - Properly put on and remove gloves.
 - Clean and disinfect tables according to product specifications
- Provide training for employees and management of the proper use of face coverings per the <u>CDC</u> webpage and guidelines.
- Provide Safety Data Sheets for cleaning chemicals and ensure employees are aware of the hazards of use.
- IV. <u>Social Distancing</u> The virus is thought to spread mainly from person-to-person through respiratory droplets produced when an infected person speaks, coughs, or sneezes. Protect yourself and others with the following guidelines:

A. For employees

- Employee pre-shift meetings and trainings should be conducted virtually or in areas that allow for appropriate physical distancing between employees.
- Eliminate person-to-person contact for delivery of goods whenever possible. Designate
 drop-off locations to receive deliveries away from high traffic areas. Maintain physical
 distance of at least six feet with delivery drivers. Takeout food items should be made
 available using contactless pick-up and delivery protocols.
- Reconfigure office spaces, lobbies, workstations, and other spaces wherever possible to allow for at least six feet of distance between people working, and passing through areas for entry and exit.
- If feasible, restrict the number of employees in shared spaces, break rooms, and offices to maintain at least a 6-foot distance between people.
- Close areas where customers may congregate or touch items that other guests may use. Provide
 these items to guests individually and discard or clean and disinfect after each use, as appropriate.

B. For customers

- Limit the number of customers in the business at one time. Consider limiting the group size as well.
- Mark distances of 6 feet for customers waiting to be helped. Consider having customers wait in their cars if possible.
- If possible, use phone app technology to alert patrons that are waiting.
- Place plastic partitions between employees and customers wherever possible (e.g., customer service desk, register, etc.)
- Consider non-traditional ordering and payment processing to minimize contact time between employees and customers.
 - Consider an app-based system.
 - o Encourage credit card use over cash, when possible.
 - o Go electronic, if possible. Limit payments and receipts to online transactions.
- Effective 12:01 a.m. on Thursday, April 30, 2020, the Monterey County Health Officer is requiring residents to wear a face covering when going out into the public to perform essential activities to help stop the spread of COVID-19. For more information regarding this order go to:

https://www.co.monterey.ca.us/Home/Components/News/News/7283/1336

V. Communication -

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- Communicate to the customers what the business is doing to mitigate the spread of COVID-19 (e.g., disinfection routine, health policies for staff, and health & safety measures in place).
 - Consider placing signage on desks and counters to show that they have been disinfected after previous customers.
- Communicate that the business has the right to refuse service to anyone exhibiting symptoms or not following guidelines (e.g., physical distancing, wearing a face mask, etc.).
- Platforms for communication could include websites, reservation processes, hand-outs, and outdoor signage. Refer to these <u>CDC guidelines</u> for more information.

VI. <u>Enhanced Cleaning Practices</u>

- Select appropriate disinfectants to consider effectiveness and safety
 - The U.S. Environmental Protection Agency (EPA) has developed a <u>list of products</u> that meet EPA's criteria for use against SARS-CoV-2.
 - o Review product labels and Safety Data Sheet and follow manufacturer specifications
- Establish a disinfection routine no more wet rag approach (use disposable products).
 - Ensure disinfection protocols follow product instructions for application and contact time.
 - Consider establishing a single staff position whose responsibility is to disinfect per shift rotation. This person should be continuously cleaning and visible to customers.
 - O Consider using a checklist or audit system to track how often cleaning is conducted.
- Apron, towels, work clothing, etc. should be placed in trash bags and treated as potentially contaminated and laundered.
- Take steps to ensure that all water systems and features (for example, drinking fountains, decorative fountains) are safe to use after a prolonged facility shutdown to minimize the risk of Legionnaires' disease and other diseases associated with water.
- Do not leave out mints, candies or snacks for customers.
- VII. <u>Disinfection</u> Disinfection is recommended for rooms or areas that people with suspected or confirmed COVID-19 have visited and for high touch surfaces. CDC guidelines at "<u>Environmental Cleaning and Disinfection Recommendations</u>" provide instructions on how to disinfect with a product that is on the <u>EPA's List N</u>.
 - High touch surfaces include, but are not limited to:
 - Light switches, host stands, equipment handles, check-out counters, order kiosks, ATM PIN pads, receipt trays, bus tubs, serving trays, phones, waiting area chairs, workstations, doorknobs, door handles and door push plates, pens, soda fountain touchpoints, electronic payments and point of sale terminals, and countertops or racks used to stage orders.
 - It is important to follow the manufacturer's directions on how to apply the disinfectant, and train employees on how to use the product (e.g. concentration, application method, personal protective equipment, and contact time, etc.).
 - o If surfaces are dirty, they should be cleaned using soap and water prior to disinfection.

VIII. Restrooms -

- Doors to multi-stall restrooms should be able to be opened and closed without touching handles if possible.
 - Place a trash can by the door if the door cannot be opened without touching the handle.
- For single restrooms, provide signage and materials (paper towels and trash cans) for individuals to
 use without touching the handles, and consider providing a key so disinfection measures can be
 better controlled.
- Place signs indicating that toilet lids (if present) should be closed before flushing.
- Place signs asking customer and employees to wash hands before and after using the restroom.
- Provide paper towels in restrooms and disconnect or tape-off hand air dryers if possible

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Maintain a thorough cleaning and disinfection schedule for the restroom.

IX. Ventilation -

- Get fresh air to the customers and staff and properly utilize ventilation system. Some ways to do this or seek help:
 - o Encourage outdoor dining, and open doors and windows if possible.
 - Maximize fresh air through your ventilation system if possible
 - Maintain relative humidity at 40-60%.
- Ensure that all doors and windows used to ventilate the restaurant are properly equipped with 16x16 inch mesh screens to prevent entrance of vectors or vermin
- If doors and windows are equipped with automatic air curtains, ensure they are routinely cleaned and sanitized to prevent spread of airborne particles
- If fans such as pedestal fans or hard mounted fans are used in the restaurant, take steps to minimize air from fans blowing from one person directly at another individual. If fans are disabled or removed, employers should remain aware of, and take steps to prevent, heat hazards such as heat exhaustion.

For more information, please call the Monterey County Health Department COVID-19 Hotline at 831-769-8700 or 831-755-4521 or email covid-19@co.monterey.ca.us.

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Feeling Sick?

Stay home when you are sick!

If you feel unwell or have the following symptoms

please leave the building and contact your health care provider.

Then follow-up with your supervisor.

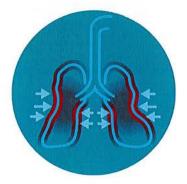
DO NOT ENTER if you have:



FEVER



COUGH



SHORTNESS OF BREATH



cdc.gov/CORONAVIRUS



¿Se siente enfermo?

¡Quédese en casa si está enfermo!

Si no se siente bien o tiene alguno de estos síntomas, por favor, salga del edificio y comuníquese con su proveedor de atención médica. Luego, póngase en contacto con su supervisor.

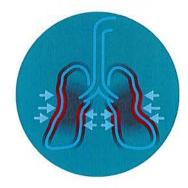
NO ENTRE si tiene:



FIEBRE



TOS



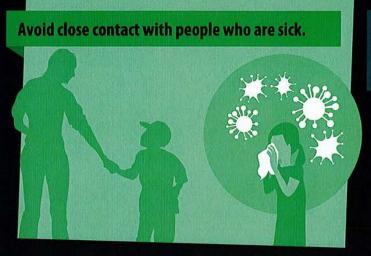
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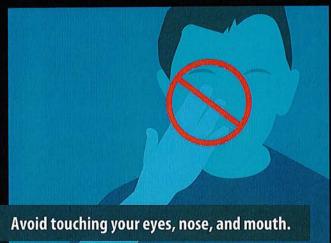
cdc.gov/CORONAVIRUS-ES

STOP THE SPREAD OF GERMS

Help prevent the spread of respiratory diseases like COVID-19.



Cover your cough or sneeze with a tissue, then throw the tissue in the trash.



Clean and disinfect frequently touched objects and surfaces.





Wash your hands often with soap and water for at least 20 seconds.



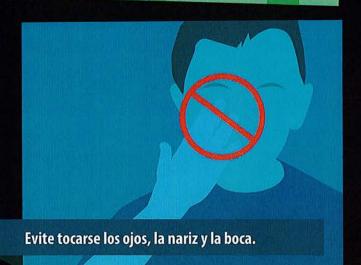
cdc.gov/COVID19

DETENGA LA PROPAGACIÓN DE LOS MICROBIOS

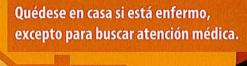
Ayude a prevenir la propagación de enfermedades respiratorias como el COVID-19



Cúbrase la nariz y la boca con un pañuelo desechable al toser o estornudar y luego bótelo a la basura.



Limpie y desinfecte los objetos y las superficies que se tocan frecuentemente.





Lávese las manos frecuentemente con agua y jabón por al menos 20 segundos.





COUNTY OF MONTEREY HEALTH DEPARTMENT

Elsa Jimenez, Director of Health

Administration Behavioral Health Clinic Services Emergency Medical Services Environmental Health/Animal Services

Public Health
Public Administrator/Public Guardian

Recipient of The California Endowment's 2017 Arnold X. Perkins Award for Outstanding Health Equity Practice

The County's Health Officer is requiring all food facilities stop dine-in services until the Shelter in Place order for the Corona Virus is lifted. The order is currently in place until further notice. This order is given because of the propensity of the virus to spread person to person and also because the virus physically is causing property loss or damage due to its proclivity to attach to surfaces for prolonged periods of time.

- All food facilities should be closed for seated dining and should be open only to drivethrough or other pick-up/delivery options.
- Please remind employees of best hygiene practices including washing their hands often with soap and water for at least 20 seconds.
- Also increase frequency of cleaning and sanitizing per <u>CDC Environmental Cleaning and Disinfection guidance</u> of all hard surfaces, including tables and counter tops that are being utilized by employees and patrons during pickup/delivery options.

If you have any questions, please refer to the Monterey County Health Department website at: www.mtyhd.org and www.mtyhd.org/covid19-foodsafety

Thank you.

El Oficial de Salud del Condado exige que todas las instalaciones de alimentos suspendan los servicios de cena hasta que se levante la orden de Refugio en su Hogar para el Virus Corona. La orden de Refugio en su Hogar se vence a las 11:59 pm del 7 de abril.

- Todas las instalaciones de alimentos deben estar cerradas para cenas sentadas y deben estar abiertas solo para conducir u otras opciones de recogida / entrega.
- Recuerde a los empleados las mejores prácticas de higiene, como lavarse las manos a menudo con agua y jabón durante al menos 20 segundos.
- También aumente la frecuencia de limpieza y desinfección según las pautas de limpieza y desinfección ambiental de CDC de todas las superficies duras, incluidas las mesas y encimeras que utilizan los empleados y clientes durante las opciones de recolección / entrega.

Si tiene alguna pregunta, consulte el sitio web del Departamento de Salud del Condado de Monterey en www.mtyhd.org/covid19-foodsafety.

Gracias.

Monterey County Environmental Health Bureau 1270 Natividad Rd. Salinas, CA 93906



Food delivery and take-out guidance

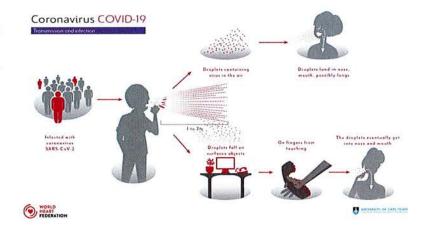


Following new Government restrictions placed on restaurants, bars, cafes etc during the coronavirus (COVID-19) pandemic, you, as a business, may be considering diversifying your food business to provide food from your normal menu or new dishes for delivery or take-out. This guidance will help ensure you trade safely. It should be used in conjunction with, and to supplement your own food safety management procedures, and any hygiene and cleaning procedures you have developed based on public health guidance on coronavirus.

Transmission of COVID-19

Current scientific advice is that COVID-19 is unlikely to be spread by food. Close contact with an infected individual via sneezing, coughing or picking up the virus from contaminated surfaces and then transfer by hands to face contact are all transmission routes that need to be prevented with good hand hygiene and social distancing.

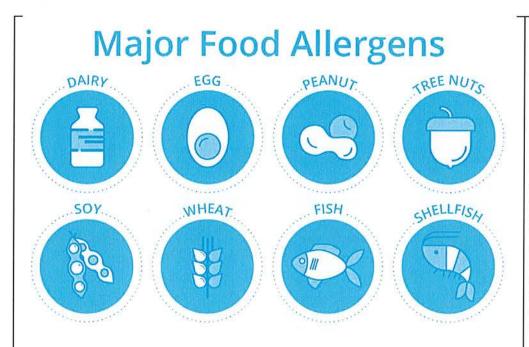
COVID-19 is thought to survive on hard surfaces for up to three days which is why cleaning and disinfection is essential.



Food business registration

If you currently hold a Monterey County health permit but plan to change your food operation to include delivery, or any other significant change, for example supplying vulnerable groups, you will need to inform your local authority. The easiest way to do this is via email. Email Monterey County Health Department at: health@co.monterey.us

Allergies and ordering



According to the CA Retail Food Code section 113820.5(a):

- "Major food allergen" means all of the following:
- (1) Milk.
- (2) Eggs.
- (3) Fish, including, but not limited to, bass, flounder, and cod.
- (4) Crustacean shellfish, including, but not limited to, crab, lobster, and shrimp.
- (5) Tree nuts, including, but not limited to, almonds, pecans, and walnuts.
- (6) Wheat.
- (7) Peanuts.
- (8) Soybeans.
- (9) A food ingredient that contains protein derived from a food listed in paragraphs (1) to (8), inclusive.

You must clearly communicate that customers should ask about allergies and intolerances when they order. Here is some sample wording you can use for this purpose:

"Before ordering, please speak to a member of staff if you have any food allergies or intoler ances."

Ensure you clearly label the allergy sufferers meal, identifying their individual food items to avoid mistakes on delivery and unpacking by the customer. During delivery, food prepared for allergenic customers should be stored separately to avoid any cross contact.

Customers self-isolating or ill

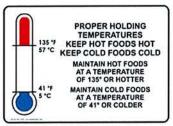


You must put in place a process, at the point of ordering, to establish whether a customer is self-isolating or ill. The process should include how this information is communicated to drivers and/or riders to minimize the risk to them of COVID-19 transmission.

Food Packaging

Food packaging must comply with the law, be clean and suitable for food use. Ensure it is stored hygienically at your business before use. You can check whether it is food safe by looking for a symbol that looks like a wine glass and a fork. You can also check if it is marked 'for food contact'.

Delivery boxes and bags



If boxes and bags need to keep food hot or cold, then choose appropriate insulated carriers. They should be easy to clean and disinfect. You should use the two stage cleaning process to disinfect containers internally and externally. Ensure effective disinfection at the start of the day, before carrying food and after deliveries, as well as regularly throughout the day. Hot food should be provided to customers at 135°F or above and cold food at 41°F or colder.

Delivery drivers and their vehicles

Drivers and riders must have insurance for business use. Vehicles must be clean, comply with DMV regulations, tax etc. Smoking is not permitted in any delivery vehicle as these are considered workplaces.

Remember that delivery drivers are food handlers and therefore must be given basic instructions on safe food handling, personal hygiene and reporting of any infections or illness. Check drivers for signs and symptoms of coronavirus and record in your due diligence records.

Drivers must hand wash or sanitize before and after delivery as they could cross contaminate between the restaurant and the customer. The driver must be provided with alcohol hand sanitizer with an alcohol content of at least 60+%. You must implement a drop-off system where the order is placed at the customer's door and contact is made via the bell or phone whilst the driver or rider moves back from the order to allow for a 6 feet social distancing space. Social distancing of 6 feet must be used at all times.





Be sure to clean and wipe down the inside of the vehicle including steering wheel, gear shift, door, dashboard, seat, door handle, seat belts and any exposed surfaces using a damp cloth with a small amount of soap before and after each work day.

- It is best to avoid any cleaners with alcohol or bleach – this may dry the leather/vinyl, causing it to crack and discolor.
- Also, although these may not all be suitable for cleaning a vehicle (check your owner's manual), the Environmental Protection Agency has a list of disinfectant <u>products</u>.

Driver pick-ups and drop-offs



Drivers should wash their hands on arrival for pick-ups and when returning after deliveries. Find a low risk area for food pick-ups. This will avoid the need for drivers to enter kitchen areas or come into contact with kitchen staff.

Contactless forms of payment

Consider how you will accept payment, for example upfront or on delivery. Cashless systems should be implemented due to hygiene reasons.



Contactless forms of payment include but are not limited to:

- Online payments prior to processing orders for pick up
- Apple pay, Google pay, etc
- Scan to pay with credit/debit cards

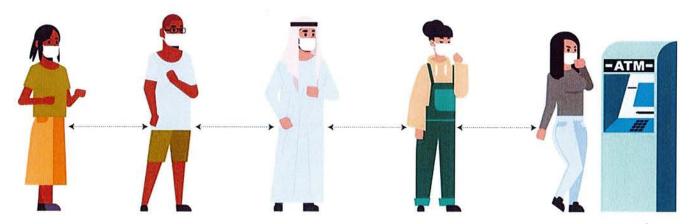
Given that, the best measure you can take to prevent the spread of germs is hand-washing. If your job requires that you handle money (or any other potentially contaminated surface), it's important to be diligent about washing your hands and not touching your face. If you want to wear disposable gloves, it's still a good idea to change them frequently and wash your hand between touching money and preparing food.

Please note that even with gloves on, germs on products or surfaces can be transmitted to the gloves and onto other products or surfaces touched which could mistakenly be your face or cellphone which then spreads onto your hands and face if not disinfected.

Food take-out

Social distancing

Maintain 6 feet (1.8 meters) of distance at all times if in public



If you are operating take out service, customers must be encouraged to sanitize their hands upon arrival at the premises. It is recommended that hand sanitizer is placed at the entrance with a sign asking customers to use it before entering. Post signage at the door – here is some suggested wording that can be used for this:

"For the safety of everyone, please use this hand sanitizer before entering – do not enter if you are ill."

Staff handing over food should place it down and keep a sensible distance from the customer. This area should be regularly sanitized throughout the day and staff should wash their hands after each handover.

Food Safety Procedures

There are a number of complex rules around retailing foods including labelling and nutrition laws that you may need to comply with. The Monterey County Health Department has provided advice for business on this:

- State Health and Emergency Officials Release Guidance to Prevent the Transmission of COVID-19 in Food and Beverage Venues: https://www.cdph.ca.gov/Programs/OPA/Pages/NR20-024.aspx
- COVID-19 Food Facility Safety: https://www.co.monterey.ca.us/government/departments-a-h/health/environmental-health/covid-19
- Shelter in Place Expectations for Food Facilities: https://www.co.monterey.ca.us/home/showdocument?id=88085

Laundry



Uniforms are a potential source of transmission. Ensure staff wear clean uniforms at all times. All uniforms must be washed at temperatures above 140°F or higher, or use a laundry sanitizing agent if the fabrics cannot be washed at high temperatures.

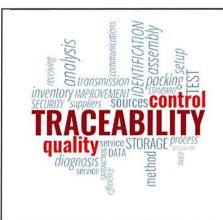
It is recommended as standard practice in food businesses that uniforms are laundered commercially. If you are unable to wash items immediately, leave in a sealed bag for at least three days and wash as normal.

Where staff are washing their uniforms at home, they should ensure they are washed and stored separately from other household laundry.

Cleaning

Ensure that the frequency of disinfection is increased throughout service, and make sure staff are including all high-touch surfaces such as work surfaces, tables, chairs, switches, door handles, push plates on doors, toilets, hand towel dispensers, taps, mop handles etc. At the end of the shift, clean all high-touch surfaces one more time before closing.

Traceability



Should you have to change or use different suppliers, ensure their details are recorded in your food safety management system.



TRACEABILITY



Public Health Environmental Health

Food Safety for Food Delivery and Pick-up

Information for restaurants that offer delivery/take-out/pick-up food services.

Online delivery is surging and eating in is the new dining out.

Due to the recent corona virus outbreak, for an increasing number of Americans dining out is no longer an option. Today, many independent restaurants are switching to takeout or delivery only models due to new city and state rules. To ensure delivered food is safe for consumption, proper food handling during the food preparation, holding, pick-up and delivery of the food needs to take place. Please take note of the following:



Cold and Hot Food Handling

Cold foods must be held at an internal temperature of 41°F or below.

Hot foods must be held at an internal temperature of 135°F or above.

Keeping food warm (between 41 and 135 °F) is NOT safe.

If not consumed, refrigerate all perishable foods within two hours after purchase or delivery.



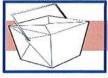
Delivery

When delivery time exceeds 30 minutes, food delivery services must maintain food temperature at or above 135 °F (hot foods), or at or below 41 °F (cold foods). Delivered food must be transported and held in containers made of smooth, washable and impervious materials that are able to withstand frequent cleaning. Containers should be leak-proof and maintain food at proper holding temperatures.



Proper Handling Procedures

Food must be protected from contamination during the pick-up and delivery process. Food should be properly sealed, packaged, and maintained to prevent the potential contamination from delivery personnel or food handlers. Only sealed/packaged food is to be picked up and delivered.



Leftover Food

Refrigerate or freeze leftovers in shallow containers. Ensure to keep all containers carrying leftover food sealed. Discard all perishable foods, such as meat, poultry or eggs left at room temperature longer than two hours. This includes leftovers taken home from a restaurant.



Food Sources

Food should only be delivered and received from food facilities permitted with the Monterey County Health Department.

TO-GO ORDERS ONLY NO DINE IN





COUNTY OF MONTEREY HEALTH DEPARTMENT

Elsa Jimenez, Director of Health

Administration Behavioral Health Clinic Services Emergency Medical Services Environmental Health/Animal Services

Public Health
Public Administrator/Public Guardian

Nationally Accredited for Providing Quality Health Services

May 12, 2020

RE: Agricultural Field Toilet Program Employee Housing

To operators:

Please continue to provide and maintain agriculture field toilets and handwash stations in order to reduce the spread of COVID-19 and other diseases. It is important for all employers to take proper precautions, such as:

- Exercise social distancing; keep separation at least 6 feet apart from one another, which includes workers being transported in buses or vehicles.
- Frequent and thorough handwashing; remember 20 second rule. Ensure all handwash stations are replenished with soap, potable water and paper towels at all times.
- Follow face mask protocol.
- Clean and disinfect all surfaces.

Our department will provide the signage (stickers) during our next scheduled inspection to be posted on all handwash stations; however, please feel free to use the attached PDF sign to post where you deem necessary.

Please feel free to call or e-mail if you have any questions.

1270 Natividad Rd Salinas, CA 93906 Phone: (831) 755-4508 Fax: (831) 755-4880

www.mtyhd.org

Novel Coronavirus (COVID-19)

County of Monterey Health Department Farmer's Markets and Community Events

Due to the increasing number of cases in neighboring counties, including more community transmission and recent guidance issued by the California Department of Public Health as it relates to COVID-19 and public gatherings, community events at Farmer's Markets must be cancelled or postponed until after April 30, 2020 and will not be issued a health permit to operate. Community events that were previously approved and permitted will be notified that their permit is suspended and will be issued the option of rescheduling the event or requesting a refund for the fees paid.

In light of the need to ensure that fresh food is available to residents, outdoor Certified Farmer's Markets that are certified by the State of California and have obtained a health permit for a Certified Farmer's Market will be allowed to operate if the conditions noted below are implemented.

Certified Farmer's Markets modified operational conditions:

- Limit the sale of food to whole uncut produce and packaged food items. No food preparation food booths will be allowed to operate.
- No sampling of unpackaged food is permitted.
- Post signs reminding customers of the following:
 - Wash all produce before consumption
 - Handwashing Reminder https://www.co.monterey.ca.us/Home/ShowDocument?id=23911
 - Asking customers to remain home if they are sick, even with mild illness. https://www.co.monterey.ca.us/home/showdocument?id=87857
- Market managers are responsible for ensuring that crowds are staggered to provide for social distancing of customers.
 - Allow for space between produce stands
- Provide handwashing stations for customers where possible. Recommend providing alcohol-based hand sanitizer with at least 60% alcohol for customers to use prior to handling produce.
- Ensure handwashing stations are provided adjacent to restroom facilities and stocked with soap and paper towels at all times.

Certified Farmer's Market Employees

- Sick employees are advised to stay home and not return to work until they are free of fever for at least 72 hours without fever-reducing medication.
- Employees who appear to be ill upon arrival to work or become sick during the day should be sent home immediately.

Handwashing Instructions for All Market Employees

- Wash hands and arms with soap and warm water for at least 20 seconds before:
 - o Eating or drinking
 - o Putting on gloves
- Wash hands after these activities:
 - Using the restroom
 - Touching your hair, face, body, or clothes



Novel Coronavirus (COVID-19)

County of Monterey Health Department Farmer's Markets and Community Events

- Sneezing, coughing, or using a tissue
- o Smoking, eating, drinking, or chewing gum
- o Emptying or taking out the garbage
- o Handling money and making change
- Removing gloves
- o After engaging in other activities that might contaminate the hands
- Recommend assigning an employee at every shift to ensure that handwashing sinks are stocked with soap and paper towels at all times.
- Recommend using gloves appropriately as an additional tool, but it is important to remember that gloves
 do not replace the need to wash hands and practice good hand hygiene.

General Cleaning

- Clean and disinfect all "high-touch" surfaces such as tabletops, cash register counters, restroom fixtures and handwashing sinks, and trash cans frequently.
- Use an Environmental Protection Agency (EPA)-registered product that cleans (removes germs) and disinfects (kills germs). Always follow the instructions on the labels of cleaning products and disinfectants.

Effective Disinfectants

- To make a bleach solution, mix 1 tablespoon of bleach to 1 quart (4 cups) of water. For a larger supply, add ¼ cup of bleach to 1 gallon (16 cups) of water. Use the solution within 20 minutes. Use test strips to test chlorine solution (100 ppm).
- Other EPA-approved disinfectants may be used if they are effective against Coronaviruses. Consumer may contact the "1-800" number on product label for its effectiveness against "COVID-19".

Proper Handling of Disinfectants, Items and Waste

- Use chemicals in a well-ventilated area.
- Avoid mixing incompatible chemicals (read label).
- · Prevent chemical contact with food during cleaning.
- Manage waste safely and dispose in a secure trash container.

Market Managers are responsible for ensuring compliance with the above conditions.

For more information on Covid-19 visit: https://www.co.monterey.ca.us/government/departments-a-h/health/diseases/2019-novel-coronavirus-2019-ncov or call the Monterey County Information line 2-1-1 which is available 24 hours a day.





COUNTY OF MONTEREY HEALTH DEPARTMENT

Elsa Jimenez, Director of Health

Administration Behavioral Health Clinic Services Emergency Medical Services Environmental Health/Animal Services

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COVID-19 Infection Prevention and Control Guidance for Employers that Offer Employee Housing

The COVID-19 pandemic poses a threat to public health. There is no vaccine to prevent the disease and no treatment at this time. The most effective way to slow the spread of the virus is through social distancing. The Monterey County Health Officer has issued a Shelter in Place order which requires individuals to remain at their residence and to only leave their residence to provide or receive essential services. The Order recognizes the agricultural industry as an essential service. As such, agriculture employers and employees may continue to work under the Shelter in Place Order. However, agriculture employers must implement social distancing measures to the extent possible in order to limit risk of exposure to employees. This Guidance document provides strategies that employers can take to prevent exposure to COVID-19 and steps to take if an employee is suspected or confirmed to be infected with COVID-19.

Employee Housing Facilities Include:

- Monterey County Permitted Agriculture worker housing facilities:
 - H2A housing permitted by County or California Housing and Community Development within incorporated cities.
 - Employee Housing accommodations include:
 - Single Family Dwellings
 - Apartments
 - Dormitories
 - Mobile Homes
 - Hotels/Motels

Employee Health and Best Sanitation Practices:

- Social Distancing Requirements: Employees must achieve space between each other of approximately 6 feet.
- **Bed Separation:** Ensure beds are arranged alternately head-to-toe to reduce spread of diseases and a far apart as possible to adhere to the six-foot distance.
- All employers should implement good hygiene and infection control practices, including:
 - All employees will be housed in rooms meeting state housing code requirements to prevent overcrowding.
 - Promote frequent and thorough hand washing, including by providing workers with a place to wash their hands. If soap and running water are not immediately available, provide alcohol-based hands rubs containing at least 60% alcohol.
 - o Encourage respiratory etiquette, including covering coughs and sneezes.
 - o Discourage workers from using other worker's work tools and equipment, when possible.
 - Increase frequency of housekeeping practices, including routine cleaning and disinfecting surfaces, equipment, and other elements of the work environment.
 - Ensure housing units have adequate supplies of disinfectants and sanitizers.

Toilet and Bathing Facilities:

- Employers must provide washing facilities that have an adequate supply of cleansing agents, water and single-use towels or hand dryers.
- Schedule or reduce number of large groups of employees showering/bathing at the same time.

Community Kitchens/Mess Halls/Mess Hall Kitchen:

- Remind employees of best hygiene practices including washing their hands often with soap and water for at least 20 seconds.
- Increase frequency of cleaning and sanitizing of all hard surfaces, including tables, counter tops and
 cooking utensils that are being utilized by employees and patrons during pickup/delivery options. Please
 refer to the CDC's website to obtain guidance for "Cleaning and Disinfecting your facility" and "Cleaning
 and Disinfecting your facility for those who house people overnight."
- Staff or employees working in a kitchen should always practice social distancing, making sure to
 maintain a 6-foot distance between themselves and other staff members. Staff should follow social
 distancing guidelines such as: washing hands before and after restroom use, washing hands before and
 after equipment/field work, using hand sanitizer. Staff or employees should not use the kitchen area if ill,
 and when coughing or sneezing use a tissue and immediately dispose of it.
- Employees should not sit in groups.
- Stagger food service hours to ensure distancing for large groups of employees.

Transportation of workers:

- Employers are to transport workers in vehicles that do not violate social distancing requirements (be able
 to sit at least 6 feet apart). If necessary, additional vehicles or multiple trips will be required to transport
 all workers to and from the work site.
- Employees should not be transported to any site that is considered a non-essential operation (park, mall, theater etc.).

Food deliveries:

- Ensure social distancing while food is delivered or picked up by employee when applicable. Employees should always practice social distancing, making sure to maintain a 6-foot distance between themselves and other staff members whenever feasibly possible.
- Ensure proper social distancing of employees receiving or ordering food provided by a catering service or mobile food preparation unit.
- Food should not be eaten in large groups without separation.

Employees Who Have Been Diagnosed with COVID-19 (in Isolation):

- Encourage workers to stay home if they are sick or show symptoms of illness. CDC recommends that
 employees who appear to have acute respiratory illness symptoms (i.e., fever, cough, shortness of
 breath) upon arrival to work or become sick during the day should be separated from other employees
 and be sent home immediately.
- Contact the Monterey County Health Department at 831-755-4521 if any individual tests positive for COVID-19 to assist in the evaluation and/or testing of any other employees housed within the same living quarters.
- Employees who are sick and have been diagnosed with COVID-19 can pass the virus to others who
 come in close contact with them. Close contact is defined as spending 15 minutes or more within 6 feet
 of a person diagnosed with COVID-19 while they were sick and/or infectious.
- Employees who have been diagnosed with COVID-19 must self-isolate until they are cleared by the
 Monterey County Health Department's Communicable Disease Unit. Employees must self-isolate until
 they have been fever-free for at least 3 days without the use of fever-reducing medications, their
 symptoms have improved for at least 3 days, and it has been at least 7 days since they first became ill.
 The Communicable Disease Unit will communicate with employees and the employers about release
 from isolation.
- Employers must ensure employees know the limits that apply to sick individuals during the time of isolation:
 - Isolated employees must stay in separate area away others who are not sick with COVID-19, sharing a bathroom only with others who are sick if possible.
 - o Avoid having any unnecessary visitors who do not have an essential need to be in the facility.

- Isolated employees should wear a face mask when interacting with others for essential needs.
 Individuals in contact with isolated individuals should also wear a face mask.
- Clean and disinfect all surfaces daily and high-touch surfaces frequently throughout the day. Ill
 individuals who are well enough should clean the isolation area rather than have another
 employee enter the area.
- Avoid sharing household items, such as dishes, drinking glasses, cups, eating utensils, towels, bedding or other items. All items should be washed thoroughly. Use hot water and a hot drying. Individuals in charge of laundry should wear disposable gloves and keep the soiled items away from their body while laundering. Individuals should wash their hands immediately after removing gloves.
- Employers must help with basic needs to the sick employee and provide support for getting personal needs and meals.
- o Employee may only leave isolation area to seek medical care.
- Employee may not use public transportation or go to shopping centers.
- Cooperate with Monterey County Health Department directions.
- Isolated employee may not have friends or family with them in their quarantine room or apartment, unless they have been approved by the Monterey County Health Department.
 Employees may keep in contact with family and friends through phone calls, texts, and emails.

Employees Who Have Been Exposed to Someone Diagnosed with COVID-19 (under Quarantine):

- Employees who have been in close contact with someone diagnosed with COVID-19 are at risk of becoming ill and passing the virus to others. Close contact is defined as spending 15 minutes or more within 6 feet of a person diagnosed with COVID-19 while they were sick and/or infectious.
- Employees who have been in close contact with someone diagnosed with COVID-19 must selfquarantine for 14 days after their last contact with the person diagnosed with COVID-19. Employers must ensure employees know the limits that apply to exposed individuals during the time of quarantine (14 days after last known contact):
 - Stay in separate area away from areas where individuals who are sick with COVID-19 are staying and separate from areas where employee who are well and have had no contact with individuals diagnosed with COVID-19 are staying. They should have their own bathroom, if possible.
 - Avoid having any unnecessary visitors who do not have an essential need to be in the facility.
 - Quarantined employees should wear a face mask when interacting with others for essential needs. Individuals in contact with guarantined individuals should also wear a face mask.
 - o Clean and disinfect all surfaces daily and high-touch surfaces frequently throughout the day.
 - Avoid sharing household items, such as dishes, drinking glasses, cups, eating utensils, towels, bedding or other items. All items should be washed thoroughly. Use hot water and a hot drying. Individuals in charge of laundry should wear disposable gloves and keep the soiled items away from their body while laundering. Individuals should wash their hands immediately after removing gloves.
 - Employees must not leave quarantine location for any non-essential reason.
 - Quarantined employees must not use public transportation or go to shopping centers.
 - o Cooperate with Monterey County Health Department directions.
 - Quarantined employee may not have friends or family with them in their quarantine room or apartment, unless they have been approved by the Monterey County Health Department.
 Employees may keep in contact with family and friends through phone calls, texts, and emails.

If you would like to learn more about COVID-19 and the Health Officer Order to Shelter in Place Order, please visit the Monterey County Health Department website at www.mtyhd.org/covid19.

If you have questions about COVID-19, please call our Health Department COVID-19 call center at (831) 755-4521.

If you would like to submit a complaint about facilities that are found to be operating outside of Shelter in Place Order, you can call our office at (831) 755-4505 or <u>submit a complaint online.</u> Also, you can download our Monterey County Connect App to report an issue.



MONTEREY COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH BUREAU

1270 Natividad Road, Salinas, CA 93906, (831) 755-4508, FAX (831)755-4880 EHB COVID19 Information Site: mtyhd.org/covid-19-EHB

Social Distancing Protocol for Employee Housing

Comp	any Na	me/ Email Address:	
List Er	List Employee Housing facilities under your company:		
Signag	Signa	ge at each public entrance of the facility to inform all employees and customers hey should:	
	-	avoid entering the facility if they have a cough or fever sneeze and cough into a cloth or tissue, or if not available, into one's elbow not shake hands or engage in any unnecessary physical contact	
	Signa facilit	ge posting a copy of the social distancing protocol at each public entrance to the	
Measu	ires to	Protect Employee Health (Check all that apply to the facility):	
	All em	ployees have been told not to come to work if sick.	
	Sympt	om checks are being conducted before employees may enter the work site.	
	All de	All desks or individual work stations are separated by at least six feet.	
	Sleeping area, break rooms, bathrooms, and other common areas are being disinfected frequently.		
	☐ Disinfectant, soap and water, hand sanitizer, and related supplies are available employees at the following location(s):		
		Portable toilets	
		Food areas such as: Preparation, dining, and other areas where food is consumed	
		Bathroom	
	Copies	of this protocol and COVID-19 Infection Prevention and Control Guidance has	

been distributed to all employees.

Measures to Prevent Crowds from Gathering (check all that apply to the facility):

	Limit the number of employees at any one time to allow for employees to easily maintain at least 6 feet distance from one another at all practicable times.
	MAX number of Employees:people
	Optional—describe other measures.
Measu	ures to Keep People At Least Six Feet Apart (check all that apply to the facility):
	Placing signs throughout the facility reminding employees to be at least six feet apart, including when in line to obtain meals.
	Placing tape or other markings at least six feet apart in employee line areas when obtaining meals with signs directing customers to use the markings to maintain distance.
	Separate employees in the eating areas to prevent customers from gathering.
	All employees have been instructed to maintain at least six feet distance from each other.
	Food being acquired from food trucks (Mobile Food Facility) must be obtained in smaller groups and eat in their rooms if area is not enough to maintain employees 6 feet apart from each other.
	Optional – describe other measures.

Measi	ures to Prevent Unnecessary Contact (check all that apply to the facility):
	Preventing people from self-serving any items that are food-related.
	☐ Utensil items are provided by staff.
	☐ Bulk-item food bins are not available for employee self-service use.
	Not permitting employees to bring their own bags, mugs/ utensil, or other reusable items.
	Optional – describe other measures.
Measu	ures to Increase Sanitization (check all that apply to the facility):
	Disinfecting wipes that are effective against COVID-19 are readily available.
	Employee(s) assigned to disinfect personnel area regularly.
	Hand sanitizer, soap and water, or effective disinfectants are available to the public at or near the entrance of the facility, at food delivery area, and anywhere else inside the facility or immediately outside where people have direct interactions.
	Disinfecting all high-contact surfaces frequently.
	Optional – describe other measures.

^{**}Any additional measures not included here should be listed on separate pages, facility must attach to this document ***



COUNTY OF MONTEREY HEALTH DEPARTMENT

Elsa Jimenez, Director of Health

Administration Behavioral Health Clinic Services
Emergency Medical Services
Environmental Health/Animal Services

Public Health
Public Administrator/Public Guardian

Nationally Accredited for Providing Quality Health Services

COVID-19 Shelter in Place Expectations for Food Facilities

<u>Food Facilities that May Remain Open</u>: Grocery stores, certified farmers' markets, farm and produce stands, supermarkets, food banks, convenience stores, and similar food retail establishments are encouraged to remain open to provide food and pet supplies to the public. When visiting these establishments, please help retailers maintain at least six feet minimum distance between patrons, including by providing ample space while shopping and waiting in line.

<u>No Dine In Allowed</u>: At this time, all food facilities are not allowed to have dine in services for customers including outdoor dining. Food facilities are only allowed to receive orders and the food can either be delivered or picked up by guests for takeout. Patrons will not be permitted to dine or congregate in restaurants, bars, and similar establishments.

<u>Take Out/Pickup</u>: It is recommended that the guest orders ahead either by phone or online/mobile order.

<u>Delivery</u>: Deliveries can still be placed from food facilities. Businesses that deliver goods or services directly to residences are essential businesses that may continue to operate.

<u>Social Distancing If In Line</u>: People should maintain social distancing at all times, and it must be at 6 feet apart while waiting in line or ordering. Follow social distancing guidelines such as washing hands before and after, using hand sanitizer, and coughing or sneezing into a tissue.

<u>Hand Washing</u>: Wash your hands often with soap and water for at least 20 seconds. If soap and water are not available, clean your hands with an alcohol-based hand sanitizer that contains at least 60% alcohol, covering all surfaces of your hands and rubbing them together until they feel dry. Soap and water should be used preferentially if hands are visibly dirty. Avoid touching your eyes, nose, and mouth with unwashed hands.

Handwashing in a Food Facility: Employees' hands should be washed,

- When entering the kitchen
- Before starting food preparation
- After touching their face, hair, or other areas of the body
- After using the restroom
- · After coughing, sneezing, using a tissue, smoking, eating, or drinking
- When handling raw food then ready-to-eat food
- Before putting on gloves
- · After cleaning, bussing tables, or touching any items that patrons have used
- Between handling money/credit cards/phones/pens and handling food
- After engaging in other activities that may contaminate the hands

Hand Sanitation Tips:

- Minimize bare hand contact with ready-to-eat food
- Assign an employee to keep soap and paper towels stocked at handwash stations at least every hour
- Protect food and drinks from contamination when preparing and packing for delivery and carryout by patrons
- · Avoid touching your eyes, nose, and mouth
- Minimize touching your phone or other personal items
- · Wash hands more frequently for all staff
- Provide extra garbage cans near restrooms exits
- Provide alcohol-based hand sanitizer for customers to use

Provide regular staff training to ensure proper protocols are followed!

<u>Clean Surfaces</u>: Clean all "high-touch" surfaces every day. High touch surfaces include counters, tabletops, doorknobs, bathroom fixtures, toilets, phones, keyboards, tablets, and bedside tables. Also, clean any surfaces that may have blood, stool, or body fluids on them. Use a household cleaning spray or wipe, according to the label instructions. Labels contain instructions for safe and effective use of the cleaning product including precautions you should take when applying the product, such as wearing gloves and making sure you have good ventilation during use of the product.

<u>Sanitation of Equipment at a Food Facility</u>: Chlorine-based (bleach) sanitizer at 100 ppm or quaternary ammonium-based sanitizers at 200 ppm are effective sanitizers. Use test strips to ensure that sanitizer is at these required concentrations. Sanitize equipment, utensils, and food preparation areas, as well as tables, seats, service counters and any other area exposed to customers or employees routinely throughout the day.

- COVID-19 can last for days on surfaces. Increase the frequency of cleaning and sanitizing all high-touch areas such as:
 - · Doorknobs, touch screens, cash registers, faucet handles, and cabinet/drawer pulls
 - Menus, and condiment dispensers and napkin dispensers
 - · Other items and surfaces frequently touched by employees or customers
- At this time, avoid accepting reusable utensils from customers (food containers, traveler cups, etc.)
- Provide condiments, utensils, and napkins to customers upon request rather than on a self-serve basis to minimize contact

Food Facility Employee Health: Ill employees should be not be allowed in the food facility. Maximize flexibility in use of sick leave to facilitate such time off. An employee who is experiencing fever and respiratory symptoms and who has tested negative for COVID-19 should stay home until they are fever-free for at least 24 hours without the use of fever-reducing medications. If an employee has been diagnosed with COVID-19 and the employee worked at any time after their symptoms began, cease operations until the facility can be thoroughly cleaned and sanitized. The facility may reopen after that has occurred. All individuals who have had close contact with a person diagnosed with COVID-19 should go home and stay home in quarantine until it has been at least 14 days since their last contact with the infectious individual:

a. Exposed Individuals in quarantine should keep themselves away from others in the household as much as possible until it has been 14 days from their possible exposure. They should use a separate bedroom and bathroom, if possible, than other household members.

- If exposed individuals need to have contact with household members, the exposed individual should wear a surgical mask for the duration they have contact with household members.
- c. If the exposed individual develops symptoms within the 14-day self-quarantine period, they should contact their medical provider or the Monterey County Health Department (831-755-4521).

All directives included in the Monterey County Health Officer Shelter in Place Order and during public health investigations must be followed.

If you would like to submit a complaint about restaurants, bars, or other retail food facilities that are found to be operating outside of these restrictions, you can call our office at (831)755-4505 or submit a complaint online.

VARIANCE TO STAGE 2 OF CALIFORNIA'S ROADMAP TO MODIFY THE STAY-AT-HOME ORDER

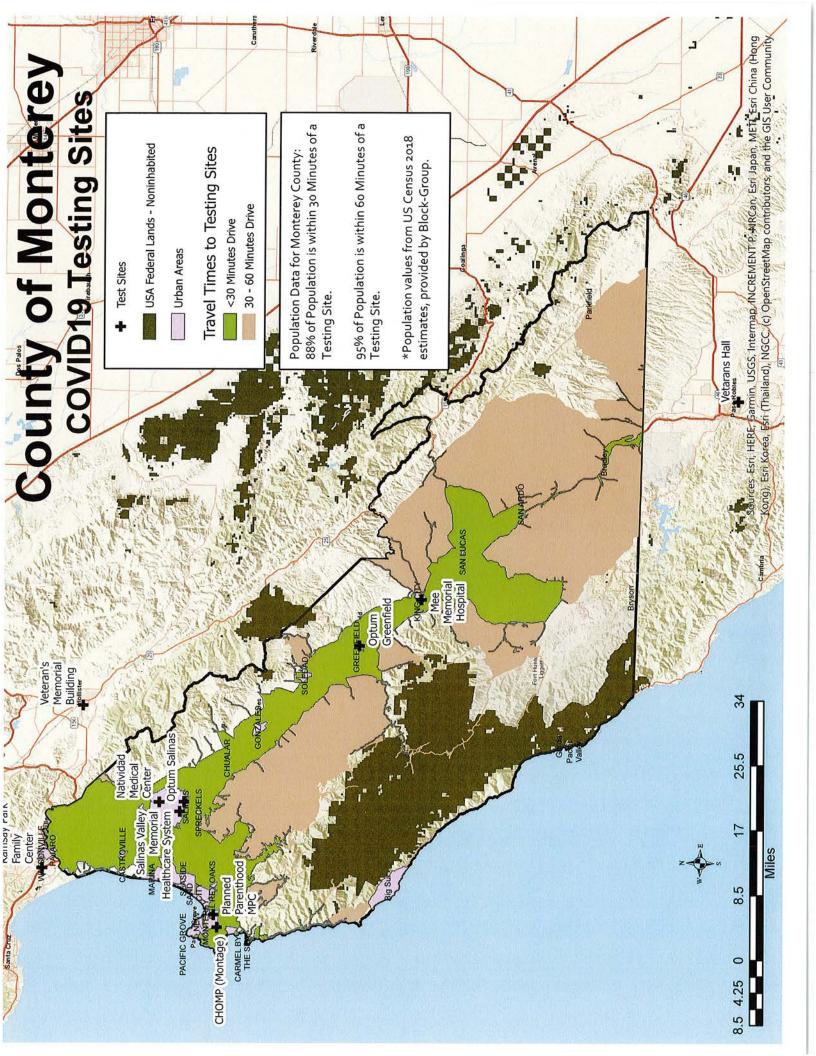


COVID-19 VARIANCE ATTESTATION FORM

FOR Monterey County

Appendix II

A. County of Monterey COVID-19 Testing Sites



VARIANCE TO STAGE 2 OF CALIFORNIA'S ROADMAP TO MODIFY THE STAY-AT-HOME ORDER



COVID-19 VARIANCE ATTESTATION FORM

FOR Monterey County

Appendix III

A. Monterey County COVID-19 Surveillance Plan



COUNTY OF MONTEREY HEALTH DEPARTMENT

Elsa Jimenez, Director of Health

Administration Behavioral Health Clinic Services Emergency Medical Services Environmental Health/Animal Services

Public Health
Public Administrator/Public Guardian

Nationally Accredited for Providing Quality Health Services

2019 Novel Coronavirus Disease (COVID-19) Surveillance Plan

2019 Novel Coronavirus Disease (COVID-19) is a highly infectious respiratory disease caused by the SARS-CoV-2 virus. The Monterey County Health Department initiated preparedness activities in mid-January 2020 to increase pandemic readiness. The Monterey County Department Operations Center (DOC) activated on March 25, 2020, in response to Monterey County's first confirmed COVID-19 case. Surveillance represents one important component of the DOC's response.

Purpose

Public health surveillance is the ongoing, systematic collection, analysis, and interpretation of health-related data essential to planning, implementation, and evaluation of public health practice. The goals of the COVID-19 surveillance plan are to:

- Monitor spread and intensity of COVID-19 disease
- Understand disease severity and the spectrum of illness
- Understand risk factors for severe disease and transmission
- Monitor for changes in COVID-19
- Estimate the disease burden
- Inform policy decisions and evaluate their impacts
- Understand potential impacts on health care system capacity

Surveillance information can be used to support better understanding of transmission, disease severity, and social disruptions associated with COVID-19 and inform the public health response. This plan is currently operationalized in accordance with the following public health priorities:

 Increase laboratory testing and reporting to detect cases quickly and reliably for timely public health action.

- Increase proactive monitoring for asymptomatic cases in settings with vulnerable populations.
- Use surveillance information to monitor local disease trends and identify if thresholds have been met for releasing or restricting social distancing policies and other public health measures.

This plan should be considered as a supplement to the Monterey County Health Department's Epidemiology and Surveillance Response plan.

Authority

Public health surveillance is critical for controlling the spread of COVID-19. Legal authority for actions related to COVID-19 surveillance and response is provided to the Monterey County Health Officer by California Health and Safety Code Sections 101185, 102275, 103949, 121360, 120125-120155, and Sections 120175-120250.

Information Gathering

Monterey County Health Department maintains the ongoing capability to collect, track, analyze and report patient (case) information across Monterey County as part of its all-hazards preparedness and decision support processes. Information gathering consists of several different systems and processes:

Provider Reporting

Suspected and confirmed cases of COVID-19 are required by Title 17 Section 2500 of the California Code of Regulations to be immediately reported by medical providers to the Monterey County Health. Reports are evaluated by Monterey County Health Department staff based on the Counsel of State and Territorial Epidemiologists' (CSTE)'s nationally standardized surveillance case definition. Reports are entered into the California Reportable Disease Information Exchange (CalREDIE), which is a statewide confidential and secure system. Health Department staff will work with local providers to improve the accuracy, completeness, and timeliness of reporting.

Case and Contact Interviews

Provider reporting information is combined with laboratory reports to initiate case and contact investigations, the process for which is outlined in the separate 2019 Novel Coronavirus Disease (COVID-19) Case and Contact Investigation Protocol. Monterey

County Health Department will interview all probable and confirmed cases. Contact investigations will be initiated for every case. Interviews are a source of rich information regarding risk, exposure, and demographics. Interview and other investigation information will be entered into CalREDIE (for cases) and the Monterey County Health Department's COVID-19 contact database (for contacts). When available, the Monterey County Health Department will transition to the statewide contact tracing database for contact information.

Death Certificate Review

Death certificates are reviewed weekly through the Electronic Death Registration System (EDRS). Fatalities with COVID-19 indicated as an immediate, underlying or contributing cause of death are cross-reference with cases in CalREDIE.

Admission and Discharge Reports

The California Hospital Association's dashboard of hospital data is reviewed daily. COVID-19 hospitalization census is monitored, as are current hospital and ICU bed census and PPE availability. Skilled Nursing Facility data are received daily from the Region II Regional Disaster Medical Health Specialists (RDMHS) and include census, COVID-19 cases, and PPE availability.

Laboratory Testing

Monterey County Health Department will follow the most current CDC and CDPH guidance for prioritizing laboratory testing.

Testing for Diagnosis and Clinical Management

Positive, negative, and inconclusive SARS-CoV2 test results are required by Title 17 Section 2505 of the California Code of Regulations to be reported daily by laboratories through CalREDIE's Electronic Lab Reporting (ELR) module. Reports received by fax are manually entered into CalREDIE. Laboratory reports are used to initiate case investigations. Health Department staff will work with local laboratories to increase testing capacity, improve reporting thoroughness and timeliness, and to acquire adequate testing supplies to support the health care system. Case and contact investigators will link exposed and symptomatic individuals to testing sites that are convenient for clients to access.

Monterey County Health Department will review local epidemiology to inform decisions on where to place new testing sites and if the number and location of testing sites are sufficient to meet the needs of the community.

Surveillance Testing

Increasing evidence suggests that asymptomatic infections play an important role in the epidemiology of SAR-CoV-2 infections. Testing for asymptomatic infection will focus on individuals with an increased likelihood of infection and on settings with vulnerable

populations. Monterey County Health Department will prioritize surveillance testing among the following:

- Health Care Workers
- First Responders
- Other Essential Workers
- Contacts to COVID-19 Cases
- Residents and Staff of Skilled Nursing Facilities
- Residents and Staff of Other Congregate Living Facilities
- Inmates and Staff at Correctional Facilities

Monterey County Health Department staff will work with skilled nursing facilities to support the development of their surveillance, containment, and mitigation plans. Health Department staff will link skilled nursing facilities with local resources to assist with specimen collection, provide specimen testing kits (depending on supply levels), advise on PPE issues, and guide testing strategies. Staff will provide guidance to skilled nursing facilities on frequency of surveillance testing among staff and residents. Current recommendations are for monthly surveillance testing in facilities without known COVID-19 cases and bi-weekly for those with positive cases.

Monterey County Health Department staff will review County Jail COVID-19 infection control and surveillance protocols, provide suggestions for improvement, and guide testing strategies. Staff will also work with local medical providers, schools, city managers, and businesses to promote the OptumServe test sites via social media standard news media. Staff will work with community-based organizations to explore ways to assist with scheduling appointments for residents who need assistance navigating the process.

The Monterey County Health Department is exploring serologic testing by the Public Health Laboratory. When serologic testing is available and reliable, the Monterey County Health Department will utilize serologic testing to increase understanding of COVID-19 exposures in the population.

Environmental Monitoring

Monterey County Health Department's Public Health Laboratory is exploring wastewater testing as an additional method of COVID-19 surveillance. This aspect of surveillance will be developed as more information is obtained about methodology and interpretation of results.

Syndromic Surveillance

Monterey County Health Department is currently in the process of transitioning from EARS to BioSense for analyzing hospital chief complaint data. It is expected that the syndromic surveillance program will be functioning in early fall and implemented with the beginning of influenza season.

Immunization Registry

When a COVID-19 vaccine becomes available, Monterey County Health Department will encourage providers to utilize the California Immunization Registry (CAIR2) for documentation of all doses of COVID-19 vaccine administered. Monterey County Health Department will also enter immunizations it administers in CAIR2 as well.

Data Analysis

Data will be extracted from the above systems and analyzed in SAS. Counts, rates, and proportions will comprise most of the statistical analyses. However, when appropriate, forecasting, regression, and other statistical tests will be utilized.

Basic surveillance information (number of new cases, race/ethnicity, age group, and region of residence) will be analyzed daily. Other indicators and metrics will be reviewed on a weekly basis.

Indicators and Metrics

In addition to tracking basic demographic and risk factors, COVID-19 surveillance will consist of the following indicators and metrics:

Indicator or Metric	Measure	Data Source
	14-day cumulative incidence is <25 per 100,000 population	CalREDIE
	Percent of cases reached is ≥90%	CalREDIE
Ability to test, contact trace,	Percent of cases isolated is ≥90%	CalREDIE
isolate, and support the exposed	Percent of cases with ≥1 contact elicited is ≥90%	CalREDIE
	Percent of contacts reached is ≥90%	Monterey County Contacts Database
	Percent of residents within 30 (urban) to 60 (rural) minutes' drive time is ≥75%	

	Current testing volume is ≥1.5 tests per 100,000 population	CalREDIE, Apollo
	Percent of tests that are positive is ≤8%	CalREDIE, Apollo
	Number of deaths is stable or decreasing for 14 days	CalREDIE, EDRS
>	Proportion of cases among healthcare workers is stable or decreasing for 14 days	CalREDIE
Ability to protect those at high risk for COVID-19	Proportion of cases associated with correctional facilities is stable or decreasing for 14 days	CalREDIE
	Percentage of skilled nursing facilities with no new cases in the last 14 days is ≥75%	CalREDIE, CDPH SNF Survey
	Percentage of skilled nursing facilities with ≥14- day supply of PPE is ≥75%	CDPH SNF Survey
	Number of hospitalized cases is stable or decreasing for at least 14 days	CalREDIE, California Hospital Association
Surge capacity for hospitals	Percentage of surge beds available in the last 14 days is ≥35% of last 14-day average of filled surge beds	California Hospital Association
and health systems	Percentage of ICU beds available in the last 14 days is ≥35% of last 14-day average of filled ICU beds	California Hospital Association
	Percentage of hospitals with ≥14 days' supply of PPE is 100%	California Hospital Association
	Overall test positivity rate for the past 7 days is <8%	CalREDIE, Apollo
General Surveillance	Percent change in confirmed COVID-19 cases hospitalized, averaged over 7 days is <5%	CalREDIE, California Hospital Association
	Stable or increasing case doubling time in days	CalREDIE
Therapeutics development to meet demand	In Development	CalREDIE, CAIR2

Ability for businesses, schools, and childcare facilities to support physical distancing	In Development	
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Reporting

COVID-19 case and laboratory information are shared in real-time with CDPH through use of CalREDIE. Tests conducted by the Monterey County Health Department are reported daily to CDPH in the format required by CDPH. Other ad hoc reports required by CDPH will be completed in the format and timeframe requested.

Information Dissemination

Surveillance information will be information daily, weekly, and monthly as appropriate via Internet publication, fax, social medial, and email to various community stakeholders including hospitals, clinics, private medical providers, congregate living facilities, schools, daycares, community organizations, businesses, and media outlets. In addition, Monterey County Health Department staff will present information at various stakeholder meetings and governmental meetings throughout the pandemic.

Evaluation

Organizational learning is an important aspect of all public health events. The iterative cycle of planning, testing, measuring, and improving will occur. Each of the surveillance systems outlined above will be reviewed monthly, or sooner as the need arises, for the each of the following attributes:

- Simplicity
- Flexibility
- Accuracy
- Precision
- Timeliness

· Amount of resources needed to maintain

Evaluation of surveillance systems will be conducted by a senior public health epidemiologist. Results will be reviewed with the Communicable Disease Prevention and Control Program Manager, Health Officer, and Assistant Director of Public Health.

Plan Review

It is the responsibility of the Monterey County Health Officer and the Monterey County Health Department's Public Health Bureau to function as the administering agency of this plan. The Monterey County Health Department's Epidemiology and Surveillance Unit will be responsible for maintaining and updating this plan.

The plan was drafted on April 25, 2020, by:

- Edward Moreno, MD, Health Officer and Director of Public Health
- Brandon Gates, MPH, Public Health Program Manager I
- Kristy Michie, MS, Assistant Director of Public Health

This plan will be reviewed and updated, if necessary, every two years unless required sooner due to changing recommendations by the CDC or CDPH as well as due to evolving information about the COVID-19.

VARIANCE TO STAGE 2 OF CALIFORNIA'S ROADMAP TO MODIFY THE STAY-AT-HOME ORDER



COVID-19 VARIANCE ATTESTATION FORM

FOR Monterey County

Appendix IV

- A. Monterey County Health Department COVID-19 Guidance for Long-Term Care Facilities
- B. Discontinuation of Isolation for Suspected and Confirmed COVID-19 Patients



Current Status: There is sustained community transmission of Coronavirus Disease 2019 (COVID-19) within Monterey County.

The Monterey County Health Department recommends all congregate living facilities take the following actions:

Facilities in Preparation Stage (No Residents or Staff with Suspected or Confirmed COVID-19):

- Implement the guidance outlined on the Centers for Disease Control and Prevention's (CDC's) website titled "Preparing for COVID-19: Long-Term Care Facilities, Nursing Homes" available at: https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.https//dac-https//dac
 - Actively monitor all residents upon admission and at least daily for fever and respiratory symptoms (shortness of breath, new or change in cough, and sore throat).
 - Observe staff compliance with hand hygiene. Provide feedback to increase compliance.
 - c. Continue to make attempts to secure personal protective equipment (PPE) including gowns, gloves, surgical masks, eye protection, and N95 respirators. If a facility is unable to procure PPE or other needed resources, complete and submit a Monterey County Medical/Health Resource Request Form available at: https://www.co.monterey.ca.us/home/showdocument?id=88057.
 - d. Make plans for isolating residents with respiratory symptoms in a room with a door that closes, dedicating a wing or area of the facility as a COVID-19 care ward, and for cohorting staff to care for residents with respiratory symptoms.
 - Restrict visitation and non-essential services (e.g., hair stylist visits). Educate
 residents and family members about visitor restrictions and alternative ways to
 stay in contact.
 - f. Increase cleaning of wards and commonly touched surfaces with an EPAapproved disinfectant for COVID-19 (<u>https://www.epa.gov/pesticideregistration/list-n-disinfectants-use-against-sars-cov-2</u>).
- Train staff on proper procedures for donning and doffing PPE: https://www.cdc.gov/hai/prevent/ppe.html. Assure staff have been medically cleared and fit-tested for the type of N95 respirators in the facility. Inform staff where to don and doff before and after entering an ill resident's room.
- Implement a facility-wide health care worker masking policy. Ill health care workers and visitors are the most likely sources of COVID-19 introduction into the facility. There is growing evidence of pre-symptomatic transmission of COVID-19. Staff



should wear a surgical mask while on duty to prevent inadvertent transmission of COVID-19 from staff to residents and to other staff members.

- 4. Follow routine waste management, laundry, and food service procedures.
- 5. Cancel group activities. Maintain at least 6 feet between residents
- 6. Review supply delivery protocols and modify as needed to reduce the amount of time that vendors spend in the facility.
- 7. Review Human Resources policies. Make sure policies support staff who self-report illness and stay home when potentially infectious.
- 8. Plan for how your facility will operate with a 25% to 33% staff illness/absentee rate.
- 9. Educate staff on measures they can take to protect their own families like washing hands, showering and changing clothes immediately when arriving home from work.
- 10. Know how to contact the Monterey County Health Department both during business hours and on weekends and evenings.
 - a. Business Hours: 831-755-4521 and indicate you are a health care provider when prompted.
 - b. Outside Normal Business Hours: 831-755-5100 and ask for the Hazardous Materials Team. They will connect you with the on-call Health Officer.

Facilities in Response Stage (Residents and/or Staff with Suspected or Confirmed COVID-19):

- Immediately report all suspected clusters of respiratory illness to the Monterey County Health Department.
 - a. Business Hours: 831-755-4521 and indicate you are a health care provider when prompted.
 - b. Outside Normal Business Hours: 831-755-5100 and ask for the Hazardous Materials Team. They will connect you with the on-call Health Officer.
- Actively monitor staff and residents for signs of new or worsening respiratory illness.Track ill residents and staff on a line list like the list used during influenza outbreaks.
- 3. If not done previously, suspend groups activities including group dining.
- 4. Follow routine waste management, laundry, and food preparation procedures.
- 5. Use dedicated medical equipment for patient care.



- 6. Implement protocols for cohorting ill residents with staff dedicated to the cohort. Minimize the number of staff entering the rooms of ill residents. Consider having the same staff who care for the resident also perform cleaning tasks within the room.
- 7. Residents with known or suspected COVID-19 do not need to be placed into an airborne infection isolation room (AIIR) but should ideally be placed in a private room with their own bathroom. Room sharing will likely be necessary if there are multiple residents with known or suspected COVID-19 in the facility.
- 8. Do not move roommates of residents with known or suspected COVID-19 out of the room. As roommates of symptomatic residents might already be exposed and incubating COVID-19, it is generally not recommended to separate them in this scenario because it may cause further spread of the virus in the facility.
- Require staff to wear all recommended PPE (gown, gloves, eye protection, N95
 respirator, or if not available, a surgical facemask) while caring for symptomatic
 residents.
 - a. Use respirators based on availability prioritizing 1) fit-tested respirator, 2) respirator that has not been fit-tested, 3) expired respirator, 4) non-medical grade respirator. If no respirator is available, wear a surgical facemask.
 - b. Don PPE before contact with the patient, ideally just before entering the room.
 - c. Carefully remove and discard PPE, either at the doorway or immediately outside the patient room. Remove respirator outside room when room door is closed. Immediately perform hand hygiene after doffing.
- 10. Consider having staff wear all recommended PPE (gown, gloves, eye protection, N95 respirator or, if not available, a facemask) for the care of <u>all</u> residents, regardless of presence of symptoms.
- Implement protocols for extended use of eye protection and facemasks. CDC guidance is available at https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/index.html.
- 12. Restrict residents (to the extent possible) to their rooms except for medically necessary purposes. If they leave their room, residents should wear a facemask, perform hand hygiene, limit their movement in the facility, and perform social distancing (stay at least 6 feet away from others).
- 13. Only transfer residents with suspected or confirmed COVID-19 infections to higher acuity health care settings (e.g., hospitals) when clinically indicated.
 - a. Prior to transfer, the facility MUST notify transport personnel and the receiving facility about the suspected diagnosis.
 - b. Review additional guidance outlined in the California Department of Public Health's (CDPH) May 15, 2020, AFL 20-33.2 titled "Interim Guidance for Transfer



of Residents with Suspected or Confirmed Coronavirus Disease (COVID-19)." This AFL can be accessed at:

https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/LNCAFL20.aspx.

- c. Hospital beds must be reserved for patients needing higher levels of care and should not be used to isolate individuals with mild COVID-19 illness.
- d. Hospitals and long-term care facilities should work with the Monterey County Health Department when re-admitting residents.
- 14. Exclude ill workers until all the following criteria have been met: 1) Their symptoms have improved for at least 72 hours, AND 2) They have been fever-free without the use of fever-reducing medications for at least 72 hours, AND 3) it has been at least 10 days since they first became ill.
- 15. Residents should be considered infectious until all of the following criteria have been met: 1) Their symptoms have improved for at least 72 hours, AND 2) They have been fever-free without the use of fever-reducing medications for at least 72 hours, AND 3) it has been at least 7 days since they first became ill.
 - a. Consider extending transmission-based precautions beyond these criteria for individuals with immunocompromising conditions.
- 16. Additional resources, guidance documents, sample signage, and other information can be found at:
 - a. Monterey County Health Department: www.mtyhd.org/covid19
 - b. California Department of Public Health (CDPH) www.cdph.ca.gov/covid19
 - c. Centers for Disease Control and Prevention (CDC) www.cdc.gov/covid19

Discontinuation of Isolation for Suspected & Confirmed COVID-19 Patients

Receiving Institution	Laboratory-Confirmed Patients
LTAC (Long-Term Acute Care)	Patients with confirmed COVID-19 may be transferred following 1 of the 3 criteria: 1. 10 days have passed since admission AND no fevers for 72 hours without the use of fever reducing medications.
SNF (Skilled Nursing Facility)	 Continue standard, contact, and droplet transmission-based precautions at the receiving facility.*
	 Resolution of fever without the use of fever-reducing medications AND improvement of respiratory symptoms (e.g. cough, shortness of breath), AND two serial negative tests for SARS-CoV-2, drawn at least 24 hours apart. No transmission-based precautions required for transfer.
Group Living	 3. 14 days have passed since admission AND no fevers for 72 hours without the use of fever reducing medications and clinical improvement for at least 72 hours. No transmission-based precautions required for transfer.

Facilities should be prepared to accept confirmed COVID-19 patients when the Transfer Requirements are met.

*Transmission-based precautions should be continued for 14 days after hospital admission. Patient should be preferably placed in a location designated to care for COVID-19 patients. The patient may be placed in a shared room with other confirmed COVID patients.

In cases of hospital overload, this discharge guidance may be adjusted by the Monterey County Health Department (MCHD). Patients should not be transferred if the receiving facility cannot maintain Transmission Based Precautions.

Hospitals are asked to notify MCHD when discharging laboratory confirmed COVID-19 patients. MCHD approval is not required prior to discharge; however, MCHD must be aware of the patient's status and location.

https://www.cdc.gov/coronavirus/2019-ncov/hcp/dispositio n-hospitalized-patients.html, 2020. Zou et al. NEJM March 18, 2020, Gautret et. al. (2020) International Journal of Antimicrobial Agents, March 2020.









Discontinuation of Isolation for Suspected & Confirmed COVID-19 Patients

Receiving Institution	Suspected COVID-19 Patients
LTAC (Long-Term Acute Care)	 Patients who meet all of the following criteria are at Low Risk for having COVID-19: No known contact with a confirmed or suspect case; Transferred from a healthcare facility not experiencing a COVID-19 outbreak; Clinical suspicion of COVID-19 is low.
SNF (Skilled Nursing Facility)	Three transfer scenarios: 1. If the patient was admitted for non-infection related reason, (i.e. cerebrovascular accident or fall) and had no fever or respiratory symptoms of infection; or
	 If the patient was admitted for infectious syndrome not consistent with COVID-19 and another etiology is established (e.g. cellulitis, bacteremia) → the patient may be transferred to accepting facility and does not require testing nor
Group Living	transmission-based precautions.* 3. If the patient was admitted for an infectious syndrome possibly consistent with COVID-19 (i.e. fever, malaise, cough) and they meet ALL of the following criteria: a. Alternative diagnosis established, confirmed with microbiologic or virology testing; b. Clinical improvement and no fevers 72 hours without the use of fever reducing medications; AND c. One negative SARS CoV-2 test. → the patient may be transferred to accepting facility and does not require transmission-based precautions. → if all three criteria not met, follow interfacility transfer rules for laboratory confirmed COVID-19
	 2) Patients who meet any of the following criteria are at High Risk for having COVID-19: Contact with a confirmed or suspect case; Transferred from a healthcare facility experiencing a COVID-19 outbreak; OR Clinical suspicion of COVID-19 is high. If patient meets the following criteria: Two serial negative tests for SARS CoV-2, drawn at least 24 hours apart, then: ⇒ patient may be transferred. Transmission-based precautions at receiving facility should be discontinued after patient has been afebrile for 72 hours without the use of fever reducing medications AND clinical improvement. ⇒ otherwise, follow interfacility transfer rules for laboratory confirmed COVID-19.

Facilities should be prepared to accept suspected COIVD patients when the Transfer requirements are met.

*No current requirement to initiate Transmission Based Precautions for COVID-19 after hospital discharge. Receiving facility, at their discretion, may implement Transmission Based Precautions. Receiving facility should not ask the sending facility for additional COVID-19 testing. 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.









Discontinuation of Isolation for Suspected & Confirmed COVID-19 Patients

In cases of hospital overload, the Monterey County Health Department (MCHD) may adjust this discharge guidance.

https://www.cdc.gov/coronavirus/2019-ncov/infection-control/control-recommendations.html Zou et.al. NEJM March 18, 2020

Home Discharge of Patients with Laboratory Confirmed COVID-19

Receiving Institution	Discharge Criteria
Home or Non- Congregate, Non-Healthcare Setting	 10 days since symptom onset AND afebrile for at least 72 hours without the use of fever reducing medications AND clinical improvement of symptoms for at least 72 hours. No restrictions. Patient is considered non-infectious for the purpose of discharge and isolation.
	 Less than 10 days since symptom onset Notify MCHD (business hours: 831-755-4521; weekends and evenings: 831-755-5100 and ask for Hazardous Materials team, who will connect you with on-call Health Officer Transport home by private conveyance or medical transport. (Avoid public transportation, no rideshare/taxi.) Provide guidance on self-isolation until end of infectious period. Advise any household members that they will need to self-quarantine for at least 14 days after last contact with this patient. Provide home quarantine instructions. If the patient lives with others and is not able to adequately self-isolate advise that: The self-quarantine period of all household members will be extended to 14 days after the end of the patient's isolation period Every effort should be made to relocate household members at risk for experiencing severe illness if infected (e.g., age>65 years, pregnant, and/or medical co-morbidities)

Hospitals are asked to notify MCHD when discharging laboratory confirmed COVID-19 patients. MCHD approval is not required prior to discharge; however, MCHD must be aware of the patient's status and location.











VARIANCE TO STAGE 2 OF CALIFORNIA'S ROADMAP TO MODIFY THE STAY-AT-HOME ORDER



COVID-19 VARIANCE ATTESTATION FORM

FOR Monterey County

Appendix V

- Guidance for Farmer's Markets
- COVID-19 Infection Prevention and Control Guidance for Employers that Offer
- Employee Housing
- Social Distancing Protocol for Employee Housing
- COVID-19 Shelter in Place Expectations for Food Facilities

Novel Coronavirus (COVID-19)

County of Monterey Health Department Farmer's Markets and Community Events

Due to the increasing number of cases in neighboring counties, including more community transmission and recent guidance issued by the California Department of Public Health as it relates to COVID-19 and public gatherings, community events at Farmer's Markets must be cancelled or postponed until after April 30, 2020 and will not be issued a health permit to operate. Community events that were previously approved and permitted will be notified that their permit is suspended and will be issued the option of rescheduling the event or requesting a refund for the fees paid.

In light of the need to ensure that fresh food is available to residents, outdoor Certified Farmer's Markets that are certified by the State of California and have obtained a health permit for a Certified Farmer's Market will be allowed to operate if the conditions noted below are implemented.

Certified Farmer's Markets modified operational conditions:

- Limit the sale of food to whole uncut produce and packaged food items. No food preparation food booths will be allowed to operate.
- No sampling of unpackaged food is permitted.
- Post signs reminding customers of the following:
 - Wash all produce before consumption
 - Handwashing Reminder
 https://www.co.monterey.ca.us/Home/ShowDocument?id=23911
 - Asking customers to remain home if they are sick, even with mild illness. https://www.co.monterey.ca.us/home/showdocument?id=87857
- Market managers are responsible for ensuring that crowds are staggered to provide for social distancing of customers.
 - Allow for space between produce stands
- Provide handwashing stations for customers where possible. Recommend providing alcohol-based hand sanitizer with at least 60% alcohol for customers to use prior to handling produce.
- Ensure handwashing stations are provided adjacent to restroom facilities and stocked with soap and paper towels at all times.

Certified Farmer's Market Employees

- Sick employees are advised to stay home and not return to work until they are free of fever for at least
 72 hours without fever-reducing medication.
- Employees who appear to be ill upon arrival to work or become sick during the day should be sent home immediately.

-1-

Handwashing Instructions for All Market Employees

- Wash hands and arms with soap and warm water for at least 20 seconds before:
 - Eating or drinking
 - Putting on gloves
- Wash hands after these activities:
 - Using the restroom
 - o Touching your hair, face, body, or clothes



Novel Coronavirus (COVID-19)

County of Monterey Health Department Farmer's Markets and Community Events

- Sneezing, coughing, or using a tissue
- o Smoking, eating, drinking, or chewing gum
- o Emptying or taking out the garbage
- Handling money and making change
- o Removing gloves
- After engaging in other activities that might contaminate the hands
- Recommend assigning an employee at every shift to ensure that handwashing sinks are stocked with soap and paper towels at all times.
- Recommend using gloves appropriately as an additional tool, but it is important to remember that gloves
 do not replace the need to wash hands and practice good hand hygiene.

General Cleaning

- Clean and disinfect all "high-touch" surfaces such as tabletops, cash register counters, restroom fixtures
 and handwashing sinks, and trash cans frequently.
- Use an Environmental Protection Agency (EPA)-registered product that cleans (removes germs) and disinfects (kills germs). Always follow the instructions on the labels of cleaning products and disinfectants.

Effective Disinfectants

- To make a bleach solution, mix 1 tablespoon of bleach to 1 quart (4 cups) of water. For a larger supply, add ¼ cup of bleach to 1 gallon (16 cups) of water. Use the solution within 20 minutes. Use test strips to test chlorine solution (100 ppm).
- Other EPA-approved disinfectants may be used if they are effective against Coronaviruses. Consumer may contact the "1-800" number on product label for its effectiveness against "COVID-19".

Proper Handling of Disinfectants, Items and Waste

- Use chemicals in a well-ventilated area.
- Avoid mixing incompatible chemicals (read label).
- · Prevent chemical contact with food during cleaning.
- Manage waste safely and dispose in a secure trash container.

Market Managers are responsible for ensuring compliance with the above conditions.

For more information on Covid-19 visit: https://www.co.monterey.ca.us/government/departments-a-h/health/diseases/2019-novel-coronavirus-2019-ncov or call the Monterey County Information line 2-1-1 which is available 24 hours a day.





COUNTY OF MONTEREY HEALTH DEPARTMENT

Elsa Jimenez, Director of Health

Administration Behavioral Health Clinic Services Emergency Medical Services Environmental Health/Animal Services

Public Health
Public Administrator/Public Guardian

Nationally Accredited for Providing Quality Health Services

COVID-19 Infection Prevention and Control Guidance for Employers that Offer Employee Housing

The COVID-19 pandemic poses a threat to public health. There is no vaccine to prevent the disease and no treatment at this time. The most effective way to slow the spread of the virus is through social distancing. The Monterey County Health Officer has issued a Shelter in Place order which requires individuals to remain at their residence and to only leave their residence to provide or receive essential services. The Order recognizes the agricultural industry as an essential service. As such, agriculture employers and employees may continue to work under the Shelter in Place Order. However, agriculture employers must implement social distancing measures to the extent possible in order to limit risk of exposure to employees. This Guidance document provides strategies that employers can take to prevent exposure to COVID-19 and steps to take if an employee is suspected or confirmed to be infected with COVID-19.

Employee Housing Facilities Include:

- Monterey County Permitted Agriculture worker housing facilities:
 - H2A housing permitted by County or California Housing and Community Development within incorporated cities.
 - Employee Housing accommodations include:
 - Single Family Dwellings
 - Apartments
 - Dormitories
 - Mobile Homes
 - Hotels/Motels

Employee Health and Best Sanitation Practices:

- Social Distancing Requirements: Employees must achieve space between each other of approximately 6 feet.
- **Bed Separation:** Ensure beds are arranged alternately head-to-toe to reduce spread of diseases and a far apart as possible to adhere to the six-foot distance.
- All employers should implement good hygiene and infection control practices, including:
 - All employees will be housed in rooms meeting state housing code requirements to prevent overcrowding.
 - Promote frequent and thorough hand washing, including by providing workers with a place to wash their hands. If soap and running water are not immediately available, provide alcohol-based hands rubs containing at least 60% alcohol.
 - Encourage respiratory etiquette, including covering coughs and sneezes.
 - o Discourage workers from using other worker's work tools and equipment, when possible.
 - Increase frequency of housekeeping practices, including routine cleaning and disinfecting surfaces, equipment, and other elements of the work environment.
 - Ensure housing units have adequate supplies of disinfectants and sanitizers.

Toilet and Bathing Facilities:

- Employers must provide washing facilities that have an adequate supply of cleansing agents, water and single-use towels or hand dryers.
- Schedule or reduce number of large groups of employees showering/bathing at the same time.

Community Kitchens/Mess Halls/Mess Hall Kitchen:

- Remind employees of best hygiene practices including washing their hands often with soap and water for at least 20 seconds.
- Increase frequency of cleaning and sanitizing of all hard surfaces, including tables, counter tops and
 cooking utensils that are being utilized by employees and patrons during pickup/delivery options. Please
 refer to the CDC's website to obtain guidance for "Cleaning and Disinfecting your facility" and "Cleaning
 and Disinfecting your facility for those who house people overnight."
- Staff or employees working in a kitchen should always practice social distancing, making sure to
 maintain a 6-foot distance between themselves and other staff members. Staff should follow social
 distancing guidelines such as: washing hands before and after restroom use, washing hands before and
 after equipment/field work, using hand sanitizer. Staff or employees should not use the kitchen area if ill,
 and when coughing or sneezing use a tissue and immediately dispose of it.
- Employees should not sit in groups.
- Stagger food service hours to ensure distancing for large groups of employees.

Transportation of workers:

- Employers are to transport workers in vehicles that do not violate social distancing requirements (be able
 to sit at least 6 feet apart). If necessary, additional vehicles or multiple trips will be required to transport
 all workers to and from the work site.
- Employees should not be transported to any site that is considered a non-essential operation (park, mall, theater etc.).

Food deliveries:

- Ensure social distancing while food is delivered or picked up by employee when applicable. Employees should always practice social distancing, making sure to maintain a 6-foot distance between themselves and other staff members whenever feasibly possible.
- Ensure proper social distancing of employees receiving or ordering food provided by a catering service or mobile food preparation unit.
- · Food should not be eaten in large groups without separation.

Employees Who Have Been Diagnosed with COVID-19 (in Isolation):

- Encourage workers to stay home if they are sick or show symptoms of illness. CDC recommends that
 employees who appear to have acute respiratory illness symptoms (i.e., fever, cough, shortness of
 breath) upon arrival to work or become sick during the day should be separated from other employees
 and be sent home immediately.
- Contact the Monterey County Health Department at 831-755-4521 if any individual tests positive for COVID-19 to assist in the evaluation and/or testing of any other employees housed within the same living quarters.
- Employees who are sick and have been diagnosed with COVID-19 can pass the virus to others who
 come in close contact with them. Close contact is defined as spending 15 minutes or more within 6 feet
 of a person diagnosed with COVID-19 while they were sick and/or infectious.
- Employees who have been diagnosed with COVID-19 must self-isolate until they are cleared by the
 Monterey County Health Department's Communicable Disease Unit. Employees must self-isolate until
 they have been fever-free for at least 3 days without the use of fever-reducing medications, their
 symptoms have improved for at least 3 days, and it has been at least 7 days since they first became ill.
 The Communicable Disease Unit will communicate with employees and the employers about release
 from isolation.
- Employers must ensure employees know the limits that apply to sick individuals during the time of isolation:
 - Isolated employees must stay in separate area away others who are not sick with COVID-19, sharing a bathroom only with others who are sick if possible.
 - Avoid having any unnecessary visitors who do not have an essential need to be in the facility.

- Isolated employees should wear a face mask when interacting with others for essential needs.
 Individuals in contact with isolated individuals should also wear a face mask.
- Clean and disinfect all surfaces daily and high-touch surfaces frequently throughout the day. Ill
 individuals who are well enough should clean the isolation area rather than have another
 employee enter the area.
- Avoid sharing household items, such as dishes, drinking glasses, cups, eating utensils, towels, bedding or other items. All items should be washed thoroughly. Use hot water and a hot drying. Individuals in charge of laundry should wear disposable gloves and keep the soiled items away from their body while laundering. Individuals should wash their hands immediately after removing gloves.
- Employers must help with basic needs to the sick employee and provide support for getting personal needs and meals.
- Employee may only leave isolation area to seek medical care.
- Employee may not use public transportation or go to shopping centers.
- Cooperate with Monterey County Health Department directions.
- Isolated employee may not have friends or family with them in their quarantine room or apartment, unless they have been approved by the Monterey County Health Department.
 Employees may keep in contact with family and friends through phone calls, texts, and emails.

Employees Who Have Been Exposed to Someone Diagnosed with COVID-19 (under Quarantine):

- Employees who have been in close contact with someone diagnosed with COVID-19 are at risk of becoming ill and passing the virus to others. Close contact is defined as spending 15 minutes or more within 6 feet of a person diagnosed with COVID-19 while they were sick and/or infectious.
- Employees who have been in close contact with someone diagnosed with COVID-19 must selfquarantine for 14 days after their last contact with the person diagnosed with COVID-19. Employers must ensure employees know the limits that apply to exposed individuals during the time of quarantine (14 days after last known contact):
 - Stay in separate area away from areas where individuals who are sick with COVID-19 are staying and separate from areas where employee who are well and have had no contact with individuals diagnosed with COVID-19 are staying. They should have their own bathroom, if possible.
 - Avoid having any unnecessary visitors who do not have an essential need to be in the facility.
 - Quarantined employees should wear a face mask when interacting with others for essential needs. Individuals in contact with quarantined individuals should also wear a face mask.
 - o Clean and disinfect all surfaces daily and high-touch surfaces frequently throughout the day.
 - Avoid sharing household items, such as dishes, drinking glasses, cups, eating utensils, towels, bedding or other items. All items should be washed thoroughly. Use hot water and a hot drying. Individuals in charge of laundry should wear disposable gloves and keep the soiled items away from their body while laundering. Individuals should wash their hands immediately after removing gloves.
 - o Employees must not leave quarantine location for any non-essential reason.
 - Quarantined employees must not use public transportation or go to shopping centers.
 - Cooperate with Monterey County Health Department directions.
 - Quarantined employee may not have friends or family with them in their quarantine room or apartment, unless they have been approved by the Monterey County Health Department.
 Employees may keep in contact with family and friends through phone calls, texts, and emails.

If you would like to learn more about COVID-19 and the Health Officer Order to Shelter in Place Order, please visit the Monterey County Health Department website at www.mtyhd.org/covid19. If you have questions about COVID-19, please call our Health Department COVID-19 call center at (831) 755-4521.

If you would like to submit a complaint about facilities that are found to be operating outside of Shelter in Place Order, you can call our office at (831) 755-4505 or <u>submit a complaint online</u>. Also, you can download our Monterey County Connect App to report an issue.



MONTEREY COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH BUREAU

1270 Natividad Road, Salinas, CA 93906, (831) 755-4508, FAX (831)755-4880 EHB COVID19 Information Site: mtyhd.org/covid-19-EHB

Social Distancing Protocol for Employee Housing

Comp	any Nai	me/ Email Address:	
List Er	List Employee Housing facilities under your company:		
Signag	ge:		
		ge at each public entrance of the facility to inform all employees and customers ney should:	
	-	avoid entering the facility if they have a cough or fever sneeze and cough into a cloth or tissue, or if not available, into one's elbow not shake hands or engage in any unnecessary physical contact	
	Signag facility	ge posting a copy of the social distancing protocol at each public entrance to the \prime .	
Measu	ures to	Protect Employee Health (Check all that apply to the facility):	
	All em	ployees have been told not to come to work if sick.	
	Symptom checks are being conducted before employees may enter the work site.		
	All desks or individual work stations are separated by at least six feet.		
	Sleeping area, break rooms, bathrooms, and other common areas are being disinfected frequently.		
	 Disinfectant, soap and water, hand sanitizer, and related supplies are a employees at the following location(s): 		
		Portable toilets	
		Food areas such as: Preparation, dining, and other areas where food is consumed	
		Bathroom	
	Copies	of this protocol and COVID-19 Infection Prevention and Control Guidance has	

been distributed to all employees.

Measures to Prevent Crowds from Gathering (check all that apply to the facility):

	Limit the number of employees at any one time to allow for employees to easily maintain at least 6 feet distance from one another at all practicable times.
	MAX number of Employees:people
	Optional—describe other measures.
Measu	ires to Keep People At Least Six Feet Apart (check all that apply to the facility):
	Placing signs throughout the facility reminding employees to be at least six feet apart, including when in line to obtain meals.
	Placing tape or other markings at least six feet apart in employee line areas when obtaining meals with signs directing customers to use the markings to maintain distance.
	Separate employees in the eating areas to prevent customers from gathering.
	All employees have been instructed to maintain at least six feet distance from each other.
	Food being acquired from food trucks (Mobile Food Facility) must be obtained in smaller groups and eat in their rooms if area is not enough to maintain employees 6 feet apart from each other.
	Optional – describe other measures.

ivieasi	ures to Prevent Onnecessary Contact (check all that apply to the facility):
	Preventing people from self-serving any items that are food-related.
	☐ Utensil items are provided by staff.
	☐ Bulk-item food bins are not available for employee self-service use.
	Not permitting employees to bring their own bags, mugs/ utensil, or other reusable items.
	Optional – describe other measures.
Meası	ures to Increase Sanitization (check all that apply to the facility):
	Disinfecting wipes that are effective against COVID-19 are readily available.
	Employee(s) assigned to disinfect personnel area regularly.
	Hand sanitizer, soap and water, or effective disinfectants are available to the public at or near the entrance of the facility, at food delivery area, and anywhere else inside the facility or immediately outside where people have direct interactions.
	Disinfecting all high-contact surfaces frequently.
	Optional – describe other measures.

^{**}Any additional measures not included here should be listed on separate pages, facility must attach to this document ***



COUNTY OF MONTEREY HEALTH DEPARTMENT

Elsa Jimenez, Director of Health

Administration Behavioral Health Clinic Services Emergency Medical Services Environmental Health/Animal Services

Public Health
Public Administrator/Public Guardian

Recipient of The California Endowment's 2017 Arnold X. Perkins Award for Outstanding Health Equity Practice

The County's Health Officer is requiring all food facilities stop dine-in services until the Shelter in Place order for the Corona Virus is lifted. The order is currently in place until further notice. This order is given because of the propensity of the virus to spread person to person and also because the virus physically is causing property loss or damage due to its proclivity to attach to surfaces for prolonged periods of time.

- All food facilities should be closed for seated dining and should be open only to drivethrough or other pick-up/delivery options.
- Please remind employees of best hygiene practices including washing their hands often with soap and water for at least 20 seconds.
- Also increase frequency of cleaning and sanitizing per <u>CDC Environmental Cleaning and Disinfection guidance</u> of all hard surfaces, including tables and counter tops that are being utilized by employees and patrons during pickup/delivery options.

If you have any questions, please refer to the Monterey County Health Department website at: www.mtyhd.org/covid19-foodsafety

Thank you.

El Oficial de Salud del Condado exige que todas las instalaciones de alimentos suspendan los servicios de cena hasta que se levante la orden de Refugio en su Hogar para el Virus Corona. La orden de Refugio en su Hogar se vence a las 11:59 pm del 7 de abril.

- Todas las instalaciones de alimentos deben estar cerradas para cenas sentadas y deben estar abiertas solo para conducir u otras opciones de recogida / entrega.
- Recuerde a los empleados las mejores prácticas de higiene, como lavarse las manos a menudo con agua y jabón durante al menos 20 segundos.
- También aumente la frecuencia de limpieza y desinfección según las pautas de limpieza y desinfección ambiental de CDC de todas las superficies duras, incluidas las mesas y encimeras que utilizan los empleados y clientes durante las opciones de recolección / entrega.

Si tiene alguna pregunta, consulte el sitio web del Departamento de Salud del Condado de Monterey en www.mtyhd.org y www.mtyhd.org/covid19-foodsafety.

Gracias.

VARIANCE TO STAGE 2 OF CALIFORNIA'S ROADMAP TO MODIFY THE STAY-AT-HOME ORDER



COVID-19 VARIANCE ATTESTATION FORM

FOR Monterey County

Appendix VI

- A. Ag Worker Safety Protocol Sign
- B. Ag Worker Safety Protocol Letter
- C. Social Distancing Protocol
- D. Ag Worker Protection Advisory

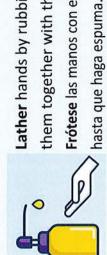
MONTEREY COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH BUREAU

Wash your hands Lávese las manos



Wet hands with clean, running water, and apply soap.

Mójese las manos con agua limpia.



them together with the soap. Frótese las manos con el jabón Lather hands by rubbing



Scrub your hands for at least 20 seconds.

Restriéguese las manos durante al menos 20 segundos.

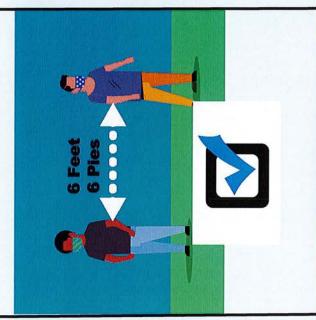


Enjuáguese bien las manos clean running water. Rinse hands under con agua limpia.



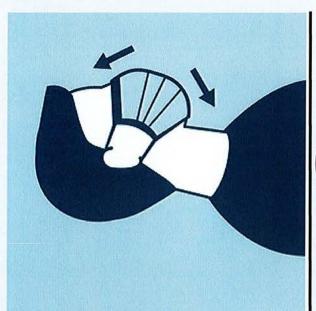
paper towel or air dry them. Séquese las manos con una toalla de papel limpia o al Dry hands using a clean aire.

Evita contacto cercano Avoid close contact





Cover your mouth and nose Cubra su boca y nariz





*Contact our offices, if soap/water/paper towels are not available.

*Póngase en contacto con nuestras oficinas si no hay disponible de toallas de papel/agua/jabón.

1270 Natividad Road, Salinas CA 93906

(831) 755-4508

1200 Aguajito Road, Monterey CA 93940

200 Broadway, Suite 70, King City CA 93930 (831) 386-6899

(831) 647-7654



COUNTY OF MONTEREY HEALTH DEPARTMENT

Elsa Jimenez, Director of Health

Administration Behavioral Health Clinic Services Emergency Medical Services Environmental Health/Animal Services

Public Health
Public Administrator/Public Guardian

Nationally Accredited for Providing Quality Health Services

May 12, 2020

RE: Agricultural Field Toilet Program Employee Housing

To operators:

Please continue to provide and maintain agriculture field toilets and handwash stations in order to reduce the spread of COVID-19 and other diseases. It is important for all employers to take proper precautions, such as:

- Exercise social distancing; keep separation at least 6 feet apart from one another, which includes workers being transported in buses or vehicles.
- Frequent and thorough handwashing; remember 20 second rule. Ensure all handwash stations are replenished with soap, potable water and paper towels at all times.
- Follow face mask protocol.
- Clean and disinfect all surfaces.

Our department will provide the signage (stickers) during our next scheduled inspection to be posted on all handwash stations; however, please feel free to use the attached PDF sign to post where you deem necessary.

Please feel free to call or e-mail if you have any questions.

1270 Natividad Rd Salinas, CA 93906 Phone: (831) 755-4508 Fax: (831) 755-4880

www.mtyhd.org



MONTEREY COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH BUREAU

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Social Distancing Protocol for Employee Housing

Company Name/ Email Address:							
List Er	List Employee Housing facilities under your company:						
Signag	Signag	ge at each public entrance of the facility to inform all employees and customers ney should:					
	-	avoid entering the facility if they have a cough or fever sneeze and cough into a cloth or tissue, or if not available, into one's elbow not shake hands or engage in any unnecessary physical contact					
	Signag facility	te posting a copy of the social distancing protocol at each public entrance to the					
Measu	ures to	Protect Employee Health (Check all that apply to the facility):					
	All em	ployees have been told not to come to work if sick.					
	Sympt	om checks are being conducted before employees may enter the work site.					
	All desks or individual work stations are separated by at least six feet.						
	Sleeping area, break rooms, bathrooms, and other common areas are being disinfected frequently.						
	Disinfectant, soap and water, hand sanitizer, and related supplies are available to a employees at the following location(s):						
		Portable toilets					
		Food areas such as: Preparation, dining, and other areas where food is consumed					
		Bathroom					
	Copies	of this protocol and COVID-19 Infection Prevention and Control Guidance has					

been distributed to all employees.

Measures to Prevent Crowds from Gathering (check all that apply to the facility):

	Limit the number of employees at any one time to allow for employees to easily maintain at least 6 feet distance from one another at all practicable times.
	MAX number of Employees:people
	Optional—describe other measures.
	N
Measu	res to Keep People At Least Six Feet Apart (check all that apply to the facility):
	Placing signs throughout the facility reminding employees to be at least six feet apart, including when in line to obtain meals.
	Placing tape or other markings at least six feet apart in employee line areas when obtaining meals with signs directing customers to use the markings to maintain distance.
	Separate employees in the eating areas to prevent customers from gathering.
	All employees have been instructed to maintain at least six feet distance from each other.
	Food being acquired from food trucks (Mobile Food Facility) must be obtained in smaller groups and eat in their rooms if area is not enough to maintain employees 6 feet apart from each other.
	Optional – describe other measures.

Measi	ures to Prevent Unnecessary Contact (check all that apply to the facility):		
	Preventing people from self-serving any items that are food-related.		
	☐ Utensil items are provided by staff.		
	☐ Bulk-item food bins are not available for employee self-service use.		
	Not permitting employees to bring their own bags, mugs/ utensil, or other reusable items.		
	□ Optional – describe other measures.		
	· · · · · · · · · · · · · · · · · · ·		
Measu	ures to Increase Sanitization (check all that apply to the facility):		
	Disinfecting wipes that are effective against COVID-19 are readily available.		
	Employee(s) assigned to disinfect personnel area regularly.		
	Hand sanitizer, soap and water, or effective disinfectants are available to the public at or near the entrance of the facility, at food delivery area, and anywhere else inside the facility or immediately outside where people have direct interactions.		
	Disinfecting all high-contact surfaces frequently.		
	Optional – describe other measures.		
	3		
	*		

^{**}Any additional measures not included here should be listed on separate pages, facility must attach to this document ***

ADVISORY FOR AGRICULTURAL WORKER PROTECTION DURING COVID-19 CRISIS ON THE CENTRAL COAST OF CALIFORNIA



County of Monterey



Monterey County Agricultural Commissioner



Monterey County Farm Bureau



Grower-Shipper Association of Central California



Monterey County Vintners & Growers Association



Coastal Growers Association



California Strawberry Commission

Maintaining safe and healthy work environments for our farmworkers and other Agricultural employees has always been a priority in the Agriculture industry. In order to prevent decrease and lower the impact of COVID-19 in the workplace, Monterey County leadership and the Agricultural industry have added enhanced measures to this Advisory to further protect worker health, safety, and hygiene. We recognize that, as an essential industry, we need to continue to provide and maintain the food supply chain while protecting the health of our workers and the broader community.

The Monterey County Agriculture Commissioner's Office and Supervisors Luis Alejo and Christopher Lopez, along with Grower-Shipper Association of Central California, Monterey County Farm Bureau, Monterey County Vintners and Growers Association, Coastal Growers Association, and California Strawberry Commission created an Advisory for Agriculture Worker Protection During COVID-19 Crisis to better protect farm and cannabis workers in Monterey County and throughout the state during the Coronavirus pandemic.

These processes were compiled based on reviews of our existing, already stringent practices, aligned with the best practices offered by the Center for Disease Control (CDC), CA Department of Public Health (CDPH), World Health Organization, and public health departments. As a world, we continue to learn more about how best to combat this pandemic, to that end, these guidelines are regularly evaluated, updated, and distributed in both English and Spanish.

Through this Advisory, all these organizations are supporting and encouraging the community to expeditiously implement these protective measures at their worksites. The objectives communicated here are: preventing and reducing transmission among staff; protecting people who are at higher risk for adverse health complications; maintaining business operations; and, minimizing adverse effects on other entities in their supply chains.

EMPLOYEE HYGIENE

- Employee should wash/sanitize their hands with soap and water for at least 20 seconds multiple times daily, including before and after work, breaks, eating, and use of toilet facilities.
 - If soap and water are not readily available, use a hand sanitizer that contains at least 60% alcohol.
 - o Employees should avoid touching their eyes, nose, and mouth with unwashed hands.
 - Have soap or disinfectant, potable water, and single-use disposable towels available at worksites and throughout facilities.
- Employees should keep a minimum distance of 6 feet from co-workers when possible; this
 includes during breaks (social distancing).
- Employees should avoid sharing personal items with co-workers (i.e. food, dishes, cups, gloves, engaging in activities such as playing cards, etc.).
- Employees should cover coughs and sneezes; train them in the following CDC protocol:
 - Cover their mouth and nose with a tissue or use the inside of their elbow.
 - o Throw used tissues in the trash.
 - Immediately wash their hands according to the CDEC hand washing protocol above.
- Reduce meetings and group gatherings to essential communication only and limit such meetings to no more than 10 people if possible.
- Limit personal contact and grouping with in the facility and worksites and limit the number of people using common facilities at any one time.
- Follow CDC guidelines on health and hygiene as they evolve.

ILL EMPLOYEES

- Require workers not to come to work if they are ill.
- Employees at work that develop symptoms of being ill should be sent home immediately.
- Observe work crews when they arrive to work.
 - o If ill, tell them to contact a medical provider or physician by phone before going to the medical office, clinic, or emergency room; another option is to contact a tele-doctor.
- If an employee tests positive for COVID-19, there is some immediate information that should be collected and actions taken to protect other employees and customers, and ensure transparent communication both internally and externally.

PAGE 2



County of Monterey



Monterey County Agricultural Commissioner



Monterey County Farm Bureau



Grower-Shipper Association of Central California



Monterey County Vintners & Growers Association



Coastal Growers Association



California Strawberry Commission

- These steps include the employee's work location, work hours, general and specific work duties, if the employee has traveled to multiple worksites recently with timing, and the last day the employee was at work; identify who has had contact with the employee.
- o If unable to verify that the ill employee's attending physician has contacted the public health department, and health authorities have not made direct contact with the employer, call the health department immediately.
 - Do not disclose the employee name unless asked to by the health dept.
- Health authorities will provide recommendations regarding the next steps in terms of identifying employees and further protective measures.
- This employee should follow the direction and guidance of the relevant health department or health professional regarding specific isolation and quarantine requirements.
- Quarantine or isolate H2 workers to protect employees and to minimize the risk of transmission to others.

PERFORM ROUTINE ENVRIONMENTAL CLEANING IN HIGH TRAFFIC AREAS

- Sanitize workspaces throughout the day.
- Clean and disinfect frequently touched surfaces and spaces according to CDC disinfection protocol, including:
 - Administrative, shipping/processing facilities, and any other enclosed areas where people work multiple times throughout the day.
 - Frequently touched areas including door handles, bathroom areas, lunchroom table and chairs, kitchen areas, shared space and facilities, time clock areas, shared computers, tools and any vehicles used at the facility (i.e. forklift or golf cart steering wheels) and more.
 - Utilize off-hours time to complete aggressive sanitation of frequently touched surfaces and spaces daily.
- Ensure that all bathrooms (portable and in place) are adequately stocked and serviced at regular intervals and disinfected as appropriate.
- Be considerate of social distancing recommendations when transporting employees and regularly sanitize worker transportation buses; make multiple trips as necessary.

TRAINING AND CHANGES TO PROCESS

- Train employees to follow these standard operating procedures while the Monterey County "Shelter-in-Place" and California "Stay-at-Home" Orders are in effect.
- Provide training on COVID-19 prevention using resources available form the CDC, CDPH, and local health departments.
 - Include training on appropriate hand washing and hygiene practices and sanitation processes.
 - o Any materials should be available in English and Spanish.
 - o Implement a practice of on-going training and daily follow-up.
- Encourage spacing of 6 feet between individuals while harvesting and processing; when not possible, provide appropriate persona protective equipment.
 - Implement social distancing recommendation when transporting employees, making multiple trips as necessary.
- Be responsive to the individual needs of each employee.
 - The state has specifically indicated populations at risk to be those over the age of 65, residents and farmworkers with underlying health issues, residential care patients, and all those who care for these individuals are uniquely at risk.
 - Understand which employees this guidance applies to; consider whether there are alternative work options or if their current job can be modified to ensure precautions are in place.
 - Be responsive to state guidance and respectful of their decisions related to that guidance.
- Encourage activities such as pre-assembly of cartons and pre-bagging when possible.
- Identify key processes and product and immediately cross-train employees in back-up positions, to be prepared when people must stay home.

PAGE 3



County of Monterey



Monterey County Agricultural Commissioner



Monterey County Farm Bureau



Grower-Shipper Association of Central California



Monterey County Vintners & Growers Association



Coastal Growers Association



California Strawberry Commission

LIMIT NON-ESSENTIAL VISITS AND TRAVEL

- Limit visitors to those necessary for the operation.
- To limit exposure of employees, emphasize on-line ordering for any direct to consumer sales with outside pick-up or delivery options.
- Visitors must be approved before arriving, and employees should keep social distancing (6 feet) away from any visitor.
- Encourage employees to be safe outside of work and follow the Monterey County "Shelter-in-Place" and California "Stay-at-Home" Orders when not at work, as well as all CDC recommendations.
- Eliminate all non-essential and non-related services, including entertainment activities.

EMPLOYER-PROVIDED EMPLOYEE HOUSING

- Conduct training detailing site-specific and personal protective measures to safeguard against contraction and transmission of COVID-19.
 - o This includes training upon arrival for all employees (and guest workers).
 - Training should be based on public health guidance from the CDC, OSHA, state, and local public health authorities, as is specific to COVID-19.
- Train employees to respect social distancing practices (6 feet), as is feasible for the site-specific area, including but not limited to living quarters.
 - In addition to this training, incorporate observation as is appropriate, protective, respectful, and necessary in order to create a safe living environment.
 - Assign and communicate a common point of contact for employee questions, requests, and needs.
 - Establish an actively monitored emergency reporting system.
- Implement site-specific risk assessments and tailor protective practices to address risks.
 - Risks may dictate type and frequency of implementation of protective measures, such as cleaning and sanitation for high-contact areas and surfaces.

REFERENCES AND RESOURCES

Center for Disease Control

- https://www.cdc.gov/coronavirus/2019-ncov/php/risk-assessment.html
- https://www.cdc.gov/coronavirus/2019-ncov/downloads/public-health-management-decision-making.pdf
- https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html 019-ncov%2Fspecific-groups%2Fguidance-business-response.html
- https://www.cdc.gov/coronavirus/2019-ncov/faq.html#spreads

State of California

https://covid19.ca.gov/

Monterey County Public Health

https://www.co.monterey.ca.us/government/departments-a-h/health/

San Benito County Public Health

https://hhsa.cosb.us/publichealth/

Santa Clara County Public Health

https://www.sccgov.org/sites/phd/Pages/phd.aspx

Santa Cruz County Public Health

https://www.santacruzhealth.org/

Occupational Safety and Health Administration (OSHA)

https://www.osha.gov/SLTC/covid-19/controlprevention.html

California Strawberry Commission

- https://www.calstrawberry.com/en.us/Coronavirus
- https://www.calstrawberry.com/en.us/Food-Safety/Tools-for-Food-Safety

Communication Resources

- COVID-19 Posters (English & Spanish)
 - o Prevention Posters
 - Alert Posters
 - https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Immunization/ncov2019. aspx

VARIANCE TO STAGE 2 OF CALIFORNIA'S ROADMAP TO MODIFY THE STAY-AT-HOME ORDER



COVID-19 VARIANCE ATTESTATION FORM

FOR Monterey County

Appendix VII

Letter of Support from:

- A. Monterey County Board of Supervisors
- B. City of Carmel-by-the-Sea
- C. City of Gonzales
- D. City of King City
- E. City of Monterey
- F. City of Pacific Grove
- G. City of Salinas
- H. City of Sand City
- I. City of Seaside

MONTEREY COUNTY



BOARD OF SUPERVISORS

LUIS A. ALEJO, District 1 JOHN M. PHILLIPS, District 2 CHRIS M. LOPEZ, Chair, District 3 JANE PARKER, Vice Chair, District 4 MARY ADAMS, District 5

May 26, 2020

The Honorable Gavin Newsom, Governor of California California State Capitol Sacramento, CA 95814

The Honorable Mark Ghaly, MD Secretary, CA Health and Human Services Agency 160 Ninth Street, Room 460 Sacramento, CA 95814

The Honorable Sonia Y. Angell, MD State Public Health Officer and California Department of Public Health Director P.O. Box 997377 MS 0500 Sacramento, CA 95899

Re: Variance Attestation by Monterey County Health Officer

Dear Governor Newsom, Secretary Ghaly, and Director Angell:

The Board of Supervisors of the County of Monterey is pleased to provide you with its strong and unanimous support for the attestation that the County's Health Officer, Dr. Edward Moreno, is making with respect to meeting the readiness criteria set forth in the May 18, 2020, COVID-19 County Variance Attestation Form. The Board understands that the purpose of the Form is to permit counties, that are able to demonstrate an ability to protect the public and essential workers, to progress more quickly through Stage 2 of the State's Roadmap to Pandemic Resilience. The County of Monterey is now one of those counties.

During the COVID-19 pandemic, Dr. Moreno has kept the Board of Supervisors and the public apprised of the very latest information through regular briefings and press availability. In addition, Dr. Moreno has conducted weekly briefings with local city leaders with this constant communication leading to robust support by city leaders. The Board believes that the shelter in place orders issued by Dr. Moreno since the Governor's proclamation of a state of emergency on March 4, 2020, and the public's compliance with those orders, have helped to "flatten the curve" of the virus in the County, and have allowed Dr. Moreno to now execute the updated attestation.

Hon. Gavin Newsom Hon. Mark Ghaly, MD Hon. Sonia Y. Angell, MD

Re: Monterey County Variance Attestation

Page 2

We strongly agree with each element of the attestation that Dr. Moreno has executed. He and his staff, with the support of the County Health Department and the Emergency Operations Center, are actively monitoring infection through epidemiology, implementing alternative sheltering measures where necessary, offering a sufficient amount of testing and contact tracing, monitoring hospital capacity and plans for surge, and protecting vulnerable populations. The Board supports the need to protect vulnerable populations, continue social distancing, and monitor indicators that may trigger the need to reinstate more restrictive measures. The County has also made available guidance for our essential critical infrastructure workforce on how to structure the physical environment to protect essential workers. We also have sufficient personal protective equipment (PPE) to protect our essential workers, both now and as we move further in Stage 2.

As you may know, the wine industry is an important sector of the County's economy, and there are numerous wineries and tasting rooms throughout our communities. We therefore strongly encourage and support the inclusion of Wineries and Tasting Rooms as businesses that the State deems eligible for reopening in Stage 2, with appropriate social distancing and other protective measures, and the Board appreciates your consideration of that issue.

In conclusion, the Board of Supervisors strongly supports the attestation by Dr. Moreno that the County can meet the readiness criteria outlined by the CDPH to allow for progressing more quickly through Stage 2 of the Governor's Roadmap to Pandemic Resilience. Thank you for the opportunity for the Board of Supervisors to express its support.

Sincerely.

Chris M. Lopez

Chair, Board of Supervisors

cc: Supervisor Luis Alejo
Supervisor John Phillips
Supervisor Jane Parker
Supervisor Mary Adams
Dr. Edward Moreno, County Health Officer
Charles J. McKee, County Administrative Officer
Elsa Jimenez, Health Department Director
Leslie J. Girard, County Counsel

City of Carmel-by-the-Sea

POST OFFICE BOX CC CARMEL-BY-THE-SEA, CA 93921 (831) 620-2000

May 21, 2020

To the Monterey County Board of Supervisors:

I am writing on behalf of the City of Carmel-by-the-Sea to express my full support of the County of Monterey's request for a local variance to the Pandemic Roadmap prepared by the State of California.

In view of the small and localized numbers of COVID-19 infections in Monterey County, the markedly increased testing capacity, the robust contact-tracing program in place and the excellent surge capacity of the hospitals, Monterey County is in an excellent position to progress into Stage 2.

The hospitality industry drives the economy of the Monterey Peninsula. Our local hospitality business, restaurant, and retail shop owners have been working diligently to develop protocols that provide for the safety of employees and the public by consulting local industry experts, along with state, national and international guidelines. The protocols were submitted to the Board of Supervisors for review earlier this month.

The City of Carmel-by-the-Sea will continue to support the County of Monterey in its effort to reduce the spread of COVID-19 and is poised to assist the County in meeting and following the established criteria and procedures to continue to keep COVID-19 stable in the County.

We thank you in advance for all of your hard work and assistance during these unprecedented times.

Sincerely Yours,

Dave Pottter, Mayor

Van Pollen

Carmel-by-the-Sea



City of Gonzales

P.O. BOX 647 PHONE: (831) 675-5000

147 FOURTH ST. FAX: (831) 675-2644

GONZALES, CALIFORNIA 93926 www.gonzalesca.gov

May 22, 2020

Chris Lopez, Chair

Maria Orozco Mayor Monterey County Board of Supervisors 168 West Alisal Street, 1st Floor

Salinas, CA 93901

Scott Funk Mayor Pro Tem

RE: County Seeking a Variance from the State of California for Stage 2 Reopening During the COVID-19 State of Emergency

Liz Silva Councilmember Dear Chair Lopez:

Thank you for requesting input from the Cities on the County seeking a variance from the State of California for Stage 2 Reopening during the COVID-19 State of Emergency. The City of Gonzales appreciates the request and is in support of the County seeking the Variance.

Paul Miller

Councilmember

Lorraine Worthy

Councilmember

We look forward to continuing to work in partnership with the County and the other Cities in the planning process and implementation, as we move through Stage 2 and subsequent stages. In addition, we look forward to maintaining the strong communication between the County and Cities that has proven invaluable during this state of emergency and has allowed us to work with all segments of our communities as we steer through this health crisis.

René L. Mendez City Manager

It is important to note that during the COVID-19 pandemic, Dr. Edward Moreno, County Health Officer, has demonstrated the leadership and foresight to implement the necessary mitigation measure strategies that have helped flatten the curve. The City supports the need to continue the necessary mitigation measures to ensure the health of our community.

We look forward to continuing to work with the County and County Health Officer to find the balance necessary to start reopening the economy while continuing to ensure the community's health; and as such, are supportive of the County seeking a variance from the State.

Sincerely.

Maria Órozco

The Honorable Mayor

City of Gonzales

cc:

Charles McKee, County Administrative Officer Valerie Ralph, Clerk of the Board of Supervisors

Gonzales will continue to be a safe, clean, family-friendly community, diverse in heritage, and committed to working collaboratively to preserve and retain its small town charm



May 22, 2020

The Honorable Chair and Members of the Board of Supervisors County of Monterey 168 West Alisal Street Salinas, CA 93901

RE: Monterey County COVID-19 Variance Attestation

Dear Chair Lopez and Board Members:

The City Council of the City of King has voted unanimously to support Monterey County's request for a variance to progress into the next phase of Stage 2 of the California Resilience Roadmap for State Reopening. We believe Monterey County meets the readiness criteria and has demonstrated the ability to expand reopening businesses while containing the spread of COVID-19.

The City of King has been working in close partnership with County agencies, the other South Monterey County cities, other agencies throughout the County and region, and the City's multi-agency Emergency Response Committee. We have partnered with the business community to educate and achieve timely compliance in every step of the Shelter in Place Orders issued by the Governor and County Public Health Officer. Mee Memorial Hospital has worked closely with us and continues to maintain an excess of surge capacity. City staff, agricultural employers and the County Agricultural Commissioner have coordinated on a model effort to protect the health of seasonal workers. The City Council has even adopted an urgency ordinance establishing the City's own enforcement process to implement the County Health Officer's Orders in the most effective manner.

These partnerships, the leadership of the County and County Health Officer, and the tremendous response by our community has resulted in a very low experience of COVID-19 cases in King City. We believe that this success, increased testing capacity, and the contact tracing program positions Monterey County to effectively move forward in the reopening process. It will help provide critical support for our businesses and workers.

The City of King commits to continue its support for the County of Monterey to reduce the spread of COVID-19, to follow the State's established criteria and procedures, and to help ensure the success of the reopening process.

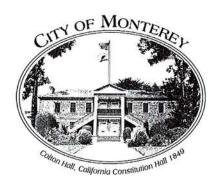
Thank you for your consideration of our input.

120

Sincerely,

Mike LeBarre

Mayor



May 21, 2020

The Honorable Gavin Newsom Governor of California State Capitol Sacramento, CA 95814

RE: Monterey County COVID-19 Variance Readiness

Dear Governor Newsom:

I support Monterey County's statement of readiness criteria, outlined and supported by the following County document:

Monterey County Health Department Public Health Bureau Current as of May 18, 2020 COVID-19 Milestones/Indicators, to allow for further progression into Stage 2 of the Governor's Pandemic Roadmap.

Monterey County should have the opportunity to demonstrate the ability to protect the public and essential workers and to progress further into Stage 2 by reopening additional businesses and workplaces in a safely monitored program consistent with your Executive Orders.

Monterey County is actively monitoring infection through epidemiology, implementing containment measures, protecting essential workers, increasing testing and contact tracing capacities, monitoring hospital capacity and plans for surge, and protecting vulnerable populations.

Also, I support the continued need to protect vulnerable populations, continue social distancing, and monitor indicators that may trigger the need to reinstate more restrictive measures.

Careful monitoring of reopenings, testing, tracing, and social distancing are the core actions needed going forward by Monterey County.

Sincerely,

Mayor Clyde Roberson

Uyde Roberson



March 20, 2020

The Honorable Gavin Newsom Governor of California State Capitol Sacramento, CA 95814

RE: Monterey County COVID-19 Variance Attestation

Dear Governor Newsom:

The City of Pacific Grove fully supports Monterey County's attestation of readiness criteria, outlined by the CDPH, to allow for further progression into Stage 2 of the Governor's Pandemic Roadmap.

We appreciate that the purpose of this attestation is to permit Monterey County to demonstrate the ability to protect the public and essential workers and to progress further into Stage 2 by reopening additional businesses and workplaces.

During the COVID-19 pandemic, Dr. Edward Moreno, Monterey County Health Officer, has demonstrated public health leadership and implemented community mitigation strategies that have helped Monterey County flatten the curve.

Monterey County is actively monitoring infection through epidemiology, implementing containment measures, protecting essential workers, increasing testing and contact tracing capacities, monitoring hospitals capacity and plans for surge, and protecting vulnerable populations.

The City supports the continued need to protect vulnerable populations, continue social distancing, and monitor indicators that may trigger the need to reinstate more restrictive measures.

At the same time, it is important to find a balance that allows for some businesses to reopen while ensuring the community's health. Monterey County's plan to proceed with a variance to allow more businesses and workplaces to open is good for our community.

Sincerely,

Bill Peake, Mayor

City of Pacific Grove

Bill Peake

Mary Adams, Monterey County District 5 Supervisor City Councilmembers City Manager City Clerk Cc:



May 21, 2020

Chris Lopez

Monterey County Supervisor – District 3

Via Email - LopezCM@co.monterey.ca.us

Dear Chair Lopez,

I write in support of the variance attestation for more rapid movement through Stage 2 of California's roadmap to modify the Stay at Home Order. Monterey County has demonstrated the stability required in all the readiness requirements of the State. The data shows the County is meeting epidemiologic, protection of Stage I essential workers, testing capacity, containment capacity, and hospital capacity.

Our City has been working with the County to protect the most vulnerable residents, seniors and the homeless. We have initiated food programs for our seniors and homeless. We have secured additional trailers to house our homeless in addition to the joint city-county warming shelter and added beds at our Chinatown Navigation Center. Our Police, Fire and other essential workers have continued to work with the County to stop the spread of the coronavirus and to enforce the Shelter in Place Orders. We have worked with the County to secure our facilities for alternative housing sites and testing sites. Our partnership has made a difference in protecting the public health of our citizens.

It is now time for more rapid movement through Stage 2. We have been working with our community and our businesses. They are ready to move to the next step to reopen our local economy. We look forward to our partnership and moving our City and County toward recovery.

Sincerely,

Joe Gunter

Mayor

City of Salinas

May 20, 2020



COUNTY ADMINISTRATIVE OFFICER COUNTY OF MONTEREY 168 WEST ALISAL STREET SALINAS, CA 93901

Re: Covid-19 Stage 2 Variance Attestation

Mr. McKee:

It is our understanding that the County of Monterey will consider pursuing a variance to allow for the re-opening of businesses more quickly than the State's Roadmap Stage 2 allows. We fully support the variance, and look forward to working with the Health Officer and the Board of Supervisors to successfully and promptly transition through the phases of reopening.

Have a great day!

Aaron Blair City Manager City of Sand City, CA 1 Pendergrass Way Sand City, CA 93955 Ph. 831.394.3054

OFFICE OF THE CITY MANAGER



440 Harcourt Avenue Seaside, CA 93955 www.ci.seaside.ca.us

Telephone 831-899-6701 Fax 831-624-5839

May 21, 2020

The Honorable Gavin Newsom Governor of California State Capitol Sacramento, CA 95814

RE: Monterey County COVID-19 Variance Attestation

Dear Governor Newsom:

The City of Seaside fully supports Monterey County's attestation of readiness criteria, outlined by the CDPH, to allow for further progression into Stage 2 of the Governor's Pandemic Roadmap.

We appreciate that the purpose of this attestation is to permit Monterey County to demonstrate the ability to protect the public and essential workers and to progress further into Stage 2 by reopening additional businesses and workplaces.

During the COVID-19 pandemic, Dr. Edward Moreno, Monterey County Health Officer, has demonstrated public health leadership and implemented community mitigation strategies that have helped Monterey County flatten the curve.

Monterey County is actively monitoring infection through epidemiology, implementing containment measures, protecting essential workers, increasing testing and contact tracing capacities, monitoring hospitals capacity and plans for surge, and protecting vulnerable populations.

The City supports the continued need to protect vulnerable populations, continue social distancing, and monitor indicators that may trigger the need to reinstate more restrictive measures.

At the same time, it is important to find a balance that allows for some businesses to reopen while ensuring the community's health. Monterey County's plan to proceed with a variance to allow more businesses and workplaces to open is good for our community.

Sincerely,

Very truly yours,

Mayor Ian Oglesby and City Council

VARIANCE TO STAGE 2 OF CALIFORNIA'S ROADMAP TO MODIFY THE STAY-AT-HOME ORDER



COVID-19 VARIANCE ATTESTATION FORM

FOR Monterey County

Appendix VIII

Letter of Support from:

- A. Community Hospital of the Monterey Peninsula
- B. Natividad Medical Center
- C. Mee Memorial Hospital
- D. Salinas Valley Memorial Hospital



May 20, 2020

Edward Moreno, MD, MPH Health Officer and Public Health Director Monterey County Health Department 1270 Natividad Road Salinas, CA 93906

Dear Dr. Moreno,

Community Hospital of the Monterey Peninsula (CHOMP) understands that you are attesting that the County of Monterey has met the California Department of Public Health's readiness criteria to advance through stage 2 of the Governor's Roadmap to Resilience. All four Monterey County hospitals have been working closely with the Health Department and have been meeting regularly since early 2020 on a coordinated COVID-19 response effort. This ongoing collaboration of healthcare leadership, infectious disease experts, and Health Department staff has been an invaluable platform for educational updates, resource sharing, coordination of response, consensus and coordination of surge planning, and identification of gaps in the healthcare sector in the COVID-19 response.

We agree with your assessment that Monterey County is actively monitoring infection through epidemiology, implementing containment measures when needed, offering an adequate amount of testing, monitoring hospital capacity and plans for surge, and protecting vulnerable populations. We believe that Monterey County has been fortunate in maintaining the low case count and low number of fatalities due to a variety of factors including the concerted efforts of public health and healthcare leaders, our population density, the early implementation of shelter-in-place orders and, most importantly, an engaged and compliant public response to said orders.

Community Hospital of the Monterey Peninsula supports your attestation that the County has met the readiness criteria outlined by the California Department of Public Health to increase the pace at which the County advances through Stage 2 of the Governor's Pandemic Roadmap. As CEO of CHOMP, I affirm that we have the capacity of hospital beds, ICU beds, ventilators and PPE that meet and exceed the State's mandated 35% surge capacity requirements. Over the course of the pandemic we have put procedures in place to ensure the health and safety of our patients and our staff. We will continue to maintain and enhance these procedures as evolving best practices emerge.

Community Hospital of the Monterey Peninsula supports the need to protect vulnerable populations, continue social distancing and the use of facial coverings, while maintaining continued heighted vigilance for a potential resurgence of COVID-19 cases. Monterey County's plan for reopening is good

for health, good for business and good for our community. We support the County's current plan to mindfully and carefully advance through Stage 2 and beyond.

Sincerely,

Steven Packer, M.D.

President/Chief Executive Officer Community Hospital of the Monterey Peninsula Montage Health

CC:

Supervisor Luis Alejo - <u>alejol@co.monterey.ca.us</u>
Supervisor John M. Phillips - <u>phillipsjm@co.monterey.ca.us</u>
Supervisor Chris Lopez - <u>lopezcm@co.monterey.ca.us</u>
Supervisor Jane Parker - <u>parkerj@co.monterey.ca.us</u>
Supervisor Mary Adams - <u>Adamsml@co.monterey.ca.us</u>



May 19, 2020

Edward Moreno, MD, MPH Health Officer and Public Health Director Monterey County Health Department 1270 Natividad Road Salinas, CA 93906

Dear Dr. Moreno,

Natividad Medical Center (NMC) understands that you are attesting that the County has met the California Department of Public Health's readiness criteria to advance more quickly through stage 2 of the Governor's Roadmap to Resilience. All four Monterey County hospitals have been working closely with the Health Department and have been meeting regularly since early 2020 on a coordinated COVID-19 response effort. These convenings of healthcare leadership, infectious disease experts, and Health Department staff have been an invaluable platform for educational updates, resource sharing, coordination of response, consensus and coordination of surge planning, and identification of gaps in the healthcare sector in the COVID-19 response.

We strongly agree with your assessment that Monterey County is actively monitoring infection through epidemiology, implementing containment measures when needed, offering an adequate amount of testing, monitoring hospital capacity and plans for surge, and protecting vulnerable populations. We believe that Monterey County has been fortunate in maintaining the case count and number of fatalities low due to the exceptional leadership exhibited by County Health Department officials and support from County Administration and the Board of Supervisors.

Natividad Medical Center supports your attestation that the County has met the readiness criteria outlined by the California Department of Public Health to increase the pace at which the County advances through Stage 2 of the Governor's Pandemic Roadmap. As CEO of NMC, I affirm that we have the capacity of hospital beds, ICU beds, ventilators and PPE to handle not only standard patient care as well as potential surge due to COVID-19 and will continue to work collaboratively with the Health Department and other area hospitals.

I support the need to protect vulnerable populations, continue social distancing and mandatory facial coverings, all-the-while maintaining a heightened sense that we may ultimately need to reinstate protective measures. A healthy business community and a healthy community are one and the same. Monterey County's plan for reopening is good for health, good for business and good for our community. We maintain our support of the County as we advance through Stage 2 and beyond.

Sincerely,

Gary R. Gray, D.O. Chief Executive Officer Natividad Medical Center



May 19, 2020

Edward Moreno, MD, MPH
Health Officer and Public Health Director
Monterey County Health Department
1270 Natividad Road
Salinas, CA 93906

Dear Dr. Moreno,

George L. Mee Memorial Hospital understands that you are attesting that the County has met the California Department of Public Health's readiness criteria to advance more quickly through stage 2 of the Governor's Roadmap to Resilience. All four Monterey County hospitals have been working closely with the Health Department and have been meeting regularly since early 2020 on a coordinated COVID-19 response effort. These convenings of healthcare leadership, infectious disease experts, and Health Department staff have been an invaluable platform for educational updates, resource sharing, coordination of response, consensus and coordination of surge planning, and identification of gaps in the healthcare sector in the COVID-19 response.

We strongly agree with your assessment that Monterey County is actively monitoring infection through epidemiology, implementing containment measures when needed, offering an adequate amount of testing, monitoring hospital capacity and plans for surge, and protecting vulnerable populations. We believe that Monterey County has been fortunate in maintaining the case count and number of fatalities low due to the exceptional leadership exhibited by County Health Department officials and support from County Administration and the Board of Supervisors.

Mee Memorial supports your attestation that the County has met the readiness criteria outlined by the California Department of Public Health to increase the pace at which the County advances through Stage 2 of the Governor's Pandemic Roadmap. As CEO of Mee Memorial, I affirm that we have the capacity of hospital beds, ICU beds, ventilators and PPE to handle not only standard patient care as well as potential surge due to COVID-19 and will continue to work collaboratively with the Health Department and other area hospitals.

I support the need to protect vulnerable populations, continue social distancing and facial coverings, all-the-while maintaining a heightened sense that we may ultimately need to reinstate restrictive measures. A healthy business community and a healthy community are one and the same. Monterey County's plan for reopening is good for health, good for business and good for our community. We maintain our support of the County as we advance through Stage 2 and beyond.

Sincerely,

Rena Salamacha, BS, MS Chief Executive Officer

George L. Mee Memorial Hospital

skna Salamuha



May 20, 2020

Ed Moreno, MD, MPH Health Officer and Public Health Director Monterey County Health Department 1270 Natividad Road Salinas, CA 93906

Dear Dr. Moreno:

Thank you for your request for input on Monterey County's Attestation for Readiness to move through Stage 2 of California's modification of the stay-at-home order. I have appreciated the collaborative nature of the county's approach to the COVID-19 collective response. All four Monterey County hospitals have been working closely with the Health Department and have been meeting regularly on a coordinated COVID-19 response effort. This convening of healthcare leadership, infectious disease experts, and Health Department staff has been an invaluable platform for educational updates, resource sharing, coordination of response, consensus and coordination of surge planning, and identification of gaps in the COVID-19 response. I look forward to continued mutual support as we work toward creating the safest possible environment for the residents of our region.

Our position all along has been that COVID-19 is an unprecedented situation that requires actions that would have been difficult to even imagine prior to 2020. Like everyone else, we want to get back to normal quickly and safely through a careful re-opening process. As we move toward a broader re-opening of our county in Stage 2, I know that you are currently assessing the county's readiness based on various criteria. Monterey County is actively monitoring infection through epidemiology, implementing containment measures when needed, offering testing, and monitoring hospital capacity and plans for surge. We believe that Monterey County has been fortunate in maintaining a relatively low case count and number of fatalities, due primarily to the stay-at-home-order issued by your office

I want to provide some specific information that relates to the experience within our own healthcare system that I believe highlights the need to proceed deliberately and with caution.

Hospital Census of COVID-19 Patients

Salinas Valley Memorial Hospital has seen a steadily increasing volume of positive COVID-19 patients. To date, our 7-day average census of COVID-19 cases is 3.9, which represents a 63% increase over just one week ago. Our COVID-19 census has never been higher than it is on the day of this writing.

Surge Capacity

Our COVID-19 planning and response has included surge capacity preparations from the very beginning. The unit currently housing COVID-19 patients at Salinas Valley Memorial Hospital can handle a census of 14, with plans to open a sequence of identified units in order to significantly increase capacity.

Personal Protective Equipment (PPE)

Salinas Valley Memorial Healthcare System has instituted a rigorous process around the sourcing and acquisition of personal protective equipment (PPE) in order to keep our staff and patients safe. Our leadership team meets daily to review current supply levels, usage rates, and prospective sources and orders of equipment. We are also instituting a practice to repurpose N95 masks to conserve our supply. While we currently have an adequate level of PPE, we have ongoing concerns related to identifying a reliable supply chain.

Testing Capabilities

We greatly appreciate the extraordinary support of the Monterey County Health Department with respect to providing county based testing and attempting to facilitate our acquisition of rapid, in house COVID-19 test kits. We believe there is adequate testing throughout the community (for outpatient testing/screening); but remain concerned about securing adequate hospital based testing capability.

I hope this additional context helps more fully inform the county's decision-making process.

As the county's partner in health, Salinas Valley Memorial Healthcare System will support your attestation that the county is actively engaged in addressing the criteria outlined by the California Department of Public Health to advance through Stage 2 of the Governor's Roadmap to Resilience. We also support the need to protect vulnerable populations, continue social distancing and facial coverings. Moving forward, we ask that there be a high level of daily scrutiny as certain guidelines are relaxed, and that we act quickly to restore the previous health and safety measures if the need arises. Making that type of decision to reverse course would be difficult, but necessary.

Thank you for all you are doing to lead our county through this pandemic. I look forward to our future collaborations.

Sincerely,

Pete Delgado President/CEO

VARIANCE TO STAGE 2 OF CALIFORNIA'S ROADMAP TO MODIFY THE STAY-AT-HOME ORDER



COVID-19 VARIANCE ATTESTATION FORM

FOR Monterey County

Appendix IX

A. County Plan for Moving Through Stage Two



OUNTY OF MONTEREY IEALTH DEPARTMENT

Elsa Jimenez, Director of Health

Administration Behavioral Health

Clinic Services **Emergency Medical Services** Environmental Health/Animal Services

Public Health Public Administrator/Public Guardian

Nationally Accredited for Providing Quality Health Services

County Plan for Moving Through Stage Two

On May 4, 2020, an updated Health Officer Shelter in Place Order took effect lifting restrictions on the following lower risk services through May 31, 2020:

- Childcare establishments, summer camps, and other educational or recreational institutions or programs providing care for children of essential workers
- Faith based services provided through streaming or similar technology including drivein services
- Office-based businesses with telework still being highly encouraged
- Landscaping, gardening and nurseries
- All construction
- Golf courses and driving ranges
- Clarification on residential transactions including rentals, leases, and home sales
- Clarification on in-person vehicle sales
- Clarification on allowance of first responder training
- Reopening of fabric and craft stores for the purpose of supplying materials for face coverings and gowns and personal protective equipment
- Wearing a face covering whenever in the public consistent with Face Covering Health Officer Order issued April 28, 2020

On May 8, 2020, a Supplemental Order to Monterey County's Shelter-in-Place Order was issued in alignment with the modified State Health Officer Stay-at-Home Order issued May 7, 2020 which facilitated Monterey County moving into the early phase of Stage 2 of the COVID-19 reopening process. This Supplemental Order allowed additional lower risk retail businesses and associated manufacturing and supply chain businesses to resume with modifications. Retail businesses (bookstores, clothing stores, toy stores, etc.) could provide services to the public via curbside pick-up and delivery with prohibition of displaying goods on sidewalks.

Many of the retailers have resumed business for curbside pick and delivery only without any challenges and in compliance with the Health Officer Orders. Childcare facilities developed plans for re-opening, and many have reopened to be available for essential workers. The other sectors with lifted restrictions have also resumed in compliance with the Health Officer Order and Sector specific requirements issued by the State. Conversations continue with parks administrators regarding planning for reopening parks in the coming weeks as well as planning for summer youth camps to provide childcare to working families.

Additionally, some of our area hospitals and licensed health care facilities have resumed deferred and elective services and procedures. These services will continue through Stage 2 based on capacity and availability of PPE at each individual facility. Other disciplines such as dentistry are considering resumption of deferred and non-emergent procedures.

On May 18, 2020, the State expanded the list of businesses that could open with modification as part of Early Stage 2. Monterey County is in the process of reviewing the list of businesses that may open as part of Early Stage 2. These include:

- Childcare for those outside of essential workforce
- Personal services, limited to car washes, pet grooming, dog walking, cleaning and janitorial services.
- Outdoor museums, and open gallery spaces and other public spaces with modifications, not including zoos, amusement parks, indoor galleries or museum spaces.
- Library curb side pick-up.

Monterey County will take into consideration these businesses and may include all or some of them in the next Supplemental Order to be issued. In addition, once Monterey County's Attestation is approved and posted on CDPH's website, Expanded Stage 2 with Attestation businesses may be included in the Supplemental Order. These include:

- Destination retail (retail stores), including shopping malls and swap meets
- Dine-in restaurants (other amenities, like bars or gaming areas, are not permitted in Stage 2)
- · Schools with modifications

Monterey County formed Ad Hoc Committees comprised of industry leaders, labor leaders, and others to prepare for a broader reopening of our economy. These Committees are tasked with developing draft plans, protocols, recommendations, and advisories for their sector/industry and presenting to Monterey County Health officials for their review. These Ad Hoc Committees are staffed by the Board of Supervisors and include:

- Agricultural
- Construction
- Hospitality
- Non-Hospital Medical/Personal Services
- Religious Organizations

Monterey County officials will continue to work with sectors to be permitted to reopen in the coming weeks on their plans to adhere to CDPH sector guidance. These Ad Hoc Committees will be instrumental in reviewing CDPH guidance and determining actions needed to comply with State requirements to resume business.

Monterey County intends to submit the Attestation to CDPH by May 31, 2020.